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PERSONAL HEALTH

You Name It, and Exercise Helps It

By [JANE E. BRODY](#)

Randi considers the Y.M.C.A. her lifeline, especially the pool. Randi weighs more than 300 pounds and has borderline [diabetes](#), but she controls her blood sugar and keeps her bright outlook on life by swimming every day for about 45 minutes.

Randi overcame any self-consciousness about her weight for the sake of her health, and those who swim with her and share the open locker room are proud of her. If only the millions of others beset with chronic health problems recognized the inestimable value to their physical and emotional well-being of regular physical exercise.

“The single thing that comes close to a magic bullet, in terms of its strong and universal benefits, is exercise,” Frank Hu, epidemiologist at the Harvard School of Public Health, said in the Harvard Magazine.

I have written often about the protective roles of exercise. It can lower the risk of [heart attack](#), [stroke](#), [hypertension](#), diabetes, [obesity](#), [depression](#), [dementia](#), [osteoporosis](#), [gallstones](#), [diverticulitis](#), falls, [erectile dysfunction](#), [peripheral vascular disease](#) and 12 kinds of [cancer](#).

But what if you already have one of these conditions? Or an ailment like [rheumatoid arthritis](#), [multiple sclerosis](#), [Parkinson’s disease](#), [congestive heart failure](#) or [osteoarthritis](#)? How can you exercise if you’re always tired or in pain or have trouble breathing? Can exercise really help?

You bet it can. Marilyn Moffat, a professor of [physical therapy](#) at [New York University](#) and co-author with Carole B. Lewis of “Age-Defying Fitness” (Peachtree, 2006), conducts workshops for physical therapists around the country and abroad, demonstrating how people with chronic health problems can improve their health and quality of life by learning how to exercise safely.

Up and Moving

“The data show that regular moderate exercise increases your ability to battle the effects of disease,” Dr. Moffat said in an interview. “It has a positive effect on both physical and mental well-being. The goal is to do as much [physical activity](#) as your body lets you do, and rest when you need to rest.”

In years past, doctors were afraid to let heart patients exercise. When my father had a heart attack in 1968, he was kept sedentary for six weeks. Now, heart attack patients are in bed barely half a day before they are up and moving, Dr. Moffat said.

The core of cardiac rehab is a progressive exercise program to increase the ability of the heart to pump oxygen- and nutrient-rich blood more effectively throughout the body. The outcome is better endurance, greater ability to enjoy life and decreased mortality.

The same goes for patients with congestive heart failure. “Heart failure patients as old as 91 can increase their oxygen consumption significantly,” Dr. Moffat said.

Aerobic exercise lowers [blood pressure](#) in people with hypertension, and it improves peripheral circulation in people who develop cramping leg pains when they walk — a condition called [intermittent claudication](#). The treatment for it, in fact, is to walk a little farther each day.

In people who have had transient ischemic attacks, or ministrokes, “gradually increasing exercise improves blood flow to the brain and may diminish the risk of a full-blown stroke,” Dr. Moffat said. And aerobic and strength exercises have been shown to improve endurance, walking speed and the ability to perform tasks of daily living up to six years after a stroke.

As Randi knows, moderate exercise cuts the risk of developing diabetes. And for those with diabetes, exercise improves glucose tolerance — less medication is needed to control blood sugar — and reduces the risk of life-threatening complications.

Perhaps the most immediate benefits are reaped by people with joint and neuromuscular disorders. Without exercise, those at risk of osteoarthritis become crippled by stiff, deteriorated joints. But exercise that increases strength and aerobic capacity can reduce pain, depression and [anxiety](#) and improve function, balance and quality of life.

Likewise for people with rheumatoid arthritis. “The less they do, the worse things get,” Dr. Moffat said. “The more their joints move, the better.”

Exercise that builds gradually and protects inflamed joints can diminish pain, fatigue, morning stiffness, depression and anxiety, she said, and improve strength, walking speed and activity.

Exercise is crucial to improving function of total hip or knee replacements. But “most patients with knee replacements don’t get intensive enough activity,” Dr. Moffat said.

Water exercises are particularly helpful for people with multiple sclerosis, who must avoid overheating. And for those with Parkinson’s, resistance training and aerobic exercise can increase their ability to function independently and improve their balance, stride length, walking speed and mood.

Resistance training, along with aerobic exercise, is especially helpful for people with [chronic obstructive pulmonary disease](#); it helps counter the loss of muscle mass and strength from lack of oxygen.

In the February/March issue of ACE Certified News, Natalie Digate Muth, a registered dietitian and personal trainer, emphasized the value of a good workout for people suffering from depression. Mastering a new skill increases their sense of worth, social contact improves mood, and the endorphins released during exercise improve well-being.

“Exercise is an important adjunct to pharmacological therapy, and it does not matter how severe the depression — exercise works equally well for people with moderate or severe depression,” wrote Ms. Muth, who is pursuing a medical degree at the [University of North Carolina](#), Chapel Hill.

Feel-Good Hormones

Healthy people may have difficulty appreciating the burdens faced by those with chronic ailments, Dr. Nancy Trevanian Tsai noted in the same issue of ACE Certified News. “Oftentimes, disease-ridden statements — like ‘I’m a diabetic’ — become barricades that keep clients from seeing themselves getting better,” she said, and many feel “enslaved by their diseases and treatments.”

But the feel-good hormones released through exercise can help sustain activity.

“With regular exercise, the body seeks to continue staying active,” wrote Dr. Tsai, an assistant professor of neurosciences at the Medical University of South Carolina in Charleston. She recommended an exercise program tailored to the person’s current abilities, daily needs, medication schedule, side effects and response to treatment.

She urged trainers who work with people with chronic ailments to start slowly with easily achievable goals, build gradually on each accomplishment and focus on functional gains. Over time, a sense of accomplishment, better sleep, less pain and enhanced satisfaction with life can become further reasons to pursue physical activity.

“Even if exercise is tough to schedule,” Dr. Moffat said, “you feel so much better, it’s crazy not to do it.”

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