Incorporation and Permanence of Older Adults in the Practice of Physical Exercises

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Abstract

Introduction: The incapability of the control of our center of mass of the body with regard to the supports base, is the loss of the balance the changes due to the aging in the corporal systems that intervene in the balance and the mobility, an inevitable consequence, the affective states can be also an obstacle for the man we must remember that it is easier to control the extra-verbal expression that the internal changes that happen in the organism tachycardia, peristaltic, and others.

Objective: To motivate the incorporation and permanence of the biggest adults in the practices of physical exercises.

Patients and method: A study is realized in a series of 15, major adults helped by the Parish “The Salvador of the World”, of the municipality It closed. A motivation program was implemented across interactive chats, he foresaw to the introduction of the plan of exercises physiotherapeutic. There were realized two evaluations (initial and end) with her using the questionnaire of balance modified.

Result: An increase of the assistance found in the end motivation program in 70% with regard to the beginning of the same one, as well as an increase in the indexes of the control orthostatic.

Conclusion: The preventive actions included in the program of motivation and the plan of physical exercises personnel was accepted by the biggest treated adults, since the affectivity of the same one propitiated the necessary energy to prosecute actions towards the solution of its needs.

Keywords: Major adult, Physical exercises, Balance, Quality of life.

Introduction

The aging in the human beings is a process that begins from the conception and it develops along a lifetime, determined by genetic and environmental factors. It is well-known that the effects of the supposed agents differ in gender and ethnos, that which confirms the possible influence of the genetic factors. For example, several genes lipids candidates that have been studied in terms of risk of cardiovascular illness and longevity have shown significant interactions among the genes, the diet and the medium. It has been pointed out that the aging of the apparatus skeletal muscle implies two conditions:

1. The accumulative risk of hip fracture to the 90 years that he/she comes closer to 25% in the women and to 10% in the men.
2. The somatic changes and of the gravitational center, where the march you insecure and slow restitution predisposing the biggest adults
to the falls. They also spread, in occasions, to walk with short, slow and unstable steps, this last it is very common with base of sustentation something wide, and with the trunk curved.

With the increment of the hope of life the morbimortalidad increases. 85% of the grown-ups suffers of some pathology type. Inside the most frequent, according to experts in Geriatrics, the rheumatisms are, the cardiovascular pathologies, the arterial hypertension and the diabetes mellitus [1].

The inactivity and the alterations of the mobility imply common problems in the biggest mature population. The movement is an essential component in the biggest adult’s life, because all their corporal systems work with more effectiveness when this it is active. Some investigations they suggest that the environmental conditions (housing and neighborhood) they can act as stressor factors and they impact in the residential satisfaction and the psychological well-being.

In Cuba an increment of the populational aging has been observed in the last 20 years that it has trafficked from 11.3% (1985) until 17% (2008), what is equal to an increase of 5.7 points percentiles [2], what locates to the country in the group III of aging (>15%). This phenomenon is associated with the decrement of the number of inhabitants due to the decrease of the birth rate.

Although the process of populational aging happens in all the countries of the world, not all have the necessary economic resources to make him front. For example, near half of people geriatrics interviewed in the study he/she KNOWS (Health, Well-being and Aging), favored by the OPS, they manifested that they didn’t have economic resources [3].

Development

Patient and methods

One carries out a study in a bigger series of 15 adults, without sex distinction and color of the skin, aided by the Parish El Salvador of the World”, of the municipality Hill. The age average of the group was of 70 years oscillating between 62 and 80 years.

A motivation program was implemented through interactive chats, with a duration of three months, in order to evaluate an intervention method that the attendance increased, and it remained of the same ones in the practice of exercises physique.

The first contact with the group was a chat where he/she was explained the importance that you/they have in the biggest adults improving the balance to avoid the falls, and to obtain of them the disposition of participating in the program and that they signed the informed consent, of agreeing.

You begin the program with two chats, technical participative and interactive activities. The approached topics were:

a. The physical changes in the third age.

b. What is the balance?

c. The activities of the daily life.

Later on, you began with the plan physiotherapeutic so that the geriatrics carried out the learning of the control rise-loft, consistent in exercises fortifiers of the waist, the pelvic bone and the inferior members. To determine if the exercises were assimilated, he/she was carried out an evaluation to the beginning and another at the end, with the help of the questionnaire of balance test Tinetti ME modification a maximum punctuation of 16 points was used for the balance and of 28 points to evaluate the march [4].

Results

One can observe in the Table 1 the demographic characteristic partner of the group.

In a general way the attendance you increased in 70%, regarding the first convocation, for the practice of physical exercises. It was appreciated that those that showed better results were the adults with schooling level to who you/they were made easier and express to memorize those patterns of practiced movements and evaluated, being conserved a difference regarding the positive evolutionary changes.

86.6% of the adults showed an improvement in the final evaluation of the march with regard to the initial (Table 2). in connection with the evaluation of the balance same frequency was observed (Table 3). In both cases single two patients they didn't show improvement, those that corresponded, with the same adults that didn’t improve the march pattern, for the use of an external support (cane), for what its march patterns were already stereotyped. Evaluation of the march had a maximum value of 28 points. Those for hundred were observed (Table 3). In both cases single two patients

Table 1: The biggest adults' demographic characteristic partner (n=15).

<table>
<thead>
<tr>
<th>Variables</th>
<th>n</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sex</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Feminine</td>
<td>13</td>
<td>86.7</td>
</tr>
<tr>
<td>Masculine</td>
<td>2</td>
<td>13.3</td>
</tr>
<tr>
<td>Level of escolaridad</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Primary</td>
<td>11</td>
<td>73.3</td>
</tr>
<tr>
<td>Secondary</td>
<td>3</td>
<td>20.0</td>
</tr>
<tr>
<td>Half level</td>
<td>1</td>
<td>6.7</td>
</tr>
<tr>
<td>Color of the skin</td>
<td></td>
<td></td>
</tr>
<tr>
<td>White</td>
<td>10</td>
<td>66.7</td>
</tr>
<tr>
<td>Black</td>
<td>5</td>
<td>33.3</td>
</tr>
</tbody>
</table>

Table 2: Evaluations of the march in the assisting adults.

<table>
<thead>
<tr>
<th>No. of bigger adult</th>
<th>Initial (points)</th>
<th>Final (points)</th>
<th>increase% with regard to the beginning</th>
</tr>
</thead>
<tbody>
<tr>
<td>13</td>
<td>14</td>
<td>20</td>
<td>86.7</td>
</tr>
<tr>
<td>2</td>
<td>8</td>
<td>8</td>
<td>13.3</td>
</tr>
</tbody>
</table>

Table 3: Evaluations of the balance in the assisting adults.

<table>
<thead>
<tr>
<th>No. of bigger adult</th>
<th>Initial (points)</th>
<th>Final (points)</th>
<th>increase% with regard to the beginning</th>
</tr>
</thead>
<tbody>
<tr>
<td>13</td>
<td>7</td>
<td>12</td>
<td>86.6</td>
</tr>
<tr>
<td>2</td>
<td>10</td>
<td>10</td>
<td>13.3</td>
</tr>
</tbody>
</table>
points. Those for hundred were calculated when keeping in mind the sample size (n=15).

**Discussion**

The stability of the body during the march depends on multiple factors and structures, many of them in charge in that the individual its march pattern adapts, in dependence of the characteristics of the land and the obstacles that are presented to its step; the training of the muscles and the articulations of members inferior improvement the agility and the resistance; while with the training of the balance it can improve the reaction speed and to reduce the risk of the falls, in the biggest adults [5].

It is valid to point out that reduced of the sample in this study, in comparison with other studies, on the topic, but it is known the difficult thing that it is to work with this population, for such a reason it became impossible to contrast the results with other discoveries of the literature [6].

In a study carried out in 182 subjects with an age of 82.3±2.3 years with the objective of measuring the negative effects of the sedentarism in the biggest adults he/she was a negative descent in the test of agility, speed and resistance in the sedentary ones when not comparing it with those sedentarism. A conclusion way you can point out that the loss, in multiple waits of the life, is the common denominator, of the traffic toward the aging, for that that the approach physiotherapeutic to these bigger adults, still healthy it will begin starting from the stimulation of the threat approach, seriousness and risk what I motivate the recognition and the acceptance of the current conditions; preventive action included jointly in the program with the plan of exercises physical employees is it was accepted with the increment of the permanency and attendance.

The bigger adults contributed these elements with those that could identify and to accept the aging and their condition of bigger adult.

**References**

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