It's All Academic Podcast #7 part 1:
How to age well with Dr Jitka Vseteckova

Ben Wood and Dr Jitka Vseteckova:

BEN WOOD: Are you ageing well? Welcome to today's podcast. And that is what they are going to be talking about. We're going to be talking about ageing and how to age well. And we're going to be talking to Jitka Vseteckova, who is the chair of the carers research group and a senior lecturer of The Open University.

So before we get into that subject, let's just remind everyone that if you would like to subscribe to It's All Academic, the OpenLearn podcast from The Open University, which is this, then please do. And this is very much a podcast, we want you to get involved in. So if you've got any questions that you think of during the podcast or at the end, if you've got any comments, then please do leave them in the comments section. So subscribe and follow. Lots of fantastic content that we've got coming your way. But really, the main thing now is to find out more about ageing. So without further ado, I'm going to introduce you to Jitka.

[MUSIC PLAYING]

JITKA VSETECKOVA: Good morning, Ben and all. Thank you for inviting me to this podcast today. So a little bit about my role first, my role at The Open University is a multifaceted one and encompasses research, teaching, student supervision, doctoral supervision, and external collaborations.

BEN WOOD: Well, I think if anyone was in any doubt that you're not going to learn anything today, then rest assured, we have got an absolute expert who is talking to us, who I'm sure is going to impart some fantastic words of wisdom and some knowledge and maybe even a little bit of advice to help us, as we are discussing ageing well.

So just want to first off and say we've got-- we're obviously talking around content that you can find on OpenLearn, and we have the ageing well collection on the site. So there will be a clear link to that in the notes for this podcast. But that's where I'm going to start really, and say, the ageing world collection talks about the five pillars of ageing. Well, I think that's going to be the central theme as we go through today.

So my first question, really, is going to be, can you tell us about these five pillars of ageing well? First of all, give us the overview of the five pillars. Tell us what they are, and then maybe we can dive into each one and find out a little more about what people can do to help themselves with each of those five. So the five pillars, take it away.

JITKA VSETECKOVA: Thank you, Ben. So the five pillars is a model that came as a by-the-way product that sometimes things happen through my PhD research and collected readings around ageing well and how to support people with ageing well. I have realized very early on the gap ever since I've started being involved with research, I've always been aware of this gap that is between the evidence base, which means the research findings that are in the space of ageing, and there are many. It's an incredible field.

But the gap is constituted by the lack of accessibility of these findings, so people who need the most cannot practically access them and use them. The reasons are varied. Some of those relate to language. The research language is full of jargons, and people who are not trained to read through that will struggle reading the information and might just give up. The articles and the findings are located on platforms that, often, have firewalls, people need to pay, unless you're a researcher and your organization pays for you.

So there are multiple reasons that actually inhibit our access to it, if we are general public and/or we're clinician professional, who supports the public in their professional role. So because of

that, I thought and I've started this very early on my PhD. I've created, and I've always contributed to wider extracurricular education, continuous professional development learning that is really aimed at the wider public, general public, public that is ageing, so ageing people at different stages of ageing. Sometimes people who live with chronic conditions or multiple conditions, working with clinicians, professionals, practitioners who support the ageing populations in their professional roles.

And this is where the five pillars started to become a very useful model, because it's not a rocket science. It's something that's relatively simple that people can keep in mind. There are five parts to it. It's not so easy to forget, let's say. And it's something that naturally fits within what most of us are thinking, oh, maybe I should do a little bit more in that area anyway.

So the five pillars model looks at nutrition-- the way we eat, how we eat, when we eat, what is good for us to eat. Of course, it needs to be individualized because we're all slightly different. And different things work for different people. So there's nutrition, there's hydration, there's physical activity, cognitive and social stimulation. So these are the five areas that we will, of course, unpack them, I think, a little bit more as we go today.

So the five pillars are really central to the two main educational interventions, I founded, co-founded, which are the Ageing Well Public Talk series, and the Take Five To Age Well. So the Ageing Well Public Talk series is a series of monthly talks available to wide public that translates the evidence base into public facing information, tips, and, of course, is structured around the five pillars.

Then, after several years of successful running the Ageing Well Public Talk series at a national level and international level, as well, we've realized that actually there is a potential possibility for us to step up and make the five pillars even more available. And this is how the Take Five to Age Well was born.

We pride ourselves on the team's work being really focused on enabling inclusion, co-design, and co-production, working with people with lived experiences, whether they are ageing public or whether they are clinical practitioner, that support the ageing populations in their professional roles, and with everyone in co-designing co-curating disseminating and co-producing the Ageing Well Public Talk series, as well as the Take Five To Age Well, because what we know is that if we ask people what they need, they will tell us. And then we can bring it, which really enhances their involvement with the program because they are involved and engaged from the beginning.

And then their engagement keeps them motivated to attend and join. And this is how they learn.

BEN WOOD: Before we go into those five pillars and find out a bit more about them, I just want to ask you then, are we, as a race, as a population, are we generally ageing well? Or is it just that we could be ageing better? Is that the idea? I'm guessing, yeah, we are living longer. And we are, I think, generally, maybe not necessarily living healthier lives, very different lives than what we lived in 100 years ago.

So what's your take on that? Are we ageing well as a population? And is it just that we could be doing even better? Is that the reason for this framework existing to just help people do better? Or is there a real shift needed to change people's ways of thinking? What's your take on that?

JITKA VSETECKOVA: And that's an excellent question. In a whole, we do live longer. But our longer lives may not be necessarily better towards the end of our lives. I think we are ageing better compared to populations 100 years ago. We live longer, so we are doing something that enables us to do this. But there is a huge amount of support we have for that. There is public health. There is better hygiene. We don't need to work so hard to put food on the table. We have supermarkets or some things are made easier for us.

Nevertheless, some of the things that are actually making our lives easier, like having food in supermarkets, means that we're probably moving a little bit less. So sometimes, we easily eat

a little bit more and move a little bit less, which strikes not the right balance for us individually and perhaps as a society because our outcomes are pointing towards that we're probably not eating as well as we could, et cetera, so that you see the bands on different foods and junk foods, et cetera, the foods that need to be consumed with cap.

So I would say, we probably are slightly ageing better because we're living longer. So this is one of the proofs. But are longer lives spend is as much health and good quality of life as they can be? I don't think so. So this is probably where the series and where the work me and my team are really doing is to support people to age as well as they all can individually. And because we're all individuals, some advice might apply to some. Some advice might apply more to others. What works for me may not work for you and vice-versa.

But the fact that we're raising awareness, which I think we massively are through both of those educational interventions, we have been able to engage over 200,000 people with the Ageing Well Public Talk series and to Take Five To Age Well work over the past few years, which is a good number. And the number will be slowly growing, the longer we keep doing this work.

So I think there is always room for improvement. And it is about raising awareness, increasing knowledge, and understanding what ageing is and what ageing well might look like. And then for all of us individually, getting a mental picture of what we would like our own ageing to perhaps look at. So this is the main impact that our work has, which is helping people learn, so improving health literacy, while also tackling health inequalities.

Confidence-- increasing people's confidence in taking up a healthy action, making changes and perhaps becoming partners in their health care, which is a great thing. Changing attitudes and behaviors, tackling digital literacy, and involving inclusively, all those groups that we need to invest more time, more energy in working with.

BEN WOOD: So if it's about taking ownership then and giving people the knowledge and the resources to do things better, let's start diving into those five pillars and ask you a few questions about maybe what people can do if they can take away something under each of those five headings today, then maybe that's a step towards people making those changes.

So let's start with the first one. We've got hydration is top of my list. Now, quite simply, to me hydration, what can I do? We think everyone knows that you drink more water is something I think we've all been told at various points. Is it as simple as that? Is it drinking more water is going to help us age well? What have you got under of the hydration heading that people could take away today?

JITKA VSETECKOVA: Thank you. So hydration is really important. We sometimes forget or we're sometimes not aware through the work on the Ageing Well Public Talk series and the Take Five, it still comes to people as a surprise that oh, hydration. Why hydration? Is it just drinking more water? So it is drinking to thirst. The trouble with ageing is that the feeling of thirst decreases as we grow older. So we're not as thirsty as we might feel when we're younger. It has to do with our losing certain receptors, the biological reasons for that.

But the trouble is that we still need to stay hydrated. When we are dehydrated, our bodies and brain do not work optimally. Our muscles don't work optimally. Our brain cognitively doesn't work optimally. Our plot thickens. There are many reasons why dehydration doesn't serve us well, so staying well hydrated, drinking to thirst. But as we grow older, being aware that there is probably we may need an extra nudge to drink a little bit more.

If we drink teas, coffees, milk, water all counts, what we include in our advice is that maybe steering clear from fizzy drinks, juices and in large quantities because they contain sugar. So then our bodies spike up the insulin. So the tea, coffee, everything counts, it's a hydration. Nevertheless, maybe if we drink a lot of tea or drink a lot of coffee, they might also act as stimulant. So they stimulate the bladder, which makes us go to the toilet more often.

So maybe for each coffee, we could have a small glass of water, starting with adding a little bit. Not overdoing it, but it's doing a little bit every day. So it's the regularity that actually really is

the game changer. And then we can take a small action that's really easy to embed it into our daily schedules, daily routines, et cetera. So it doesn't need to be something that's extremely out of the way for us to do. But for as long as it's regular, it always helps.

Adding fruit, adding vegetables and legumes that are also rich in very hydrating to our diet, if we can. Of course, there might be some constraints or caveats. So, for example, there are groups of people who may not consume or drink too many liquids. They may need to stop. But when they reach around liters and half, 1.6 liters in a day, these are people who might have special or specific conditions. Some of those are severe patients with severe heart failure.

So that patients with severe heart failure are very well advised by their GPs and consultant specialists in how much they can consume every day. So people who need to be careful, in general, should know. But whenever in doubt, just check with the pharmacist, with your GP that you're going in the right way, but increasing gently the amount of liquids we intake every day is a good thing. It helps us optimize the brain functions, the muscle functions. It helps us optimize the speeds with which our metabolism works, which then also affects that we may avoid side effects of medications, if we take them regularly on a daily basis. So hydration is key.

BEN WOOD: So my takeaway from that is that maybe it doesn't need to be a huge change. It's that small change, increasing and regular and consumption of water. And bad news for me, cutting out the fizzy drinks. And maybe, I say, a tea or coffee and then every other drink, a glass of water. It's had an instant impact on me. I've got a glass of water next to me that I've almost drained while you were talking.

That was my need thinking, OK, yeah, great advice, take on some more water. So there you go. First change made for me. That's great. And then what you mentioned there as well about the fruits and vegetables as well, and that being perhaps a source of hydration, which takes us really onto the nutrition side as well.

Leading on from that, what about the changes we can make in terms of the nutritional benefits to help us age well?

JITKA VSETECKOVA: So nutrition is incredibly important as well. I'm sure you've heard, we are what we eat. And there are many ways, and there's lots of materials now online and everywhere popping up around nutrition, how important it is, what we may need to look at, making sure we have adequate amount of protein, fats, and carbohydrates in our diet.

It is important to keep all three in. Because all three of those contribute to a good functioning, optimal functioning of our body and brain. So our brain needs an incredible amount of energy. So brain is an organ that is relatively small compared to the rest of the body. But it takes staggering around 20% of glucose and 20% of oxygen of the whole conception of the body. So we need to feed the brain. So sometimes when actually winter comes, people are getting tired, people are getting cold. It's not always easy to regulate the temperatures. It is really difficult to heat the houses these days with the prices of energy and everything is soaring.

Then people might start feeling cold. When we're feeling cold, we need increasing calories. We don't always realize they said that we need to feed our brain. We need to feed our body. We need those calories. And the first thing those calories go into without us having a say in it is the thermoregulation functions. So it is really crucial that we have those calories we need in a day, because our thermoregulation functions are incredibly important to keeping body functioning optimally, including the brain.

So if we are in a space that is not well heated, if we don't eat well, if we don't move, if the blood doesn't circulate, if we're dehydrated, you make the math about how much this actually impacts our optimal functioning of the brain. And if the brain doesn't function optimally, the body will not either. So nutrition is incredibly important. And then whatever is left for after the calories have been taken by the body directly for thermoregulation and self-repair mechanisms and other biological functions that we have no say in, then the rest is left for us to do activities and things we want.

And this is perhaps something we try to throw with the messaging around nutrition, is that the nutrition has a point in our daily lives. So it is worth having a few more calories or things, even if they are sugary and fizzy and so nice and yummy and chunky and fatty and salty and all that, if we really want to have that, it's usually better to have it before we go out and meet people or before we go and work on something, because the food should give us the calories to do the work.

But the troubles are starting, when we actually start having all these yummy, lovely things in the evening, when we sit down, and when we are like, oh yeah, I don't have to do anything now. And then we load ourselves with all those yummies. But we don't have a way to actually work it out. So this is when the body starts getting confused and starts getting calories that are not being used. And then the body starts storing them in terms of fat.

It is not just about what we eat, it is also about when we eat it and how we eat it, because the food should give us energy and strength.

BEN WOOD: Is there a difference in that based on ages? If someone is listening to this and they're in their 20s and fit and active and they sit down in the evening and have a big meal, big old slice of cheesecake and a full fat can of Coke to wash it all down with compared to someone in their 50s, someone even older, those who might be listening to this in their 70s, 80s. Is there any difference? Is that 20 something and then not feel the impact quite as much as the someone with 30, 40, 50 years on them. does that really change how our bodies change how we process that as well?

The advice is great. Maybe don't have it in the evening, have it earlier when you can burn that off during the day. But if we did have it in the evening, does it work very differently between the younger generation and those of us a little more towards the other end of the scale?

JITKA VSETECKOVA: Yeah, Ben, it does. In general, it does. Although, there are outliers. There are exceptions. I know one. Some people can eat anything at any time, and it's not going to really affect them in that way, in taking on putting on weight, et cetera, as they get older. Some people have an incredibly fast metabolism, and it's just individual how each one of us is wired.

But in general, I would say, what we do in our 20s, we will not see the impact of it so much in our 20s, 30s. We will see it more in our 50s, 60s, 70s, and later. So bearing more in mind that our metabolism slows down. It's a natural age-related change. This is not something we can really hugely change. Nevertheless, there are things that can help us boost the metabolism as we grow older. And it will not surprise you probably that hydration is one of those.

So keeping the body, keeping ourselves well-hydrated will give our metabolism a boost to process things a little faster. So they will not stay such a long time in our bodies, but also regular physical activity. And that regular physical activity is absolutely key because we have the capacity to move, and we need to move. And when we don't move, we start recognizing we're not doing so well. We're putting on weight. We don't feel very well. Our emotional, cognitive health and well-being is impacted often as well.

Movement is key for us. It's incredibly important, and whatever moves is alive. So we need to think about each one of us individually, how we can move, how we can make it the most natural thing for us, how we can incorporate as much movement in our daily schedules and routines. And it can be really busy. And I totally get that. As an academic, I sit in front of my laptop, usually between nine to 10 hours every day, but I always try to have a good walk before my workday starts. Thank God for school runs.

Then I try to go out in the middle of the day, and then I try to go out later on again, which is either the school run clubs. But keeping incorporating, walking, moving anywhere we can, just anything but staying sedentary, is good for us. So I guess we're transitioning very neatly into physical activity and how important this is in our lives in conjunction to relevant nutrition and hydration that, as individuals, we need as well.

The physical activity can be anything from gardening, from doing chores, going up and down the stairs in the house. If the weather is really icy and horrible, it is totally understandable. People don't, especially, for old don't want to go out, because the risks of slipping are only too high and may not be worth it, actually. But we can stay home. We can go up and down the stairs. We can stand up every hour and be active. Walk, stand for five minutes. We can repeat this every hour that we're awake.

Stretching is an excellent way of staying physically active because it stimulates our body. So ideally, a combination of those that can be done while we're sitting, while we're standing, even while we're walking or gardening.

BEN WOOD: It seems to be this the same kind of message from what you said on the hydration. It's not about making a big change. It's not about suddenly getting older, maybe reaching retirement age and thinking, I've got to find out. I've got to go and start running. I've got to be going to the gym. Actually, just a small change, but a regular. And I say maybe just a couple of minutes every hour, just that bit of movement rather than spending a whole day sat down, just getting up. A small action, like walking up and down the stairs can actually make a big difference.

I don't know really satisfying to know that I say that maybe that thing that's been putting people off, making that change is I'm too old to go and join the gym. I don't want to start. I can't go and start doing a park run. But actually, knowing that you can start with a stroll to the bottom of the garden and back, walking up and down the stairs 10 times a day instead of simply sitting still while the kettle's boiling. Maybe having that one or two of your cups of tea day, go and climb the stairs back while it's boiling. So maybe there's some things people can do, but that's really helpful.

JITKA VSETECKOVA: And there are a couple of minor additions to that I would add, because what you've mentioned is absolutely crucial. What we can also add is standard one like when brushing our teeth. So we stand on the right foot for two minutes or one minute on one leg, the other minute on the other leg. It boosts the strength. It makes the blood circulate. Whatever makes the blood circulate is distributing.

So when our blood circulates, our blood contains all the nutrients and vitamins and everything that we need, and oxygen. And it distributes it to the organs, to muscles and everything. But also, because it's distributing all that lovely nutrients to the muscles, the muscles are wrapped around bones. So the more nutrition and more nutrients we get to the muscles, the more we'll get in the bones as well. So strong muscles are very firmly associated with strong bonds.

And now, we're talking about preventing osteoporosis or frailty, or either prevention or maintaining or decreasing our frailty scores, if we already have them. So strength, mobility, physical activity, no matter what, but regular every day, is really crucial for that, together with nutrition and hydration, of course, because we need the nutrition to be in the body for the bloodstream to circulate and then to the muscles and to the bones.

It is incredibly important. And it can be little. You have mentioned gyms. Gyms are an interesting thing. We usually promote via the Ageing Well Public Talk series and Take Five everything that people don't have to pay for when they want to do those actions. The Take Five actions that are published on our website are a very good start for people to have a look at, think about whether there is something they would like to do.

But gym, actually, can be really important. So strength training, the older we get, the more important it becomes. We might be thinking, well, this is not something I need, and it may not be needed in a form of a gym. But strength training is actually very important and helps us to keep the muscles strong. Because as our metabolism slows down, as we age, and other age-related change is that there is muscle atrophy, muscle wasting, we're losing muscles little by little. It's not something that we notice massively in our 40s. Perhaps, we start noticing in our 50s, 60s, 70s. We definitely know something's there. Well, something's not there.

And then the older we get, the more frail we may become just because of that. The way to counteract that is with the nutrition and hydration and the physical activity. So the physical activity will keep the muscles active, the capillaries inside the muscles, running the nutrition through the muscles. So the stronger we keep our muscles, as we grow older, the more important it is for our healthy bones for avoiding frailty, preventing frailty, preventing osteoporosis wherever we can. And in general, staying stronger, staying better balanced and keeping our mobility and keeping our independence, which is what most of us really want.

Anyway in doing strengthening exercises every now and then is a good one, and it doesn't have to be in a gym. It can be with a bottles of water that are felt that we do some very simple exercises, but strength is important component to it.

BEN WOOD: When should we be starting to do this? Are we talking about-- these are things that everybody could be doing now. I think even just going back to that image of the brushing teeth is the one that stuck with me and standing on one leg. Is that something that you would advise everybody to do? Is it something that as we're getting older, those are the things we can do that maybe are replacing some of the physical activity that we're no longer doing? Or is that something that you'd say, it doesn't matter how old you are, start doing it?

If you're standing in front of the sink in the morning, stand on one leg and brush your teeth. Do we start that at any time in our lives? Is it going to help us? Those small short-term actions, the earlier we start them, the better. Is that the message?

JITKA VSETECKOVA: Yeah, I would say the earlier, the better. But there is never too late. So we can start at any point in time. If we're starting in our 80s standing on one leg when we're brushing teeth, it's better we have something that we can steady ourselves on if we need to. So we need to do it in a safe way for us.

Nevertheless, there is never too late. Our muscles-- there's incredible research around how trainable muscles are. They are trainable when we are 80, when we're 90, even when we're 100. The muscle always responds. So sometimes when we talk through the Ageing Well Public Talk serious about everything, that's not going so well, the older we get, the one thing that is really the highlight for all of this is the muscle is trainable.

If everything else starts going, us conserving some energy and thoughts and really making sure we work our muscles a little bit, can help us smooth a lot the right, the older we grow.

BEN WOOD: We said at the top of this podcast that you are definitely going to learn something today from Jitka. I think that has proved absolutely true. There's plenty more to delve into here, to discover more about ageing well, to discover more about the Take Five to Age Well campaign and Jitka's work.

Join us again soon for part two. Look forward to finding out much more about ageing well.