A key to being healthy is an active lifestyle and good eating habits beginning when you are younger, not the morning after you retire. Find out what can help you get in shape, what health challenges you may encounter and how to prepare for them.
What will slow you down when you retire? To be more specific, what kind of condition will prevent you from achieving the healthiest retirement you can? Will arthritis end your golf trips to Florida? Will hearing loss prevent you from enjoying your favourite music? Or will obesity and lack of mobility prevent you from continuing to play tennis or taking those ski holidays in Whistler?

Fortunately, many illnesses or health conditions may be prevented or at least managed. Cancer is a more serious issue, but there’s been considerable progress in treating cancers although some cancer rates, such as for liver and thyroid are increasing. For men, the death rate for all cancers has been declining since peaking in the late 80s. Women have seen declines as well, but to a lesser degree since the mid-1990s.¹

For someone who is nearing middle age, the key is to recognize what the risks are, take precautions and adopt a sensible lifestyle. Currently in Canada, two in five people will develop cancer in their lifetime and one in four will die from cancer.² Yet two of the leading types of cancer deaths, are, to a certain degree, manageable; lung cancer through the cessation of smoking and colonoscopies can provide early detection of colon cancer. People with hereditary cancers in their family

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Dr. Sotto received his medical degree from the University of Toronto. A Fellow of the Canadian Board of Occupational Medicine he is also a certified specialist in Emergency and Family Medicine and was on staff in Family Medicine at William Osler Hospital in Brampton, where he worked in the Emergency Department for 19 years. Among other companies, he has been Medical Director for Bombardier Aerospace Inc. as well as Chief Medical Officer for CN Railway, Great Lakes Region. Since 2006, Dr. Sotto has been the Occupational Medical Consultant for the Toronto Transit Commission (TTC) and is an Investigative coroner for York Region.
can also undergo genetic testing to see if they may also have a high risk of developing similar cancers.

A key contributing factor to living longer, healthier and being active in your 60s and onwards is good health and nutrition habits beginning when you are younger, not the morning after you retire. Dr. Alain Sotto, Director of The Year Round Care Clinic and senior medical consultant of Medcan, a private health and wellness clinic, says people can significantly cut the risks of many of the most common health conditions of middle age by eating well, exercising and removing bad habits like smoking or excessive alcohol. The long list of health benefits include a reduced risk for a litany of conditions we associate with aging; obesity, lack of mobility, cardiovascular disease, type 2 diabetes, breathing problems like emphysema — even osteoarthritis and certain types of cancer.

“I actually write a prescription for exercise for my patients. I actually write down ‘exercisacillin’ as a prescription. Because we know that exercise increases your life and longevity but also decreases your blood sugar, decreases your blood pressure, decreases your (bad) cholesterol, decreases all the risk factors associated with bad lifestyle. I say, you must exercise at least 150 minutes per week of aerobic cardio exercise and do weights two to three times per week because we know weights improve muscle mass which improves bone mass which also improves your overall metabolic function. We know by age 35 you aren’t able to burn fat as you were once before,” says Sotto.

Further, when exercising aerobically, try and raise your heart rate up to a level equal to this formula, 220 minus age times 0.75. “That’s your target heart rate you should get up to. If you don’t have a heart-rate monitor, try and break a sweat,” says Sotto.
He also warns people who are watching their nutrition not to be fooled by low-fat foods which may remove the fat only to compensate by adding sugar. Or there are some foods that have a “health halo,” but aren’t actually healthy. For example, did you know that, depending on the type and brand, a typical bran muffin could contain more calories and sugar than a donut?  

“The average caloric intake in the U.S. has increased by 500 calories per day since the 1970s. That’s pretty significant, if you take 500 calories a day and you add it to your weekly allotment, that may average out to a 19-pound weight gain over a year.”

As well, Dr. Sotto says that one of the lesser-known benefits of exercise is a better-functioning brain and better memory. He cites research from the University of British Columbia which showed, “you can double or triple the number of new neurons in the memory centre of the brain, called the hippocampus, with a simple exercise three times a week.”

Don’t let any health problems you can control get ahead of you. Here are the top health conditions in middle age and how to cope with them.

**Cardiovascular disease and stroke — Cause:** High cholesterol levels, high blood pressure, smoking, diabetes, physical inactivity, being overweight, obesity, genetics. **What you can do:** A healthy, active, non-smoking lifestyle may be a strong preventative measure against cardiovascular disease, heart attack and stroke. If you have high levels of low-density lipoprotein (LDL) cholesterol (the “bad” cholesterol) it can also be managed by drugs called statins. One way to estimate the risks of developing cardiovascular disease or stroke is with the Farmingham Risk Calculator which factors in your cholesterol levels, age, blood pressure
and sex. Research has shown that if you make a one point reduction (1.0 mmol/L) in your LDL, your risk of a heart attack drops 21 per cent.7

“With the Farmingham Risk Calculator we can actually sit down with the patient and say, given your lack of smoking, given your lack of diabetes, here’s what your risk is for the next ten years and then also tell them what their target LDL cholesterol should be. Of all first-time heart attack patients, LDL cholesterol was elevated in 55 per cent of people,” says Dr. Sotto.

Memory loss — **Cause:** While people who age are more susceptible to Alzheimer’s disease and small strokes, called vascular dementia, this same age group also deals with slight memory loss as a normal part of aging, called ‘age-associated memory impairment.’ **What you can do:** The irony is that too much stress can impair memory but not enough brain stimulation can also make it atrophy. A healthy lifestyle and routine, and with a varied social life can go a long way to limit memory impairment during your retirement years. Ensure you are challenging your brain to keep the spider webs away. As well, one of the most important components to a healthy lifestyle is proper, restful sleep. If you are not sleeping long enough or if you are stressed and can’t get restful sleep, your brain and memory suffers.

“When you have good quality sleep, your brain restores its natural functions, and that is important. You get all these great hormones that regenerate, muscles cells, brain cells; that needs to happen when you sleep,” says Sotto.

**Osteoarthritis** — **Cause:** Osteoarthritis is caused by age and wear and tear on the hip and knee joints; however, smoking is a significant accelerator of the condition. **What you can do:** Fortunately, there has been significant progress in the treatment of osteoarthritis. First, if you smoke, quitting will help slow down the deterioration of the joints. Among the measures to manage the inflammation, in order of progression, are extra-strength anti-inflammatories, cortisone shots, viscosupplementation (whereby fluids are injected into the joint) and protein-rich plasma injections. In extreme cases,
hip and knee replacement may be needed through surgery.

**Emphysema and chronic bronchitis (Chronic Obstructive Pulmonary Disease or COPD) — Cause:** Smoking but also poor air quality. **What you can do:** While smoking is the cause in the vast majority of cases, air pollution can also be a cause. Quitting smoking can obviously prevent breathing problems and once you have contracted COPD; using puffers or supplemental oxygen can improve breathing as do specialized exercises. “It’s the fourth-largest cause of death in Canada,” says Sotto, “It has decreased over the years but I have a feeling it’s going to go back up soon because of potential increase in marijuana smokers.”

**Type 2 Diabetes / Obesity — Cause:** Overeating, poor nutrition and inactivity play a role but also metabolism and genetics. Obesity can stop the pancreas from functioning efficiently, causing type 2 diabetes although genetics, ethnicity age, and a high carbohydrate diet may play a role. **What you can do:** Bad nutrition, sedentary lifestyles and a lack of exercise can all be corrected.

**Lack of Mobility — Cause:** Numerous causes but falls, fragile bones caused by osteoporosis, obesity, aging and inactivity are contributing factors. **What you can do:** The issues of mobility, obesity, arthritis and osteoporosis are interrelated; obesity and brittle bones can restrict mobility but also a lack of mobility can contribute to being overweight and, in turn, cause muscle and bone deterioration. Prevention is the key and again a healthy lifestyle including activity and proper nutrition helps keep bones and muscles strong into senior years.

“Mobility is a huge problem as we age and live longer; our joints are going
to be less resilient in improving our mobility. I’m sure you’ve seen this by going to the mall, you see scooters everywhere, you see people with walking aids, and we know that lack of mobility is a precursor to hip fractures and other fractures that debilitate the elderly. Frequent falls in a person who is older and who has brittle bones or osteoporosis puts that person at an increased risk of hip fracture and subsequent death. Fifty per cent of hip fracture patients die of complications within the first year of the fracture. That’s pretty significant,” says Dr. Sotto.

Besides exercise and healthy eating, Dr. Sotto advises two routes to keep active and improve bone mass; resistance weight training and taking daily amounts of vitamin D and calcium.

**Cancer — **Cause: Cancer is a term for a wide-ranging number of diseases whose origins — cell mutations — remain unknown. Conditions like obesity are linked to colorectal, uterine, breast cancer. What you can do: “The top four cancers are lung, colon, breast and prostate cancer. These four cancers account for 63 per cent of all cancers,” says Sotto.11

The first step in combating cancer is prevention. There are known relationships between smoking and lung cancer and this fact has contributed to lower lung cancer rates as smoking in society becomes less popular. Early detection of other types of cancers, such as breast, colorectal, prostate and lung cancer in smokers, also helps the survival rate, so that means regular checkups with your doctor and tests to screen for these cancers. For instance, colon cancer has the second-highest mortality rate among cancers but it is 95 per cent preventable through early screening such as colonoscopies, says Dr. Sotto. Some families may be susceptible to certain types of inherited cell mutations but genetic counselling can reveal if your DNA make-up
puts you more at risk of certain types of cancers, allowing you to take preventative measures, such as a mastectomy.

**Mental health and depression —**

**Cause:** Separate from disorders such as dementia and Alzheimer’s Disease, mental health is a challenge in the post-retirement years because of the changing emotional, financial and physical changes that seniors face. More information can be found on depression and retirement in the MoneyTalk Life article, *Bouncing Back from the Retirement Blues.*

**What you can do:** While depression can hit anyone at any age, people at retirement age often have to work to keep themselves in good spirits; they must make an effort to be outgoing, have a good social network, be in positions where they feel valuable, and get the help and support they need when they are overwhelmed by difficulties. Changing from a 50-year-old hyper-active Type A individual who has enormous responsibilities at work to a Type A 75-year-old who needs help getting to the doctor’s office may be a blow to self-esteem, and that could be an emotional challenge. If people have trouble with memory, navigating complicated issues can again remind a once-capable individual that they can no longer be self-reliant.

Dr. Sotto says chronic medical conditions and mental health are correlated; being sidelined in retirement because of serious health conditions can cause depression. In this way, taking care of yourself physically can have an indirect impact on your mental health. “If you have diabetes when you get older, you have up to a 30 per cent chance of getting depression . . . most people after heart attacks are very depressed or have anxiety,” Sotto says.

**Hearing loss —**

**Cause:** Age, exposure to loud sounds over time. Acoustic nerve tumors can also affect hearing and balance.

**What you can do:** Loss of high frequency sound over time is natural when we age, but it can be
accelerated by exposure to loud sounds (loud music or work-related noise). Tumors can also impact hearing and balance. Dr. Sotto says everyone must protect their hearing and go for checkups as hearing loss influences quality of life.

Retirement is the time to enjoy oneself, and just as people should prepare financially for the time when they want to pursue a lifestyle without work, so too should they begin planning early to get themselves physically fit and begin eating well. Anyone making changes to their lifestyle should consult their doctor to help ensure they are up-to-date with any age-appropriate tests and examinations.

— Don Sutton, MoneyTalk Life


9 Arthritis in Canada, July 2013, P. 7, arthritis.ca/getmedia/870886f4-602c-4589-a584-0d582d962706/arthritis-in-canada-2013.pdf

10 Mental Status Examination of an Exceptional Case of Longevity J. C. Aged 118 Years, British Journal of Psychiatry (1995), 166, 229-235

11 Dr. Alain Sotto, personal interview, Nov. 10, 2016.