

COLD WEATHER CAN BE TROUBLE FOR OLDER PEOPLE

Cold weather can be risky for anyone, but especially for older people. The winter chill can lead to a temperature drop inside the body that can be deadly if not found quickly and treated properly. This lowered body temperature, usually brought on by staying in a cool place for a long time, is called hypothermia. It is a special problem for older people, who often have other illnesses or take medications that can interfere with the body's ability to regulate its temperature.

Hypothermia is marked by unusually low body temperatures, below 96° F. What may seem like a mere couple of degrees can have a devastating effect. Severe hypothermia can cause an irregular heartbeat leading to heart failure and death.

Body temperature is a balance between how much heat is produced and how much is lost. The brain acts as a thermostat, sending and receiving signals to and from parts of the body that affect temperature: the spinal cord, muscles, blood vessels, endocrine system and skin. The body has many different reactions to cold. Shivering by the muscles, for instance, is one way the body produces heat. Muscles shiver in response to messages sent by the nerves; shivering increases muscle cell activity, which in turn produces heat.

How can you tell if someone has hypothermia: If a person says he is unusually cold, check their temperature with a thermometer. Older people may be reluctant to complain, or are unaware of how serious the cold can be. Look for these signs of hypothermia:

- Confusion or sleepiness
- Slowed, slurred speech, or shallow breathing
- Weak pulse; low blood pressure
- A change in behavior during cold weather or a change in the way a person looks
- Excess shivering or no shivering; stiff arms and legs
- Chilly rooms or other signs that the person has been in a cold place
- Poor control over body movements or slow reactions

To figure out whether someone is suffering from hypothermia, take his or her temperature with a thermometer. First shake the thermometer to below its lowest point. Then, if the temperature appears to be below 96° F, call for emergency help. The only way to tell accurately if a person has hypothermia is to use a special thermometer that can read temperatures below 94° F. Most hospitals have these thermometers.

The most important step in treating hypothermia is to make a person warm and dry. He or she must be seen by a doctor, preferably one who knows about the condition and who is located in a well-equipped hospital emergency room. There, the doctors will warm the body from the inside out. For example, they may give the person warm fluids intravenously.

If you suspect that a person has hypothermia and emergency help is not available right away, move the person to a warmer location, if possible, and wrap him or her in a warm blanket to stop further heat loss. You can also use your own body heat to keep the person warm. Lie close to the victim, but be gentle and do not handle the person roughly. Rubbing the person's arms and legs, as many rescuers are tempted to do, can make the problem worse.

Chances for recovery depend on how long a person was exposed to the cold and his or her general health. If body temperature has not dropped below 90° F. chances for a total recovery are usually good. If body temperature has fallen to between 80° F and 90° F, most people will recover, but some lasting damage is likely. If the temperature goes under 80° F, most victims will not survive.

Some Safety Tips!

- People who live in poorly heated homes risk getting accidental hypothermia when the weather is cold. Even mildly cool temperatures of 60° to 65° can trigger the condition. Homes can have inadequate insulation, or people with low incomes may keep temperatures in the dangerous range as they try to keep heating bills down.
- Being knowledgeable about the weather can help reduce risks too. Brisk winds cause more rapid heat loss than calmer weather. Weather forecasters call this the wind-chill factor. They often suggest, even when the temperature itself is not very low, that the wind-chill factor is low enough for people to stay indoors.
- Some illnesses and medications place a person at risk because they affect the way the body handles cold temperatures. Illnesses that may blunt the response to cold include:
 - Slow thyroid (hypothyroidism) or other hormone disorders.
 - Stroke or other disorders that cause paralysis and reduce awareness.
 - Severe arthritis, Parkinson's disease or other illnesses that limit activity.
 - Any condition that curbs normal blood flow.
 - Memory disorders.

Drugs used to treat anxiety, depression or nausea, and some over-the-counter cold remedies also increase the risk of accidental hypothermia. Ask your doctor how your medicines affect body heat.

Information adapted from the National Institute on Aging website www.nia.nih.gov

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