

exercising with arthritis



Do you have arthritis? You're not alone. Approximately 42.7 million Americans have arthritis, as well as millions of people around the world. Doctors now commonly prescribe exercise to alleviate arthritis symptoms. However, it can

be confusing to know what type of exercise to do and how much is helpful.

Get some guidance on this topic below from exercise experts Johndavid Maes, MS, a recent graduate in exercise science at the University of New Mexico, Albuquerque (UNMA), and exercise physiologist for Lovelace Sandia Health Systems, and Len Kravitz, PhD, senior exercise physiologist for IDEA, and the coordinator of exercise science and a researcher at UNMA.

Cardiovascular Exercise

[1] Before you begin any exercise program, it's important to get medical clearance from your doctor. You may also want to work with a certified personal fitness trainer who can design a safe program for you and teach you how to warm up your muscles and prepare your joints before cardiovascular, resistance and flexibility exercise.

benefits of exercise

Recent research has demonstrated that a regular program of cardiovascular exercise and progressive strength training can lead to improvements in strength, function and joint symptoms in people with arthritis. Fitness-related problems common to arthritis—such as flexibility loss, muscle atrophy, weakness, osteoporosis, pain, depression and fatigue—are found to respond favorably to a low- to moderate-intensity, gradually progressing program.

Exercise can also help you lose weight. Inactivity, a frequent consequence of arthritis, leads to a negative shift in body composition (decreased muscle mass and increased body fat percentage), raising the risk of hypertension, obesity, osteoporosis, type 2 diabetes, cardiovascular disease and cancer of the colon.

Exercise should focus on cardiovascular conditioning, improvements in muscular strength and endurance, increased flexibility and joint mobility, and joint protection. In general, avoid exercise during periods of peak pain and joint inflammation.

Use the following strategies for cardiovascular exercise:

- Incorporate smooth, rhythmic activities that use the large muscle groups.
- Avoid high-impact exercises that might stress the affected joints.
- Exercise 3–5 days per week.
- Exercise at an intensity of 60–80 percent of maximum heart rate.
- Depending on your fitness level, you might begin with as little as 5 minutes of cardiovascular activity and gradually progress to 30 minutes.
- When progressing, increase duration before intensity.
- Try walking, rowing, swimming, cycling and aquatic workouts. If possible, vary activities. Lower the resistance setting for activities such as cycling, rowing and elliptical training, when exercising affected joints.

Resistance Training

[2] A well-designed resistance training program can help you strengthen the muscle groups around the affected joints, thereby offering protection and stabilization, improving shock absorption and reducing the mechanical stresses that can accelerate cartilage degeneration. A sound program

should incorporate all the major muscle groups, not just those supporting the joints affected by arthritis. Use these tips for strength training:

- Avoid exercises that increase joint pain.
- Establish a frequency of 2–3 days per week. Allow 24 hours between sessions for recovery.
- If you haven't exercised for a long time, begin with just 2–3 repetitions, and gradually progress to 10–12.
- Try free weights, weight machines, isometrics and/or elastic bands.
- Avoid high-repetition, high-resistance exercises that cause a greater force impact on affected joints.

Flexibility Exercise

[3] Stretching and active and passive range-of-motion exercises can help you maintain and improve mobility. Consider these strategies for flexibility training:

- Precede sessions with a thorough warm-up to increase internal body temperature and circulation.
- Incorporate flexibility work as often as every day.
- Give special attention to the lower back, hamstrings, calves and front of the shoulders.
- Include static stretches, holding for 10–30 seconds. Stretches may be repeated 1–4 times. ■

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