



# OLDER PEOPLE SPECIALIST GROUP

Spring 2026

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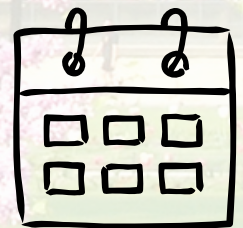
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**SAVE THE DATE**  
**BDA OPSG AGM**

**THURSDAY 30 APRIL 12:00-13:30**



The BDA OPSG AGM is round the corner - remember to look out for your invitation, which we will e-mail to you in the next weeks. There will be three guest speakers. First, Kato Lambrechts, winner of the **BDA Research Symposium Healthy Ageing, Frailty and Older Adult stream**, will present the findings of a research project, supported by AgeUK Barnet, on **skin health and ageing**. Ruth Stow and Claire McEvoy will launch a brand-new resource on preparing research abstracts. Please send your questions or draft abstracts to them before the AGM for feedback and to help them answer your questions. We hope to see you all there.

# Goodbye to Jen Grant, OPSG chair



*Big smiles after a long day of planning –*

*Back row from left to right:  
Ruth Stow, Claire McEvoy, Alison Smith, Jen Grant, Kato Lambrechts, David Gray, Lucy Marland,  
Front row from left to right: Lexi Rees and Elaine Lane*

On 13 February, the OPSG committee met face-to-face at the BDA offices in Birmingham to plan for the year ahead. Jen Grant announced at the meeting that she will be stepping down as chair. **Alison Smith**, who will take on chairperson responsibilities together with David Gray, speaks on behalf of the committee when she says that ‘we are sad to see our OPSG chair Jen step down so suddenly, but absolutely support her decision to do so and hope to see her on the committee again in the future. Jen has successfully led our committee and specialist group for the past 18 months and has continued to champion the needs of older adults. Her particular focus on how the provision of food and drink can and should deliver so much more than just nutrition and hydration has been inspirational.’

We are also saying **goodbye to Selena Evans**, who has done a fantastic job in designing and maintaining the age OPSG site on the BDA webpage, and coordinating and designing the OPSG newsletter. Our heartfelt thanks for your hard work and leaving behind a well-functioning website and newsletter to benefit our members.

# The BDA OPSG Research and Education Grant

The OPSG committee would like to remind members of our research and education grant, created to support projects that enhance nutrition and dietetic practice for older people.

## Who can apply?

UK-based dietitians (at any career stage) and dietetic students who are members of OPSG. Applications should include a short statement of support from a line manager or supervisor.

How much can be applied for?

OPSG members can apply for grants of up to £500, awarded on a rolling basis throughout the year.

## What can be funded?

- **Education:** for example, study days, training courses
- **Research:** for example, audits, evaluations, small-scale projects

Applications should clearly show how the activity will support personal and professional development, and how it will contribute to advancing nutrition for older people.

## Sharing your work

Successful applicants will be asked to disseminate their findings either through the OPSG newsletter or by submitting an abstract to the Healthy Ageing, Frailty, and Older Adults stream at the annual BDA Research Symposium.

## How to apply?

Applications can be made online using this link:

*click here!*

Grant applications will be reviewed by members of the OPSG committee. If you have any questions, please contact Claire McEvoy: [c.mcevoy@qub.ac.uk](mailto:c.mcevoy@qub.ac.uk) or Ruth Stow: [ad9401@coventry.ac.uk](mailto:ad9401@coventry.ac.uk)

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# Muscle meets metabolism: managing sarcopenic obesity

**Missed our December webinar, or keen to revisit the key points?  
Joanna MaCarthy has summarised the key take-aways below**

In her presentation, **Jade Sampford** defined sarcopenia as the age-related loss of skeletal muscle mass and strength, associated with frailty, falls and functional decline. Sarcopenic obesity — the coexistence of obesity and sarcopenia — is increasingly recognised as leading to poorer clinical outcomes, with European Association for the Study of Obesity (EASO) guidance reinforcing the need for greater awareness in practice.

Jade discussed screening and diagnosis, including the use of the Strength, Assistance with walking, Rising from a chair, Climbing stairs, and Falls (SARC-F) questionnaire, a functional tool assessing strength and mobility. She emphasised the importance of looking beyond BMI to assess muscle quality and function. Mechanisms underpinning sarcopenic obesity include reduced muscle protein synthesis and increased protein breakdown with ageing. Jade also reinforced the vital role of skeletal muscle in metabolic health, and clarified what we mean by lean body mass and fat-free mass.

She emphasised the importance of the UK government's physical activity guidance, which recommends at least 150 minutes of moderate activity or 75 minutes of vigorous activity weekly, with particular emphasis on resistance training to stimulate muscle protein synthesis and preserve muscle mass.



**Zoe Griffiths**, in turn, focused on the dietetic management of sarcopenic obesity. A central theme was that treatment should prioritise the quality of weight loss, ensuring preservation of fat-free mass (FFM). Strategies include moderate energy restriction, higher protein intake, resistance exercise, and consideration of vitamin D and calcium where appropriate. Protein requirements should be individualised, calculated carefully, and ideally achieved through a food-based approach, with supplementation where necessary.

Evidence suggests that combined dietary and exercise interventions produce more favourable body composition outcomes than either approach alone. To explore the topic further, please visit the BDA OPSG site for the recording and slides.

# Embedding Nutrition into Community Falls Prevention: Key Findings and Implications for Dietetic Practice

Falls remain a major and escalating public health concern across the UK, costing the NHS over £2.3 billion annually and disproportionately affecting older adults. Although multifactorial assessments can reduce falls by 20–30%, nutrition and hydration—well-established contributors to frailty, muscle weakness and falls risk—are often absent from routine practice. A collaborative pilot study between the NHSCT Falls Prevention Team and Community Rehab Dietitians aimed to integrate nutrition, hydration and Vitamin D ‘triggers’ into community falls assessments.

**Debbie McGugan** presented the study findings at the *Healthy Ageing, Frailty, and Older Adults* stream at the annual BDA Research Symposium in December.

Over a seven-month period, 166 older adults referred to the Falls Team were screened using an amended tool incorporating validated malnutrition screening, fluid intake assessment, and Vitamin D supplementation status. The cohort had a mean age of 75 years, an average of six falls per year, and a mean Rockwood frailty score of 5, indicating mild frailty. Falls practitioners received training on malnutrition, hydration, bone health, Vitamin D, frailty, and muscle health to ensure consistent, evidence-based delivery of first-line nutrition advice.

## Key findings

- 35% (n=40) were identified at risk of malnutrition and supported with food-based advice.
- 70% (n=117) required hydration and Vitamin D guidance and received BDA fact sheets.
- 44% (n=73) showed insufficient or deficient Vitamin D levels.
- 9% (n=10) met enhanced dietetic referral criteria.

## Relevance to UK dietetic practice

### Proactive case finding

Collaboration with the falls teams to integrate malnutrition screening and hydration assessment into routine practice enabled the team to identify individuals at risk of malnutrition and dehydration who might otherwise remain undetected.

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### Upskilling non-dietetic staff

to deliver brief, evidenced based advice safely and consistently increases the capacity for timely food-based interventions and enables self-care in the community.

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### Clear referral criteria

Developing these enhanced triggers helped to prioritise high-risk individuals for timely dietetic input.

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### Vitamin D advocacy

Consistent messaging around Vitamin D can improve supplementation rates—critical given widespread deficiency among older adults.

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# Membership Perks

## A little reminder

**VISIT OUR WEBSITE**



Here you will find resources - including our Outcome Indicators Toolkit, newsletters, webinar recordings, and much more.



**NEW MEMBER RESOURCE:  
ABSTRACT WRITING SUPPORT**

To support OPSG members in preparing BDA Symposium abstracts for any projects relating to older adult nutrition, Claire McEvoy and Ruth Stow will be creating a set of video resources to take you through the process step-by-step. We will launch these at the upcoming OPSG AGM on 30 April 2026.

If you have anything to share or suggestions for committee activities, please get in touch. Contact us via our email address or by following us on social media

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