

Some helpful hints for exercise class leaders taking classes for older people

Keep in mind when taking exercise classes these important points:

- enjoyment
- companionship
- exercise as an everyday part of life ie regular and ongoing

Hints for the class

- Try to have two levels of exercise ie choice of hard or easy; fast or slow to accommodate different abilities
- Chairs must be available to rest if necessary – the floor may not be an option for some
- Class participants need to know *it's ok to sit* if they need to
- Consider individual special needs eg a client may have to hold a chair or need wall support while doing balance exercises
- Encourage 30 minutes of exercise of some sort a day; this can be done in several bursts and not just all at once
- Variety of exercise is great - eg walks, swimming, exercise class, bowls, gardening, dancing
- WALK WALK WALK!!!



Specific Conditions

Arthritis - Osteo and Rheumatoid

- In an acute phase
(pain, swelling, stiffness, heat around a joint)
Rest is best – start exercising as these symptoms subside
- High impact exercises are tough on older joints and not wise on damaged arthritic joints
- Maintaining a good range of movement in all joints is important “Use it or lose it”.
- Muscle strength is important to help support joints

Osteoporosis

- Postural exercises are important to minimise the development of that round-shouldered look
- High impact exercises put too much stress on weakened bones, especially the back
- Flexion (forward bend) of the spine with weights in the hands places too much stress on weak thoracic (mid back) bones
- The more walking and weight bearing activity people do the better for bone density.

Total Hip Replacement

Those movements to be avoided over the first eight weeks (all patients have been told in hospital)

- Hip and knee flexion of more than 90°
- Avoid low chairs
- Turning the leg inwards - “pigeon-toes” (internal rotation)
- Avoid crossing the legs - sitting
- Avoid crossing the legs – standing
- No “grape vines”!
- Avoid twisting the body and hence turning the leg inwards



DO keep your hip at a 90° angle

Total Knee Replacements

- Work those thigh muscles (quadriceps)
- Getting full leg extension – (the knee straight) is more important than full bend
- Regaining knee bend takes time – avoid forcing it
- Kneeling becomes very uncomfortable/impossible – best avoided

Hints for Stair Climbing – for troublesome hip or knee

- One step at a time
- Going **up** stairs
Good leg up first
- Going **down** stairs
Bad leg down first
“Up to Heaven, down to Hell”



Getting down to the floor and up

Down to the floor - use a chair – seat to lean on

- go down on one knee first (the bad leg)
- then down on the second knee
- hands to the floor (on all fours)
- lower buttocks to the ground

Up from the floor - get on all fours next to a chair

- put hands on the chair seat
- bring good leg up to half kneeling position
- use chair for support to rise to standing



Chest conditions and shortness of breath

- Encourage participants to stop for a rest before they get very short of breath
- Remember – you should be able to exercise and still talk!
- Suggest stop-start exercise – intermittent rests
- Keep reminding class they can do a slow/easier version of an exercise

Specific Movements to Stress

- Dorsiflexion (foot up)
 - older folk tend not to lift their feet as high, hence can trip on very little
- Quadriceps Exercises (thigh muscle)
 - essential for all mobility and to protect knees
- Sit/Stand Exercises
 - standing up easily is a very basic vital movement for independence and very good quads exercise – try slowly up and down (as long as knees are not sore)
- Exercises to encourage getting knees fully straightened – more important than full bend ie inner range quads exercise
- Hip extension – one of the first movements to become limited with hip arthritis
- Shoulder exercises to encourage good posture. Especially important for osteoporosis, ankylosing spondylitis where severe curvature of the thoracic spine can occur
- Balance exercises are important to this age group and it does improve with practise!!
 - encourage using support (a chair or wall) if confidence is lacking
 - Or holding each other!
 - progress to not holding on for these exercises

Suggestions

- walk on tip toes
- “heel-toe” walk
- heel walk
- exercises standing on one leg
- walking backwards

