

## Who Should Exercise?

### Is It Safe for Me to Exercise

"Too old" and "too frail" are not, in and of themselves, reasons to stop physical activity. In fact, there aren't very many health reasons to keep older adults from becoming more active.

Most older people think they need their doctor's approval to start exercising. That's a good idea for some people. Your doctor can talk to you not only about whether it's all right for you to exercise but also about what can be gained from exercise.



### Chronic Diseases: Not Necessarily a Barrier



Chronic diseases can't be cured, but usually they can be controlled with medications and other treatments throughout a person's life. They are common among older adults, and include diabetes, cardiovascular disease (such as high blood pressure), and arthritis, among many others.

Traditionally, exercise has been discouraged in people with certain chronic conditions. But today we know that exercise can actually improve some chronic conditions in most older people, **as long as it's done when the condition is under control.**

Congestive heart failure (CHF) is an example of a serious chronic condition common in older adults. In people with CHF, the heart can't empty its load of blood with each beat. This results in a backup of fluid throughout the body, including the lungs. Changes in heart rhythm also are common in CHF. Older adults are hospitalized more often for CHF than for any other disease.



No one is sure why, but muscles tend to waste away badly in people with CHF, leaving them weak, sometimes to the point that they can't perform everyday tasks. No medicine has a direct muscle-strengthening effect in people with CHF, but muscle-building exercises (lifting weights, for example) can help them improve muscle strength.

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Having a chronic disease like CHF probably doesn't mean you can't exercise. But it does mean that keeping in touch with your doctor is important if you do exercise. For example, endurance exercises, like brisk walking, may improve how well the heart and lungs work in people with CHF, **but only in people who are in a stable phase of the disease.** People with CHF, like those with most chronic diseases,



have periods when their disease gets better, then worse, then better again, off and on. The same endurance exercises that might help people in a stable phase of CHF could be very harmful to people who are in an unstable phase; that is, when they have fluid in their lungs or an irregular heart rhythm.

If you have a chronic condition, you need to know how you can tell whether your disease is stable; that is, when exercise would be OK for you and when it wouldn't.

If you have a chronic disease, you see a doctor regularly (if you don't, you should, for many reasons). Talk with your doctor about symptoms that mean trouble -- a flare-up, or what doctors call an acute phase or exacerbation of your disease. If you have CHF, you know by now that the acute phase of this disease should be taken very, very seriously. You should **not** exercise when warning symptoms of the acute phase of CHF, or any other chronic disease, appear. It could be dangerous.

But you and your doctor also should discuss how you feel when you are free of those symptoms -- in other words, **stable**; under control. This is the time to exercise.

Diabetes is another chronic condition common among older people. Too much sugar in the blood is a hallmark of diabetes. It can cause damage throughout the body. Exercise can help your body "use up" some of the damaging sugar.



The most common form of diabetes is linked to physical **inactivity**. In other words, you are less likely to get it in the first place, if you stay physically active.



If you do have diabetes and it has caused changes in your body -- cardiovascular disease, eye disease, or changes in your nervous system, for example -- check with your doctor to find out what exercises will help you and whether you should avoid certain activities. If you take insulin or a pill that helps lower your blood sugar, your doctor might need to adjust your dose

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so that your blood sugar doesn't get too low.

Your doctor might find that you don't have to modify your exercises at all, if you are in the earlier stages of diabetes or if your condition is stable.



Skiing is a vigorous exercise

If you are a man over 40 or a woman over 50, check with your doctor first if you plan to start doing **vigorous**, as opposed to moderate, physical activities. Vigorous activity could be a problem for people who have "hidden" heart disease -- that is, people who have heart disease but don't know it because they don't have any symptoms.

How can you tell if the activity you plan to do is vigorous? There are a couple of ways. If the activity makes you breathe hard and sweat hard (if you tend to sweat, that is), you can consider it vigorous. See the hand out "Endurance Exercises" if it is recommended that you do them.

If you have had a heart attack recently, your doctor or cardiac rehabilitation therapist should have given you specific exercises to do. Exercises done as part of a cardiac rehabilitation program can improve fitness and even reduce your risk of dying. If you didn't get instructions, call your doctor to discuss exercise before you begin increasing your physical activity.



Walking as part of a cardiac rehab program

For some conditions, vigorous exercise is dangerous and should **not** be done, even in the absence of symptoms. Be sure to check with your physician before beginning any kind of exercise program if you have:

- ◆ **abdominal aortic aneurysm**, a weakness in the wall of the heart's major outgoing artery (unless it has been surgically repaired or is so small that your doctor tells you that you can exercise vigorously)
- ◆ **critical aortic stenosis**, a narrowing of one of the valves of the heart.



Most older adults, regardless of age or condition, will do just fine in increasing their physical activity.

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## Checkpoints

You have already read about precautions you should take if you have a chronic condition. Other circumstances require caution too. You **shouldn't exercise until checking with a doctor if you have:**

- ◆ chest pain
- ◆ irregular, rapid, or fluttery heart beat
- ◆ severe shortness of breath
- ◆ significant, ongoing weight loss that hasn't been diagnosed
- ◆ infections, such as pneumonia, accompanied by fever
- ◆ fever, which can cause dehydration and a rapid heart beat
- ◆ acute deep-vein thrombosis (blood clot)
- ◆ a hernia that is causing symptoms
- ◆ foot or ankle sores that won't heal
- ◆ joint swelling
- ◆ persistent pain or a problem walking after you have fallen
- ◆ certain eye conditions, such as bleeding in the retina or detached retina. Before you exercise after a cataract or lens implant, or after laser treatment or other eye surgery, check with your physician.



## Summary

Contrary to traditional thinking, regular exercise **helps**, not hurts, most older adults. Older people become sick or disabled more often from **not** exercising than from exercising. Those who have chronic diseases, or risk factors for them, may actually improve with regular exercise, but should check with their doctor before increasing their physical activity.

There are few reasons to keep older adults from increasing their physical activity, and "too old" and "too frail" aren't among them.

If you plan to work your way up to a vigorous level, check with your doctor first if you are a man over 40 or a woman over 50. Also check with your doctor first if you have any of the conditions listed under "Checkpoints."



Too old or too frail is not a reason to avoid the right kind of exercise. Talk with your provider!

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Your doctor or cardiac rehabilitation specialist can give you guidelines for physical activity if you have had a heart attack recently. Controlled exercise usually is an important part of long-term heart-attack recovery.

People with conditions called "abdominal aortic aneurysm" or "critical aortic stenosis" should not exercise unless their physicians tell them they can.

Almost all older adults, regardless of age or condition, can safely improve their health and independence through exercise and physical activity.



**Note:**

The Surgeon General has issued a report warning people -- including older adults -- **that physical inactivity is a major risk to their health.**