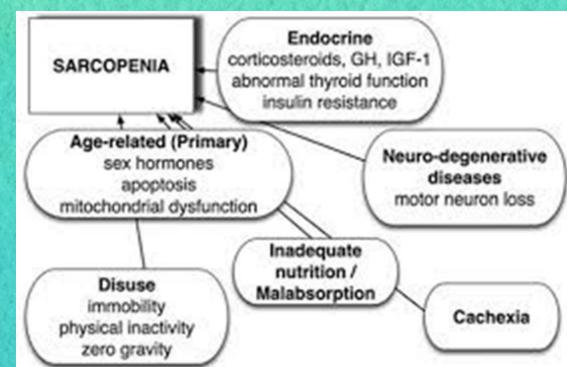
Remedial Physical Education Remedial PE for elderly

Department of Adapted PE and Sports Medicine 2020







Common postural changes in older age

kyphosis head protraction shoulder protraction limited movement of lower extremities limited movement of hands



<u>Common problems in older age</u>

- pain of the back, joints
- decreased flexibility
- loss of muscle mass and muscle strength
- decrease in coordination and balance
- lower aerobic capacity

Changes with ageing

CNS

- Neuronal loss
- Cochlear degeneration
- Increased lens rigidity
- Lens opacification .
- Anterior horn cell loss
- Dorsal column loss
- Slowed reaction times

Respiratory system

- Reduced lung elasticity and alveolar support
- Increased chest wall rigidity
 Increased V/Q mismatch
- · Reduced cough and ciliary action

Cardiovascular system

- Reduced maximum heart rate
- Dilatation of aorta
- Reduced elasticity of conduit/ . capacitance vessels
- Reduced number of pacing myocytes in sinoatrial node

Endocrine system

 Deterioration in pancreatic β-cell function

Renal system

- Loss of nephrons
- · Reduced glomerular filtration rate
- Reduced tubular function

Gastrointestinal system

Reduced motility

Bones

· Reduced bone mineral density

Clinical consequences

CNS

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- Increased risk of delirium
- Presbyacusis/high-tone hearing loss
- Presbyopia/abnormal near vision
- Cataract
- · Muscle weakness and wasting
- Reduced position and vibration sense
- Increased risk of falls

Respiratory system

- Reduced vital capacity and peak expiratory flow
- Increased residual volume
- Reduced inspiratory reserve volume
- Reduced arterial oxygen saturation
- Increased risk of infection

Cardiovascular system

- Reduced exercise tolerance .
- · Widened aortic arch on X-ray
- Widened pulse pressure
- Increased risk of postural hypotension
- Increased risk of atrial fibrillation

Endocrine system

 Increased risk of impaired glucose tolerance

Renal system

https Impaired fluid balance ://ba Increased risk of dehydration/overload Impaired drug metabolism and excretion Gastrointestinal system Constipation

Bones

Increased risk of osteoporosis

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In older age, we may experience above-mentioned problems but exercise can be helpful. Why?

Benefits of regular physical activity

- improved mobility
- improved cardiac and pulmonary function
- improved lipid metabolism
- weight control
- ability to perform activities of daily living (functional and work capacity)
- enhanced feeling of well-being (QL)
- decrease of anxiety and depression

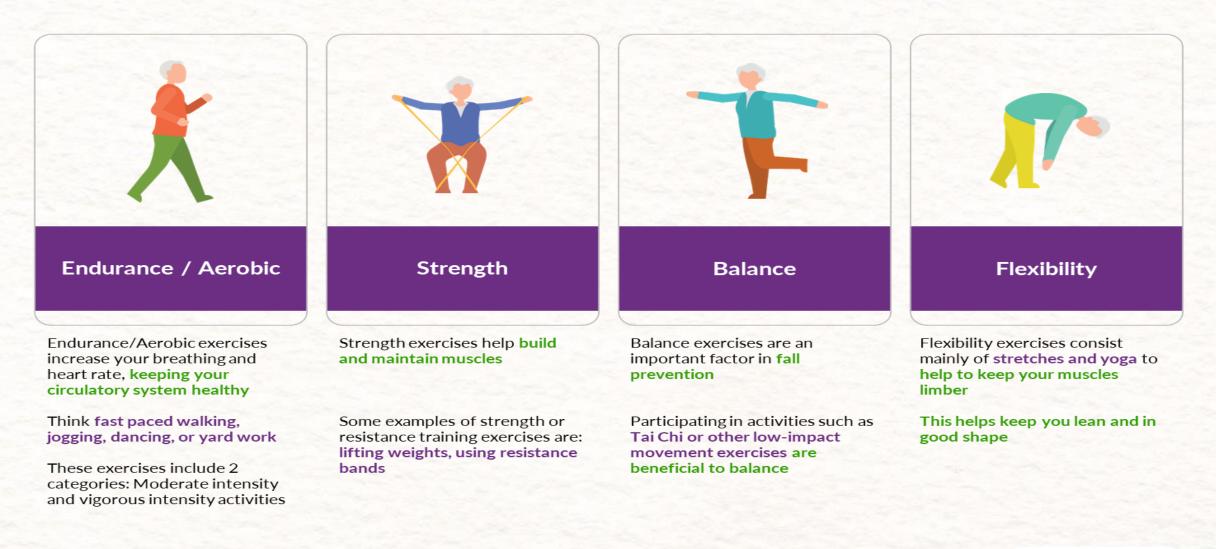
Long-term independence!

What kind of exercise?

- Who is my client?
- What are his/her possibilities?
- What is the environment (outside vs. inside, big gym vs. small gym etc.)
- What is the aim of exercise? Do we need to work on: cardio fitness, muscle power, flexibility, balance...?
- Will they exercise alone or under a leadership?
- Summer time vs winter time?
- Will we use specific aids?

- stretching
- strengthening
- relaxation
- aerobic activities
- sport / ball games
- gymball exercise
- dance
- psychomotorics and cognitive training
- SM system spiral stabilization
- Yoga, Feldenkrais, Pilates...

Recommended Types of Exercise



eugeria

https://www.eugeria.ca/en/blog/recommended-exercises-for-the-elderly-the-right-way-to-stay-active

according to actual health status and competencies of the clients

• at least 1 hour after meal, comfortable clothes, shoes?

 ideally lower exercise positions (supine, on the ground), not to change positions very often, gradually increase the load on posture

 good posture / position at the beginning of the exercise (pillow or overball under the head?)

easy exercises

speak in a loud voice



breathing during exercise

gradual increase of the load and exercise duration

concentration on exercising, perception

slow exercise, controlled movement, stretching, strengthening

do not overcome pain

checking clients during exercise

motivation, education, patience



Safety considerations

- <u>Contraindications = exercise :</u>
- acute illness infectious disease
- severe / unstable heart disease or respiratory insufficience
- blood pressure at rest > 160 /95
- decompensation of chronic disease
- certain positions in case of joint replacement
- stop exercise if the person feels any *"warning sign"* or a discomfort



Also important: weather conditions

Safety considerations - during exercise

Stop exercise when feeling

- discomfort
- pain /esp. chest pain/
- shortness of breath
- nausea
- dizziness
- lightheadness
- fatigue

Be aware of :

- irregular heart beat
- ST depression, elevation
- hypertonic reaction
- BP decrease in exercise
 neck extention

Do not forget :

- warm-up period
- cool-down period
- regular breathing
- fluid replacement

Think twice (?!) - rather to exclude:

- static strengthening
 - highly emotional exercise (e.g. competition)
- maximal intensity exercise

Inspiration for exercise with elderly

In Czech, but you can just watch and you will understand

<u>https://www.seniorum.cz/videoserial-cviceni/barevne.html</u>

In English – you can explore a lot of exercises

- <u>https://www.uni-muenster.de/ProjectWhole/category/physical-activity/exercise/</u>
- <u>https://www.med.unc.edu/aging/cgec/exercise-program/videos/</u>
- <u>https://projectenhance.org/about-us/</u>

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Exercise while sitting for people who cannot exercise on the ground

- <u>https://www.youtube.com/watch?v=SaYDK_LH_uk</u>
- <u>https://www.youtube.com/watch?v=8BcPHWGQO44</u>

Please go through the **presentation including the** "web links". Please make up an exercise program for a *"*reconditioning camp" for elderly. The camp should be 6 days long and should held somewhere in nature. The number of participants would be between 20 and 30 people above 65 years of age, plus 3 instructors. Please describe roughly a group program for the 6 days.