

Physical Activity Tips for a GP Practice

Jean-François Bérard
Physiotherapist

MCISc, BMR PT, BSc, CEP, FCAMPT

Faculty/Presenter Disclosure

- **Faculty:** Jean-François Bérard
- **Relationships with commercial interests:**
 - **Partner at Pure Lifestyle Ltd**

Mitigating Potential Bias

- Content is not intended to support the conflict of interest
- Content is focused on providing information to help provide physicians with added confidence in physical activity recommendations



EXIT

Elevato

Schindler

Schindler

Fun Theory – Stairs vs Escalator



Source: www.adage.com



Quoted by GUINNESS WORLD RECORDS as being
"THE WORLDS UNHEALTHIEST RESTAURANT"
we proudly serve the...

World's Highest Calorie Burger!

Quoted by
GUINNESS as
9,982 calories



OBJECTIVES

Motion is Lotion

Avoid instilling fear behaviours

Encourage extracurricular activities



COMMON PROBLEMS

Osteoarthritis

Spinal Pain

Balance concerns

Cardiovascular Disease

OSTEOARTHRITIS

- **Aerobic**

- helps improve pain and function with max benefit achieved in supervised settings

(Tanaka et al, 2016; Li et al, 2016; Baker & McAlindon, 2000)

- **Resistance**

- can provide more benefit vs AT due to evidence pointing to muscle weakness as a determinant of functional ability @ 60-80% intensity also improves pain, stiffness, and function

(Tanaka et al, 2016; Li et al, 2016; Tanaka et al, 2013; Fransen et al, 2015)



OSTEOARTHRITIS

- **Swimming**

- may benefit knee health, reduces all-cause mortality improving endurance and CV health, may be a link with CV health and OA, benefits with depression – which can improve OA symptoms

(Lo et al, 2019)

- **Dancing**

- preventive significance in dance sport in the elderly.
- Injury risk was low in competitive senior ballroom dancers

(Wanke et al, 2014)



LUMBAR SPINE

To flex or not to flex? (Saraceni et al, 2019)

- There was no prospective association between lumbar spine flexion when lifting and the development of significantly disabling LBP.
- Current advice to avoid lumbar flexion during lifting to reduce LBP risk is not evidence-based




LUMBAR SPINE

10 Myths about LBP (O'Sullivan et al, 2019)

- LBP is usually a serious medical condition
- Becomes persistent and deteriorates later in life
- Persistent LBP is always related to tissue damage
- Scans are always needed to detect the cause of LBP
- Pain w exercise and movement is always a warning that harm is being done to the spine and signal to stop or modify activity
- Is caused by poor posture when sitting, standing, lifting
- Caused by a weak core and having a strong core protects against future LBP
- Repeated spinal loading results in « wear and tear » and tissue damage
- Pain flare-ups are a sign of tissue damage and require rest
- Treatments such as strong medications, injections and surgery are effective and necessary to treat LBP

Aging and Physical Activity

(Stone et al, 2018)

- Deeply embedded stereotypes/expectations
- Negative impact on self-efficacy & self perception of aging
- Leads to fear-induced activity avoidance
- Further reduction of daily fitness/function
- Increasing risk of potential harm  falls = #1

Aging and Physical Activity

(Stone et al, 2018)

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- Increasing risk of potential harm – falls = #1

**HELP
PROMOTE
SUCCESSFUL
AGING!**

Sport?

- Older individuals who are regularly active in sport generally report
 - greater happiness
 - life satisfaction
 - perceived social support
 - less likely to experience symptoms of depression and chronic disease



Sport?

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MUST BE FUN!



CURLING

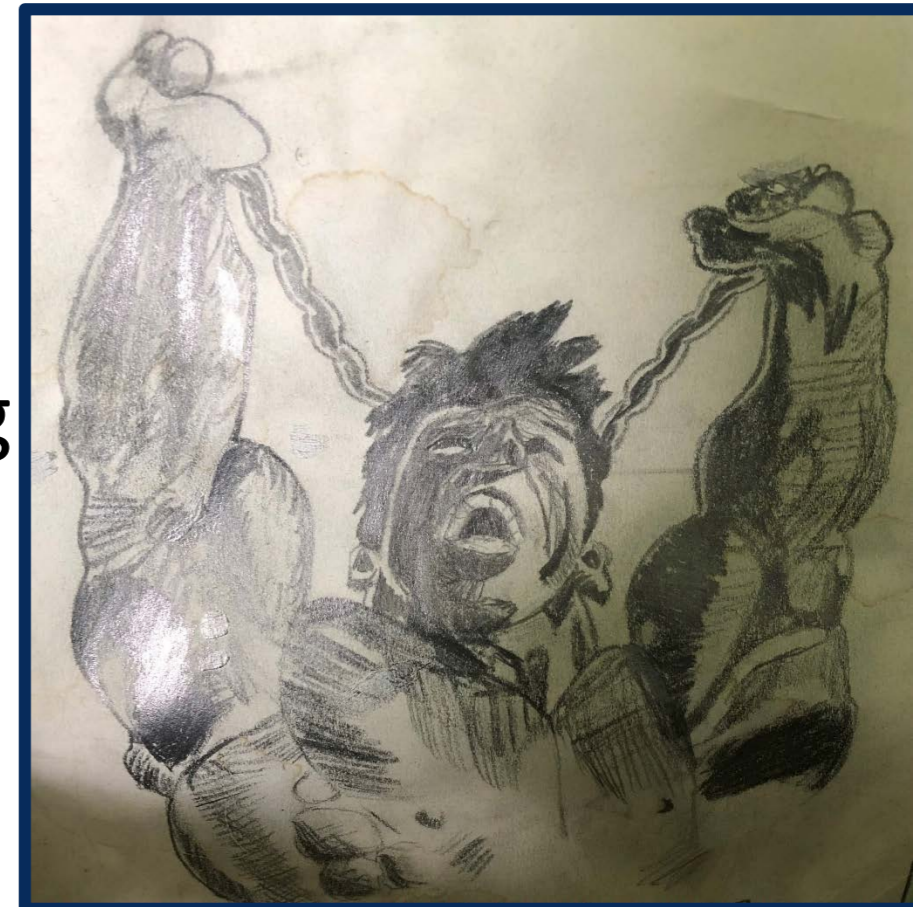
- Curlers reported less fear of falling, more confidence in effortful coordination
- Ice Specific Movement Competency + Confidence
- Psychophysical benefits vs noncurlers



(Stone et al, 2018)

Cardiovascular Disease (CVD)

- Resistance training (RT) = contraindicated in the past, now shown to be relatively safe (Williams et al, 2007)
- RT has a lower rate of adverse cardiovascular events vs aerobic training (Hollings et al, 2017)
- RT helps increase peak work capacity, strength, decrease in CV risk factors, improve co-morbidities like sarcopenia, frailty, falls, arthritis, DM, depression, PVD, renal failure



Supported by 5 meta-analyses

(Hollings et al, 2017; Marzolini and Brooks, 2012; Yamamoto et al, 2016; Yang et al, 2015; Xanthos et al, 2017)

CVD

(informal survey, Adams et al, 2006)

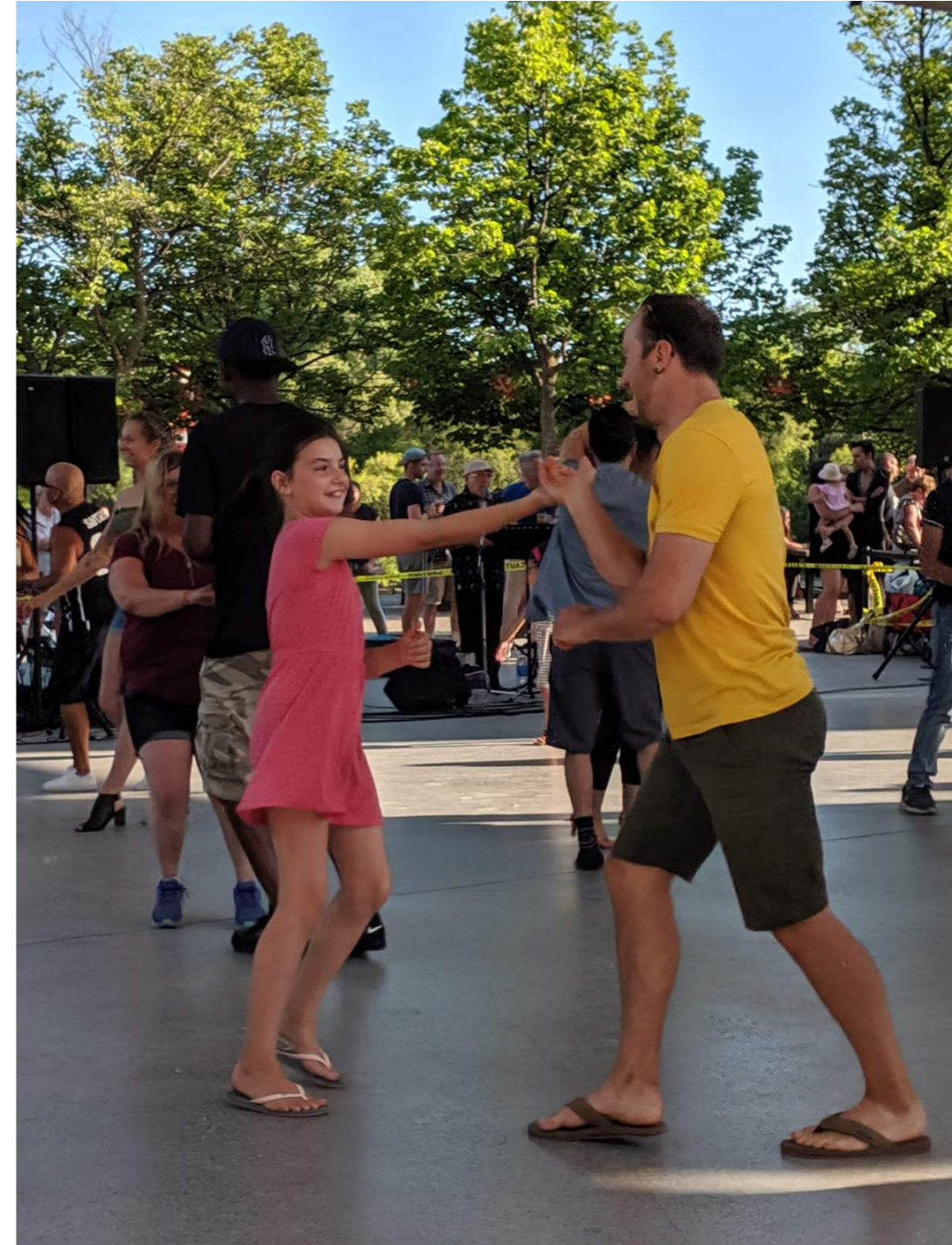
ACTIVITY	FORCE POUNDS
OPENING REFRIGERATOR	9
PUSHING LAWN MOWER	36
PULLING LAWN MOWER	38
LIFTING FULL LAUNDRY BASKET	21.5
PUSHING WITH AID OF RIGHT ARM TO RISE OFF BENCH	27.5
OPENING DOOR TO CARDIAC FACILITY	15.5
LIFTING FULL COFFEE POT	6.5
LIFTING 10LB DUMBBELL	12.5
PULLING VACUUM CLEANER	8.5

SUMMARY

Motion is Lotion
Curling Saves Lives

Avoid instilling fear
behaviours

Encourage extracurricular
activities



SUMMARY

Motion is Lotion
Curling Saves Lives

Avoid in-line skating
behaviours

Encourage extra-curricular
activities

**Get them active!
Make it fun!**





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References

1. Stone RC, Rakhamilova Z, Gage WH, Baker J. Curling for confidence: psychophysical benefits of curling for older adults. *Journal of aging and physical activity*. 2018 Apr 1;26(2):267-75.
2. Tanaka R, Ozawa J, Kito N, Moriyama H. Effects of exercise therapy on walking ability in individuals with knee osteoarthritis: a systematic review and meta-analysis of randomised controlled trials. *Clinical rehabilitation*. 2016 Jan;30(1):36-52.
3. Li Y, Su Y, Chen S, Zhang Y, Zhang Z, Liu C, Lu M, Liu F, Li S, He Z, Wang Y. The effects of resistance exercise in patients with knee osteoarthritis: a systematic review and meta-analysis. *Clinical rehabilitation*. 2016 Oct;30(10):947-59.
4. Tanaka R, Ozawa J, Kito N, Moriyama H. Efficacy of strengthening or aerobic exercise on pain relief in people with knee osteoarthritis: a systematic review and meta-analysis of randomized controlled trials. *Clinical rehabilitation*. 2013 Dec;27(12):1059-71.
5. Fransen M, McConnell S, Harmer AR, Van der Esch M, Simic M, Bennell KL. Exercise for osteoarthritis of the knee: a Cochrane systematic review. *Br J Sports Med*. 2015 Dec 1;49(24):1554-7.
6. Baker K, McAlindon T. Exercise for knee osteoarthritis. *Current Opinion in Rheumatology*. 2000 Sep 1;12(5):456-63.
7. Saraceni N, Kent P, Ng L, Campbell A, Straker L, O'Sullivan P. To Flex or Not to Flex? Is There a Relationship Between Lumbar Spine Flexion During Lifting and Low Back Pain? A Systematic Review With Meta-Analysis. *Journal of Orthopaedic & Sports Physical Therapy*. 2019 Nov 28(0):1-50.
8. O'Sullivan PB, Caneiro JP, O'Sullivan K, Lin I, Bunzli S, Wernli K, O'Keeffe M. Back to basics: 10 facts every person should know about back pain.
9. Weng PY, Chiang YC. Psychological restoration through indoor and outdoor leisure activities. *Journal of Leisure Research*. 2014 Apr 1;46(2):203-17.
10. Schmidt MD, Cleland VJ, Shaw K, Dwyer T, Venn AJ. Cardiometabolic risk in younger and older adults across an index of ambulatory activity. *American journal of preventive medicine*. 2009 Oct 1;37(4):278-84
11. Tudor-Locke C, Craig CL, Brown WJ, Clemes SA, De Cocker K, Giles-Corti B, Hatano Y, Inoue S, Matsudo SM, Mutrie N, Oppert JM. How many steps/day are enough? For adults. *International Journal of Behavioral Nutrition and Physical Activity*. 2011 Dec;8(1):79.
12. Tudor-Locke C, Hatano Y, Pangrazi RP, Kang M. Revisiting" how many steps are enough?". *Medicine & Science in Sports & Exercise*. 2008 Jul 1;40(7):S537-43.
13. Mahmoud NF, Hassan KA, Abdelmajeed SF, Moustafa IM, Silva AG. The Relationship Between Forward Head Posture and Neck Pain: a Systematic Review and Meta-Analysis. *Current reviews in musculoskeletal medicine*. 2019 Nov 26:1-6.
14. Williams MA, Haskell WL, Ades PA, Amsterdam EA, Bittner V, Franklin BA, et al. Resistance exercise in individuals with and without cardiovascular disease: 2007 update: A scientific statement from the American Heart Association Council on Clinical Cardiology and Council on Nutrition, Physical Activity, and Metabolism. *Circulation*. 2007;116(5):572-84.
15. Hollings M, Mavros Y, Freeston J, Fiatarone Singh M. The effect of progressive resistance training on aerobic fitness and strength in adults with coronary heart disease: A systematic review and meta-analysis of randomised controlled trials. *Eur J Prev Cardiol*. 2017;24(12):1242-59.
16. Adams J, Cline M, Reed M, Masters A, Ehlike K, Hartman J. Importance of resistance training for patients after a cardiac event. In *Baylor University Medical Center Proceedings* 2006 Jul 1 (Vol. 19, No. 3, pp. 246-248). Taylor & Francis.
17. Marzolini S, oh PI, Brooks D. Effect of combined aerobic and resistance training versus aerobic training alone in individuals with coronary artery disease: meta-analysis. *Eur J Prev Cardiol*. 2012;19(1):81-94.
18. Yamamoto S, Hotta K, Ota E, Mori R, Matsunaga A. Effects of resistance training on muscle strength , exercise capacity , and mobility in middle-aged and elderly patients with coronary artery disease : A meta-analysis. *J Cardiol [Internet]*. 2016;68(2):125-34.
19. Yang Y-J, He X-H, Guo H-Y, Wang X-Q, Zhu Y. Efficiency of muscle strength training on motor function in patients with coronary artery disease: a meta-analysis. *Int J Clin Exp Med [Internet]*. 2015;8(10):17536-50.
20. Xanthos PD, Gordon BA, Kingsley MIC. Implementing resistance training in the rehabilitation of coronary heart disease: A systematic review and meta-analysis. *Int J Cardiol [Internet]*. 2017;230:493-508.
21. Lo GH, Ikpeama UE, Driban JB, Kriska AM, McAlindon TE, Petersen NJ, Storti KL, Eaton CB, Hochberg MC, Jackson RD, Kwok CK. Evidence that Swimming May be Protective of Knee Osteoarthritis: Data from the Osteoarthritis Initiative. *PM&R*. 2019 Oct 19.
22. Wanke EM, Borchardt M, Fischer A, Groneberg DA. Injury profile in competitive senior ballroom dancers. *Sportverletzung Sportschaden: Organ der Gesellschaft fur Orthopadisch-Traumatologische Sportmedizin*. 2014 Dec;28(4):204-10.

Steps Per Day

- 10,000 not based on evidence, based on marketing
- <5000/day associated with a higher prevalence of a number of adverse cardiometabolic risk factors (Schmidt et al, 2009)
- 7000-8000/day (Schmidt et al, 2009, Tudor-Locke et al, 2011)
- 150 mins/week of moderate intensity AT
No complete sentences and certainly can't sing
- 100 steps/minute = moderate intensity walking, 30 mins/day in >10 mins – 3000 steps per day of MPA (Tudor-Locke et al, 2011, Tudor-Locke et al, 2008)
- Outdoor vs Indoor activity improved mental health (Weng and Chiang, 2014)

Mexico City metro offers 50,000 free tickets to commuters who perform ten squats in bid to tackle obesity

Drastic times call for drastic measures after Mexico is named second on the world obese list

@kirancmoodley 22 July 2015
Source: www.independent.com.uk

**In Russia, 30 Squats Will Get You a Train Ticket
way to promote the 2014 Sochi Olympics in Russia**

<https://youtu.be/ojo9M1cPSPI>

Osteoarthritis – example case

- 61 yo twin females, both with +++crepitus to knees
- Mild to mod narrowing of medial fem-tib compartment, mod-severe degen changes patellofemoral articulation bilat
- Neuromuscular approach, gait re-ed (agility ladder, stairs, box work), seen 8-10 times in 1 year

Cervical Spine

- It's ok to have a forward head posture
- Research is not compelling associating FHP and neck pain (Mahmoud et al, 2019)
- Need to move and change positions frequently