

Are you Physically Fit? Does Age Make a Difference? by Dr. Brian S. Seaman, DC, FCCSS(C), FICC

Physical fitness – what does it mean to you?

Generally it varies with each individual and changes with age. For the most of us, we think about a healthy heart and keeping our weight at a reasonable level. When we are younger, the levels of fitness are higher. So are our individual expectations and goals. In our 20's and 30's one may aspire to complete a triathlon or run a marathon. As we 'mature' (politically correct term for 'growing older') our thoughts focus on our overall health and well being. With this in mind, I will talk in this article about the three 'W's' – walking, water and weights. Sounds pretty simple, doesn't it? Actually it is!

Walking

I have written previously about the benefits of walking on a regular basis. This helps to burn off calories, tone the muscles of our hips and legs, and gives our heart a good workout as well. It is very important as we grow older (or 'more mature') to ensure that we provide our cardiovascular system (that's our hearts, lungs and circulation) with a good workout on a regular basis.

Walking briskly at least three times a week for 30 to 40 minutes is a good way in which to benefit our bodies. Daily would be best – but there are times when three times a week can be a challenge. This is especially true in the Winter when snow, ice and cold weather are a challenge for even the most dedicated and devoted 'fitness fan'.

When the weather becomes a challenge, it's time to consider moving indoors for a while – maybe join one of the walking clubs which many of the local malls establish.

Walking is an excellent way to get fit, stay healthy and even spend some time with your friends. If you have not walked in a while start off slowly. If you have been very physically inactive, or if you have any significant health problems (especially involving the heart, lungs or circulation) be sure to check with your family physician or health care professional. In addition to a physical examination, you may need some blood work, chest x-rays and perhaps an EKG.

Water

There are really two messages here. The first one is to ensure that you drink lots of water everyday – most people do not do this. Water is very important to our health and well-being for digestion, kidney function and bladder function – not just to quench our thirst. If you are thirsty, you are already dehydrated. Remember our parents saying to drink 8 glasses of water a day? You should! Sometimes it is easier to have a specific water container and just fill it up to ensure that you drink enough every day. Remember that tea, coffee and alcoholic beverages do not count for fluid intake. In fact they all dehydrate your body.

The second message with respect to water is exercise. Swimming is probably one of the most common exercises which we recommend for patients. Generally, the front crawl, backstroke and sidestroke are ideal as these do not cause any increased strain in the lower back. Unfortunately, the breast stroke (which many of us do) does have a tendency to put additional strain on the lower back joints of the spine. Using a flutter board can give your shoulders a break and also modify your workout by increasing the amount of variation in exercise you can use for your hips and legs. Remember to kick from your hips and not your knees.

Alternatively, a lot of my patients are using water aerobics as a means to increase their fitness level. These can be done in a shallow pool or in the deep end of a pool with a water vest. This will generally keep the head, neck and top part of your torso up out of the water. Another alternative method would be 'running' in deep water while wearing a water vest. This is especially beneficial if you are experiencing lower limb joint pain or recovering from an injury (ie. ankle or knee).

Remember to hydrate yourself with water (drink some water) after you have been in the water! Even though you are not aware of sweating, you do need to replenish your fluids after exercising at the pool.

Weights

Weight training as we get older? Yes, it can be very beneficial not only for helping to maintain our strength and muscle tone but also more importantly it can help your bone density. Weight bearing exercises (like walking) or weight training exercises (like hand weights and the gym) can help to maintain the density of our bones. Unfortunately swimming is not as effective as it is not weight bearing but it does provide resistance in the water and is much easier on arthritic joints.

If you are concerned about your bone density, speak to your health care professional. Arrangements can be made to establish a base-line bone density study to allow for future comparison.

Bone density studies use the non-dominant hip as well as the lower back. There are levels of bone density as established by the World Health Organization (WHO), which are called the T-scores. The numbers are compared to peak bone mass and will establish if you are in the normal range, osteopenic (some bone loss) or osteoporotic. Bone density studies can also establish the degree of osteoporosis as well as providing comments on the risk of fracture in the future. Sometimes, your family physician will advise medications such as Actonel, Fosamax or Didrical which help to restore some bone density if you have lost some to a significant degree.

Back to weights – if you have never done resistance training before, be sure to check with your health care professional. There may be some old knee or shoulder problems which should be taken into consideration in selecting your exercises.

In general, light weights and higher reps would be the way to go. Make an appointment with a medical exercise specialist or an experienced personal trainer to help develop your routine. Keep it short and specific to your needs and goals.

Remember...

- Make exercise and fitness part of your daily routine.
- Drink plenty of water.
- Most importantly, have fun with it!

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