

# *CISM Scientific Symposium 2000*





# ***Sport as Medicine***

***Lt. Col. P. Jenoure  
Muttenz, Switzerland***



# Benefits

# Risks

- ◆ **Cardio-vasc. Mortality** ↓
- ◆ **Life hope** ↑
- ◆ **Platelet aggregation** ↓
- ◆ **Blood rheology**
- ◆ **Fluidity** ↑
- ◆ **Oxygene need by myoc.** ↓
- ◆ **Sore of ventr. Arythmia** ↑
- ◆ **Lipid profile**
- ◆ **HDL** ↑ / **LDL** ↓
- ◆ **Triglycerid** ↓
- ◆ **Hypertensin** ↓
- ◆ **Tolerance to glucose** ↑



# Benefits

- ◆ *Bone density* ↗
- ◆ *Osteoporosis* ↘
- ◆ *Functional capacity (age)* ↗
- ◆ *Colic carcinoma* ↘
- ◆ *Depression* ↘
- ◆ *No overweight*
- ◆ *No smoking*
- ◆ *No absentism*
- ◆ *visit to doctors inc. for men*
- ◆ *visit to doctors dec. for women*

# Risks

- ◆ *Injuries and Overload of the locomotion system* ↗
- ◆ *Arthrosis (knee, hip)* ↗
- ◆ *Sudden heart death*
- ◆ *Anorexia*
- ◆ *Sec. amenorrhea* ↗
- ◆ *Enteral hemorrhagies*







# CISM International Workshop on *“Ageing and Physical Activity”*



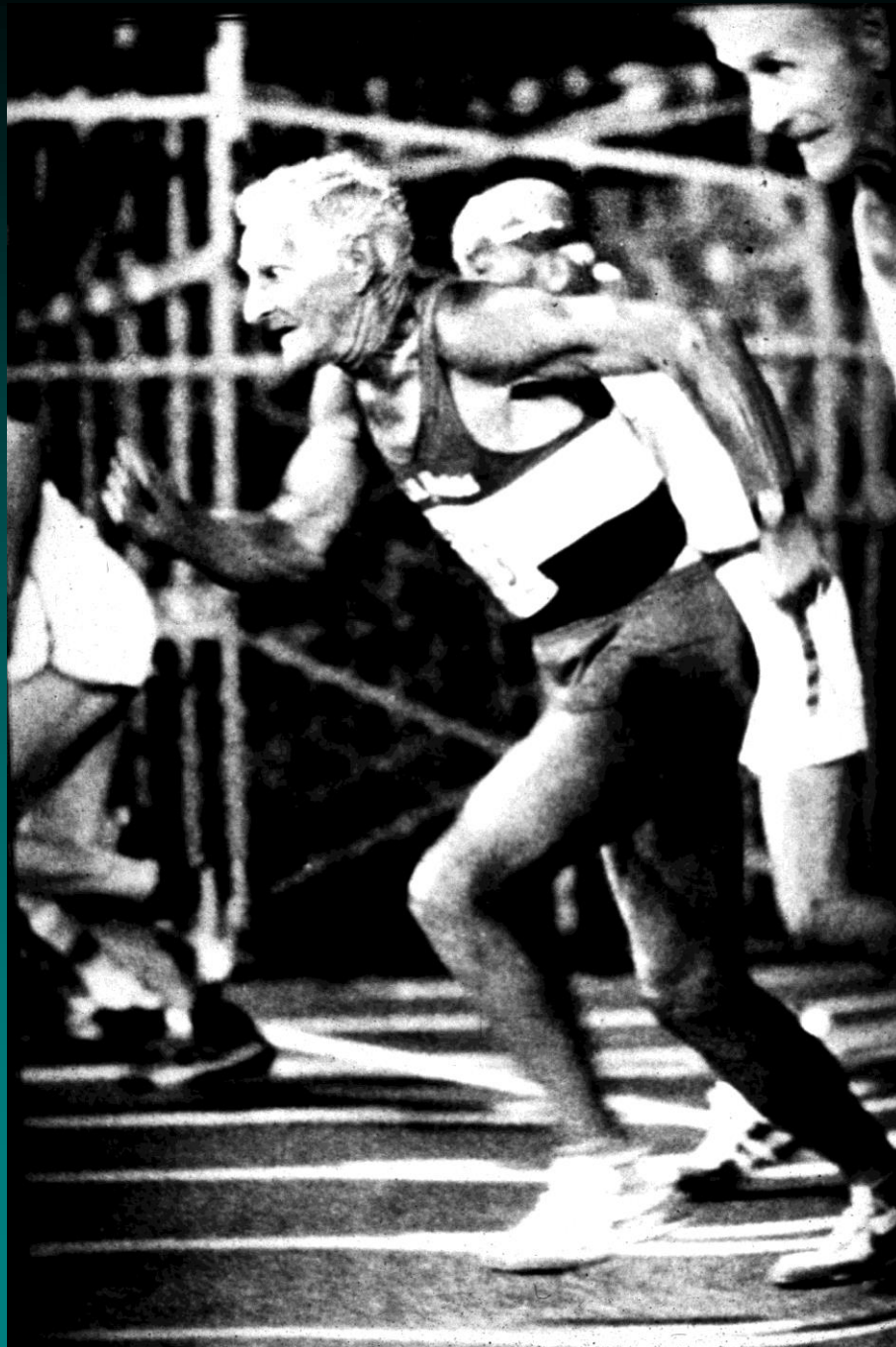
Warendorf - Germany  
28 May - 1 June 2001



# *Biomedical Basis of Sporting Activities in Aging*

*P. Jenoure*







**Table 1. Effects of aging and strength training on risk factors for age-related diseases**

Disease/risk factors	Effects of aging	Reference	Effects of strength training	Reference
<b>Sarcopenia</b>				
muscular strength	↓↓↓	2, 3	↑↑↑	34
muscle mass	↓↓	156	↑↑	22-32
muscle power	↓↓	33	↑	231
muscle quality	↓	2, 3	↑	35
<b>Coronary heart disease</b>				
VO <sub>2max</sub>	↓↓	69	↔	71-74
endurance performance	↓↓	69	↑	76-78
plasma lipoprotein-lipid profile	↓ or ↔	79-83	↔	89-94
Hypertension	↑	102	↓ or ↔	71, 93, 104, 108, 110
<b>Diabetes</b>				
glucose intolerance	↑	13, 130-133	↓ or ↔	71, 93, 98, 116, 122, 143, 149, 151, 152
insulin resistance	↑	132	↓ men, ↔ women	67, 98, 115, 124, 125, 152, 153
<b>Abdominal obesity syndrome</b>				
total body fat	↑↑	156	↓	31
intra-abdominal fat	↑	154, 155	↓ or ?	31, 94, 158, 159
resting metabolic rate	↓	161, 162	↑ men, ↔ women	144, 165, 169-173, 177
<b>Osteoporosis</b>				
bone mineral density	↓	12, 179	↑ or ↔	175, 181, 186-191, 196 (unpublished data) <sup>a</sup>
risk of falls	↑	10	↓	22, 175
Loss of flexibility	↑	146, 213, 214	↔ or ↑	217, 220-225, 227, 228
Osteoarthritis	↑	199	↓	203, 208-211

a Ryan AS, Ivey FM, Hurlbut DE, et al., unpublished data.

VO<sub>2max</sub> = maximal oxygen uptake; ↓ = decrease; ↓↓ = moderate to large decrease; ↓↓↓ = very large decrease; ↑ = increase; ↑↑ = moderate to large increase; ↑↑↑ = very large increase; ↔ = little or no change or conflicting evidence; ? = unknown or too little data available to conclude.



# Aging: Summary

- ◆ *With increasing age all the psycho-physical factors affecting performance are decreasing.*
- ◆ *Mainly velocity, strength and mobility are affected.*
- ◆ *This decrease can be minimized by an adapted training.*
- ◆ *The ability to train exists at all ages, but the training effects are smaller for elderly people .*
- ◆ *Trained subjects are superior to untrained ones in all age categories.*
- ◆ *Training has a bigger influence on the psycho-physical capacity of performance of the human organism than age.*







# ***Sport and Health Health and Sport***

***Col. P. Jenoure  
MuttENZ, Switzerland***



**Sport**





# *Sport*

*Schoolsport*  
*Military Sport*  
*High land Sport*  
*Sport for Disabled*

*Sport for all*  
*.....*













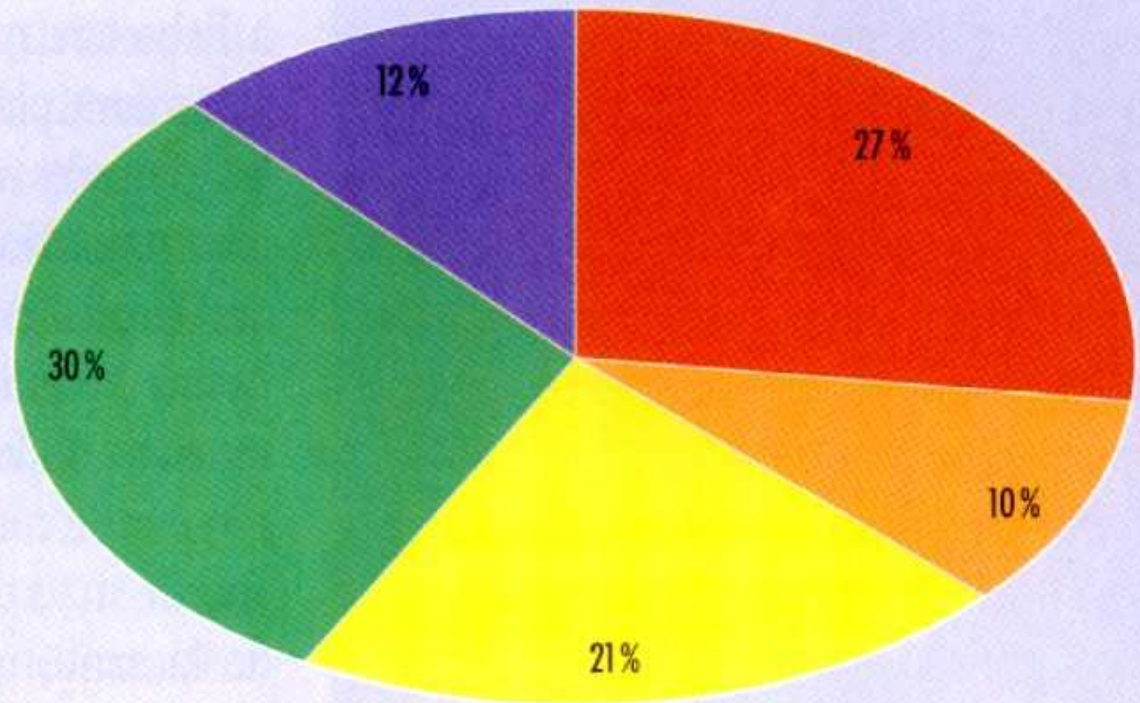


# *Factors of Physical Condition*

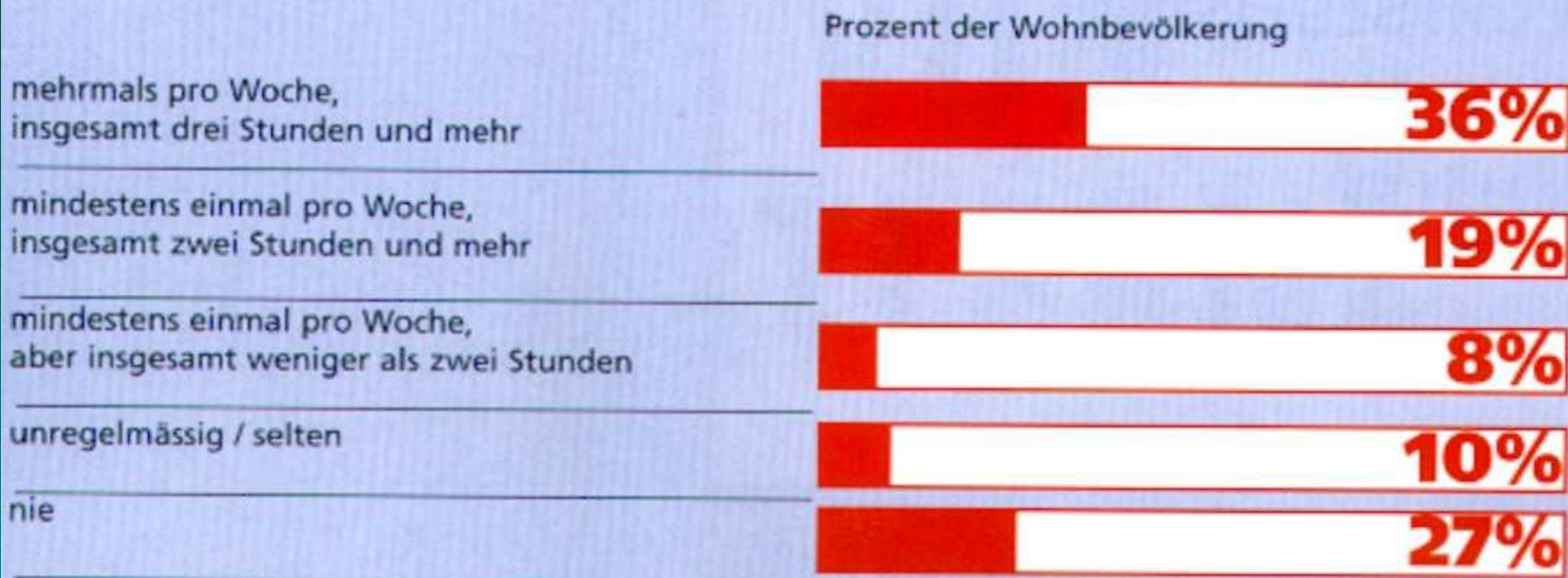
- ◆ *Endurance*
  - *aerob*
  - *anaerob*
    - *lactacide*
    - *alactacide*
- ◆ *Speed*
- ◆ *Strength*
- ◆ *Flexibility*
- ◆ *Coordination*



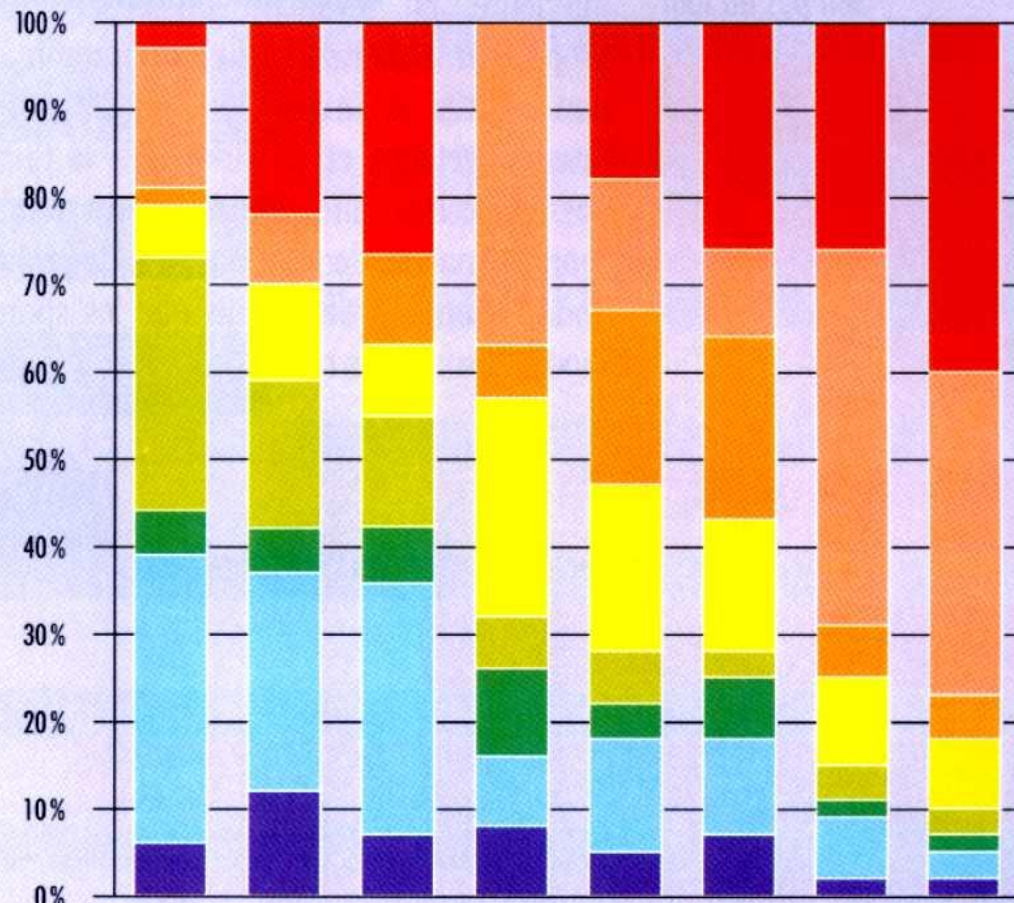
- jamais
- occasionnellement
- une fois par semaine
- plusieurs fois par semaine
- (presque) chaque jour



# Sportaktivität in der Schweizer Bevölkerung



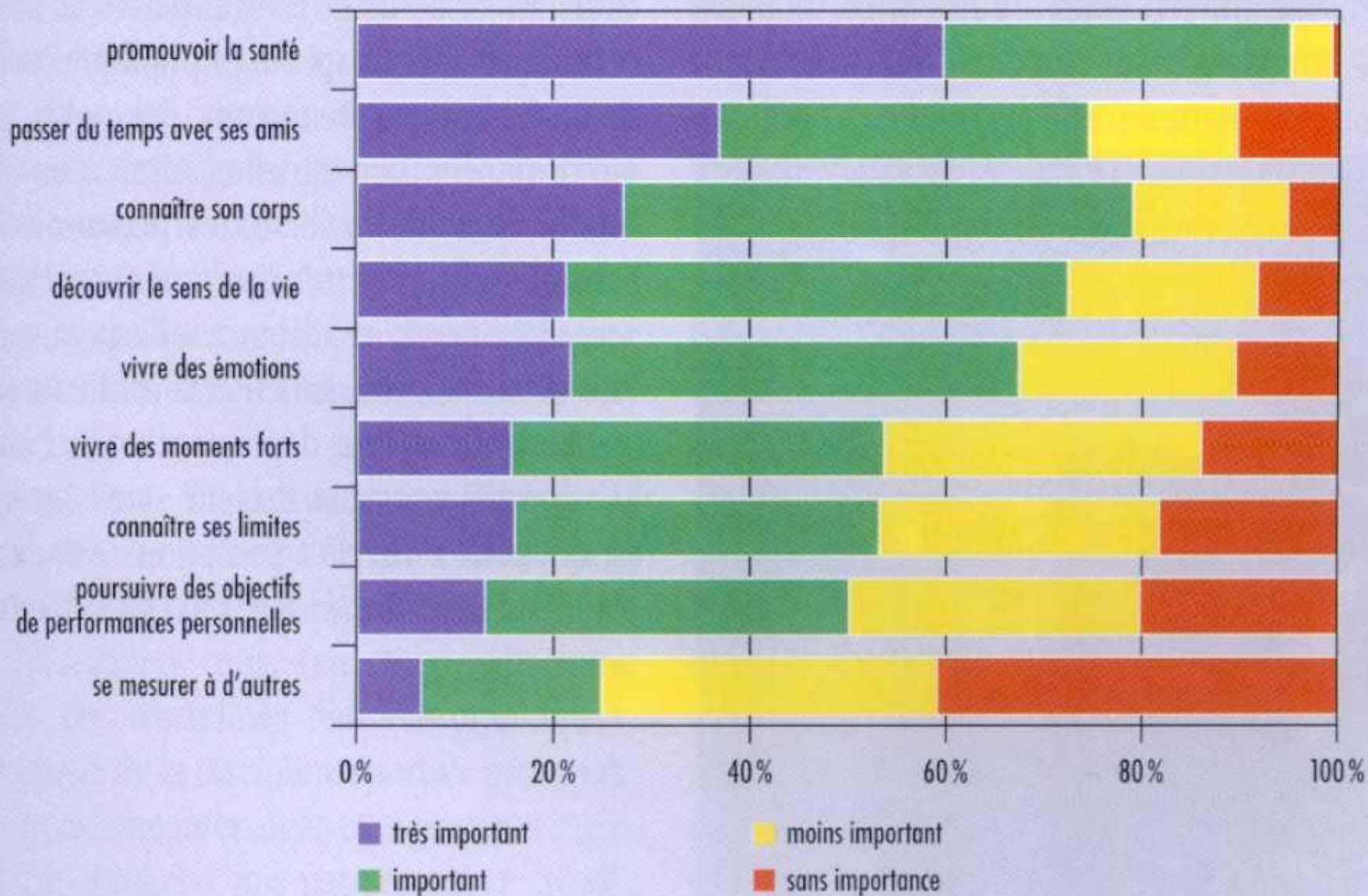


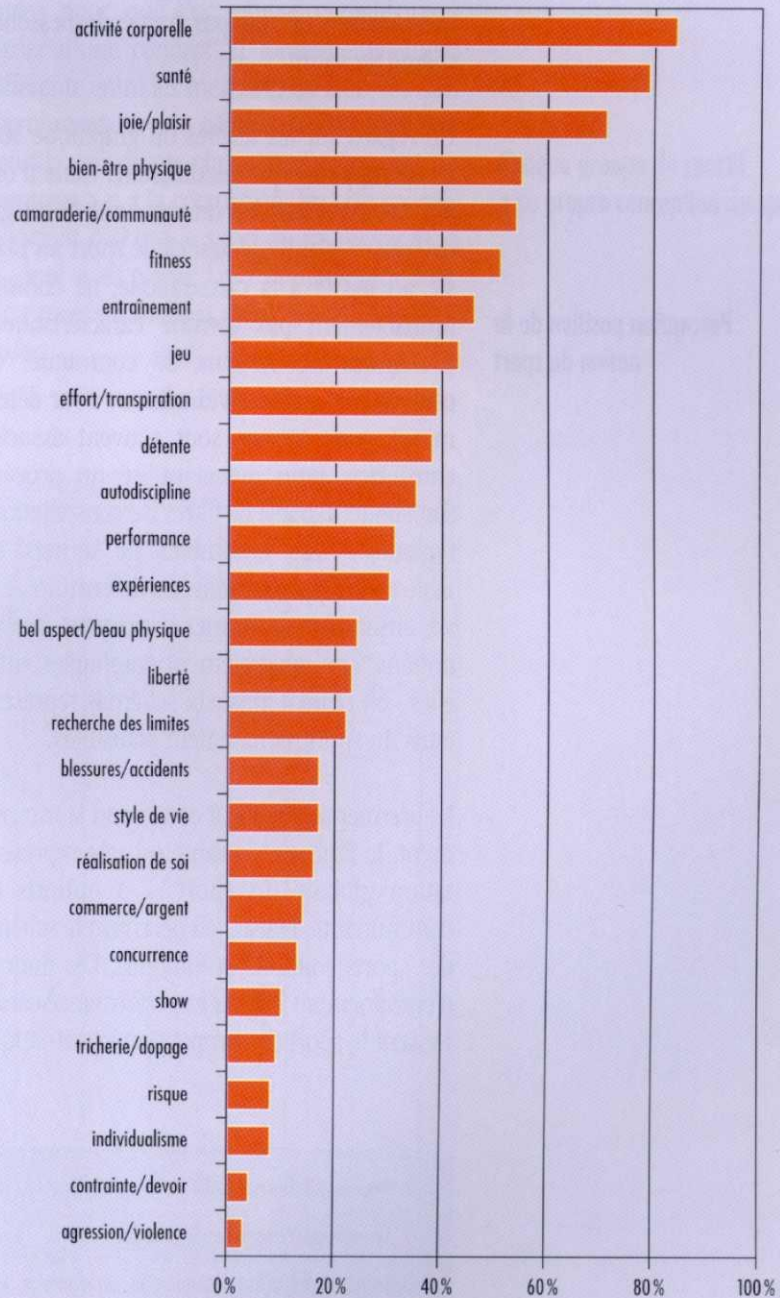


- aucune activité physique
- activités physiques non sportives
- sport occasionnel
- sport irrégulier
- sport régulier
- pratique régulière du sport en club ou compétition
- sport intensif
- sport de compétition intensif en club









*Absence of disease or infirmity*



***“Health is not everything but  
everything is nothing without  
health”***

***A. Schopenhauer***





# Health

**Somatic -**

**Mental -**

**Social -**

**Wellbeing**

**WHO**



## **TABLE 1. The Leading Health Indicators Identified as Key Objectives of the Healthy People 2010 Initiative**

Physical activity  
Overweight and obesity  
Tobacco use  
Substance abuse  
Responsible sexual behavior  
Mental health  
Injury and violence  
Environmental quality  
Immunization  
Access to healthcare



# Evolution des principales causes de décès

Nombre de décès

30000

25000

20000

15000

10000

5000

0

Appareil cardio-vasculaire

Tumeurs

Appareil respiratoire

Accidents et violences

Appareil digestif

25994

15598

4477

2350

2242

1980

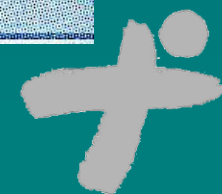
1985

1990

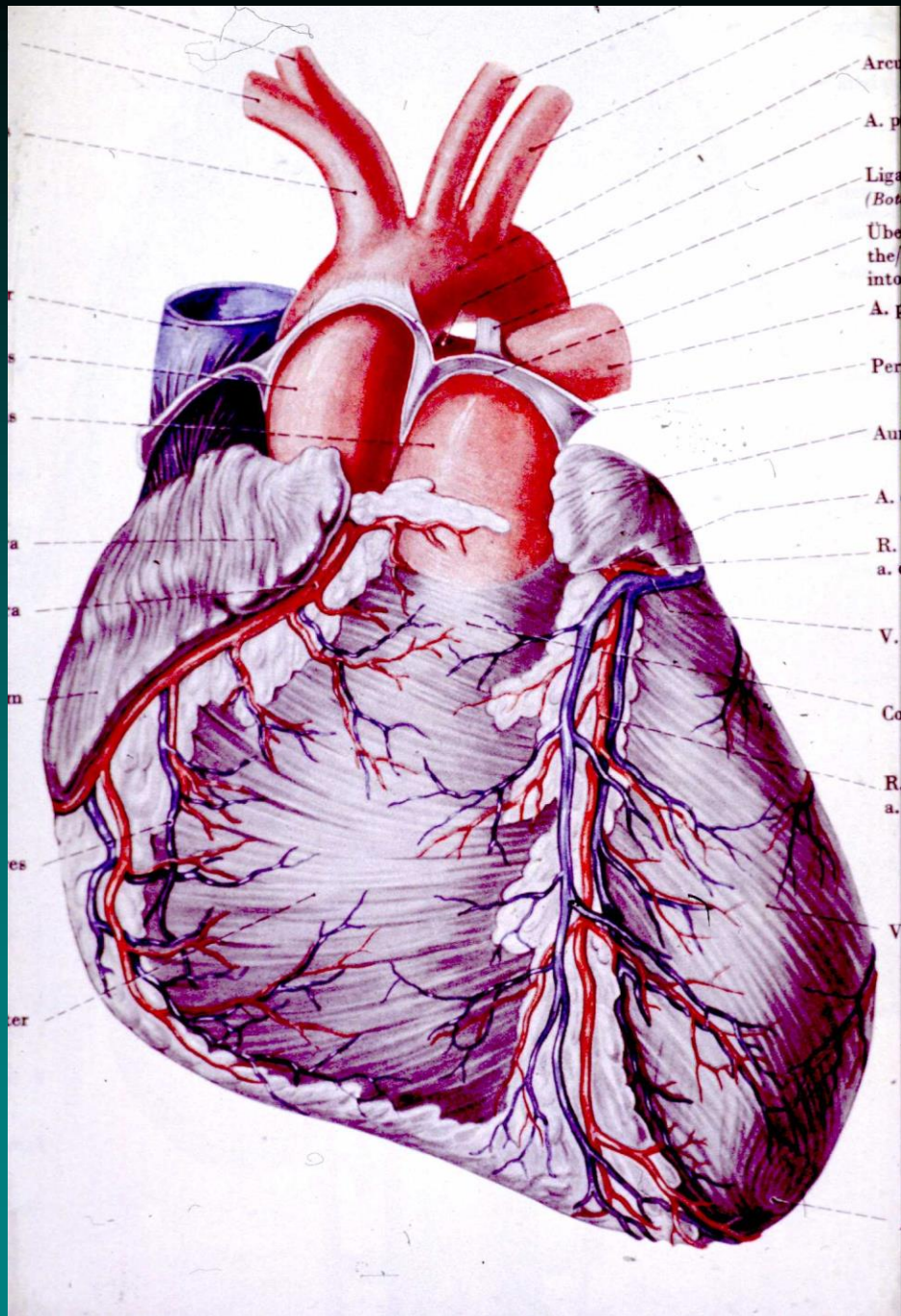
1995

96

97







## ***Sport activities proloungue life***

***All-cause mortality associated with physical activity during leisure time, work, sport and cycling to work.***

***Anderson LB, Schnohr P, Schroll M, et al  
Arch Intern Med 2000, 160: 1621-1628***



# Effect of fitness level

Ladies	%	bad	average	Good
Total mortality	100	39.5	16.4	7.4
Cardiovascular	16.3	7.4	2.9	0.8
Cancer	41.9	16.3	9.7	1.0
Accidents	11.6	3.9	1.0	1.8
Varia	30.3	13.1	2.9	2.7



# Effect of fitness level

Men	%	bad	average	Good
Total mortality	100	64.0	26.3	20.3
Cardiovascular	27.5	24.6	7.8	3.1
Cancer	26.7	20.3	7.3	4.7
Accidents	18.3	4.8	5.8	5.4
Varia	27.5	19.7	5.0	7.2

# **Sport - Smoking**

	<b>Sport</b>	<b>No Sport</b>
<b>Non Smoker</b>	<b>1.5%</b>	<b>3.8%</b>
<b>Smoker (light) 11-20</b>	<b>4.6%</b>	<b>9.6%</b>
<b>Smoker (strong) 21 and more</b>	<b>4.6%</b>	<b>11.6%</b>

**(Morris, 1980, n=17944)**

## Vorbeugung und Therapie kolorektaler Karzinome

# Bis zu 50 % Risikoreduktion durch Sport möglich!

**MIAMI – Kolorektale Karzinome sind die zweithäufigste Ätiologie bei onkologischen Todesfällen. Und bei etwa zwei Drittel der Erkrankungen spielt unsere „westliche“ Lebensweise eine wichtige Rolle bei der Entstehung. „50 % Risi-**

Risiko und Kosten ungleich höher sind als bei der Sigmoidoskopie.

### Neue Perspektiven mit neuen Zytostatika

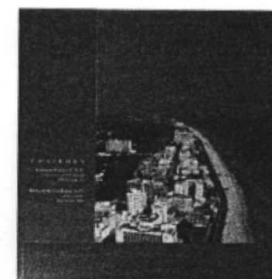
In den letzten Jahren hat sich das Spektrum der therapeutischen Möglichkeiten in der Behandlung

des kolorektalen Karzinoms erheblich erweitert. Seit über vier Jahrzehnten wurde 5-Fluorouracil\* nach wechselndem Chemotherapieprotokoll systemisch verabreicht. Jetzt steht ein orales Präparat, das Fluoropyrimidin Capecitabine\* zur Verfügung. Dieses bietet,

wie Studien gezeigt haben, neben einer höheren Akzeptanz bei Patienten auch den Vorteil einer kontinuierlichen Wirkstoffzufuhr und einer höheren Ansprechrate, berichtete Professor Dr. Edward Chu, Yale University School of Medicine.

fen mehrere weltweite Studien die Wirksamkeit dieser Substanzen in Kombination mit Capecitabine belegen sollen. Möglicherweise werden sie bald zum First-Line-Behandlungsprotokoll gehören.

*Dr. Anka Stegmeier-Petro*



Zur Kombinationstherapie stehen ebenfalls neue Substanzen zur Verfügung: es handelt sich hierbei um ein Platin-derivat (Oxaliplatin\*) und einen Topoisomerase II-Inhibitor (Irinotecan\*). Zur Zeit





# ***Risk Factors***

- ◆ ***Increased blood fat***
- ◆ ***Diabetes***
- ◆ ***High blood pressure***
- ◆ ***Smoking***
- ◆ ***Obesity***





# the physician and sportsmedicine

October 2000

Ten Dollars

Special Issue:  
Healthy People 2010

### Editor's Notes

Healthy People 2010:  
Steps in the Right  
Direction

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Achieving Fitness Equality for Minority Patients

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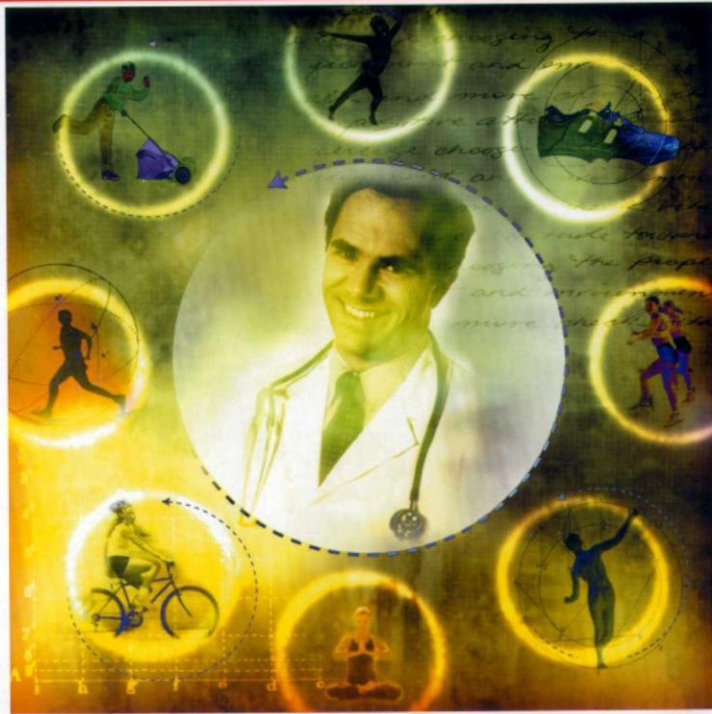
Illness • Diabetes Mellitus • Asthma • Obesity • Stroke • Hypertension

Original Research: Direct Medical Costs Higher for Inactive People

A Publication of The McGraw-Hill Companies

[www.physsportsmed.com](http://www.physsportsmed.com)

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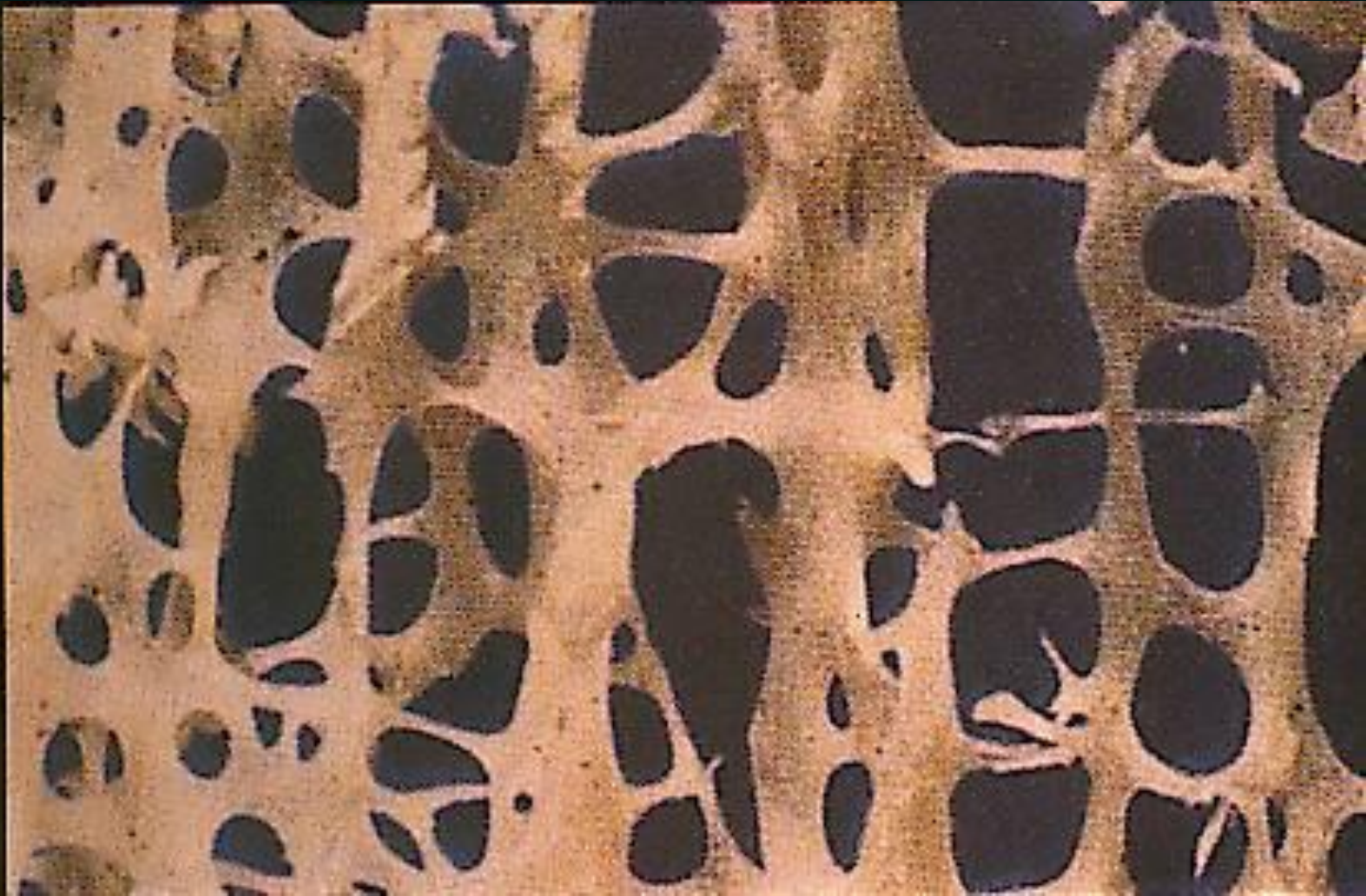
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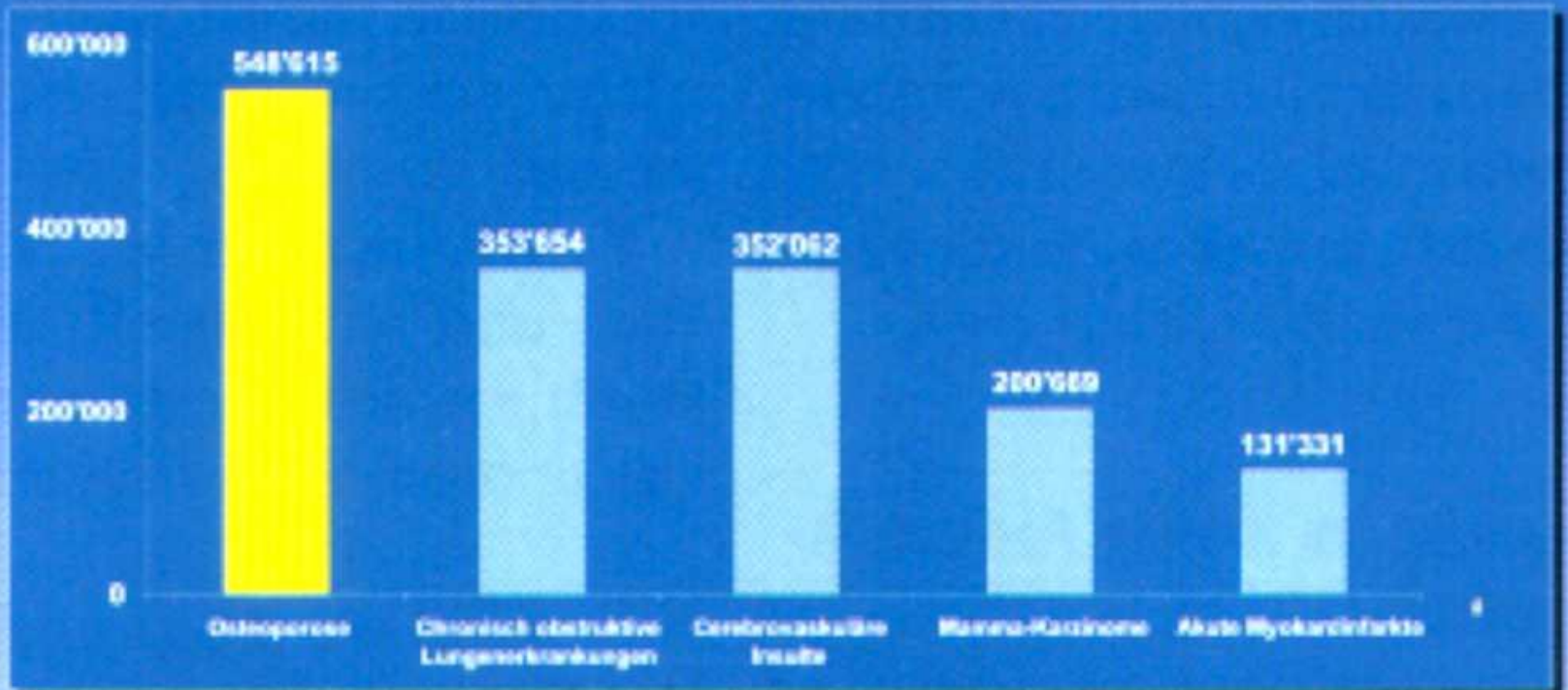






# Osteoporose ist teuer:

## Spitalbettentage in der Schweiz pro Jahr (Frauen)

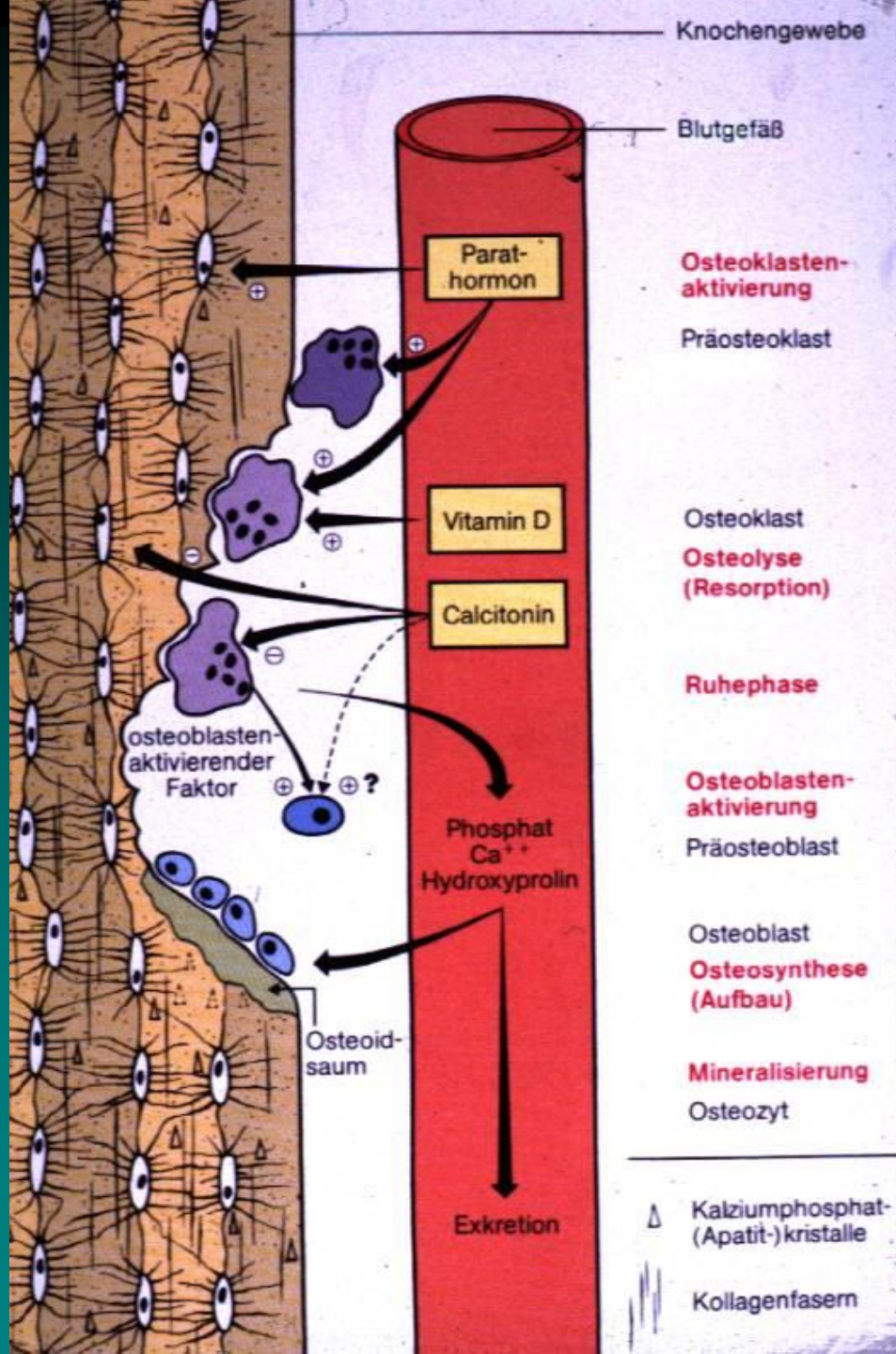


Die jährlich durch Osteoporose verursachten direkten Gesamtkosten in der Schweiz belaufen sich auf ca. 1.3 Milliarden Franken

LIPPUNER K. et al.: Incidence and Direct Medical Costs of Hospitalizations due to Osteoporotic Fractures in Switzerland: Osteoporosis Int 1997 (Basis: VESKA-Daten 1992)









Praxisklinik Rennbahn für Orthopädie und Sportmedizin, Muttenz

# EXERCICE PHYSIQUE ET OSTÉOPOROSE

PAR GÉRALD GREMION, PETER JENOURE, BERNHARD SEGESSER, URSUS LÜTHI

## Osteoporosis

The Role of Exercise in Optimal Management

Warren A. Katz, MD, with Carl Sherman

Series Editor: Nicholas A. DiNubile, MD

Photo: © 1998. Al Bello/ALLSPORT





Arno Balk, Ute Clade, Lahr

## Sporttherapie bei Osteoporose

# Ziel: Knochenabbau verlangsamen

Der sportmedizinische Hintergrund im Rahmen der medizinischen Trainingstherapie (MTT) bei Osteoporosepatienten liegt vor allem in der Reduktion des schnellen Fortschreitens der Osteoporose. Durch Zug der Sehnen an den knöchernen Strukturen wird der

Bei der medizinischen Trainingstherapie (MTT), auch medizinisches Aufbautraining (MAT) bzw. erweiterte ambulante Physiotherapie (EAP) genannt, wird die Dosierung der Belastungsintensität, die Belastungsdichte und der Belastungsumfang vom gesamten behandelnden Team bestimmt und

## ORIGINALIA

W. Kemmler, H. Riedel

# Körperliche Belastung und Osteoporose

## Einfluß einer 10monatigen Interventionsmaßnahme auf ossäre und extraossäre Risikofaktoren einer Osteoporose

### The influence of a 10 month training program on risk factors in osteoporosis

Institut für Medizinische Physik Erlangen

Bewegungsprogramme, zu einer sehr positiven Beeinflussung ossärer und extraossärer Risikofaktoren sowie zu einer Erhöhung der Lebensqualität.

### Summary

We investigated the effect of a 10-month training program concerning strength, endurance, and coordination exercises, on multiple risk factors (i.e. risk factors associated with bone-strength, risk factors associated with falls) of osteoporosis and aspects (pain, wellness) of quality of life. 108 women ( $56 \pm 9$  years) with different degrees of osteoporosis and without special medication affecting bone metabolism took part in our investigation. According to the physical fitness and the degree of osteoporosis of our participants we





# Sport et arthrose

**G. Gremion**  
**A. Chantraine**

Hôpital cantonal universitaire Genève

*Résumé:* Les charges supportées par les articulations pendant les tâches professionnelles ont considérablement diminué au cours des dernières années.

C'est volontairement dans un but ludique que hommes et femmes sollicitent

*Summary:* Recent changes in lifestyle have considerably reduced the loads that joints have to bear through occupational stresses.

It is now essentially during leisure time that most people use somewhat intensely

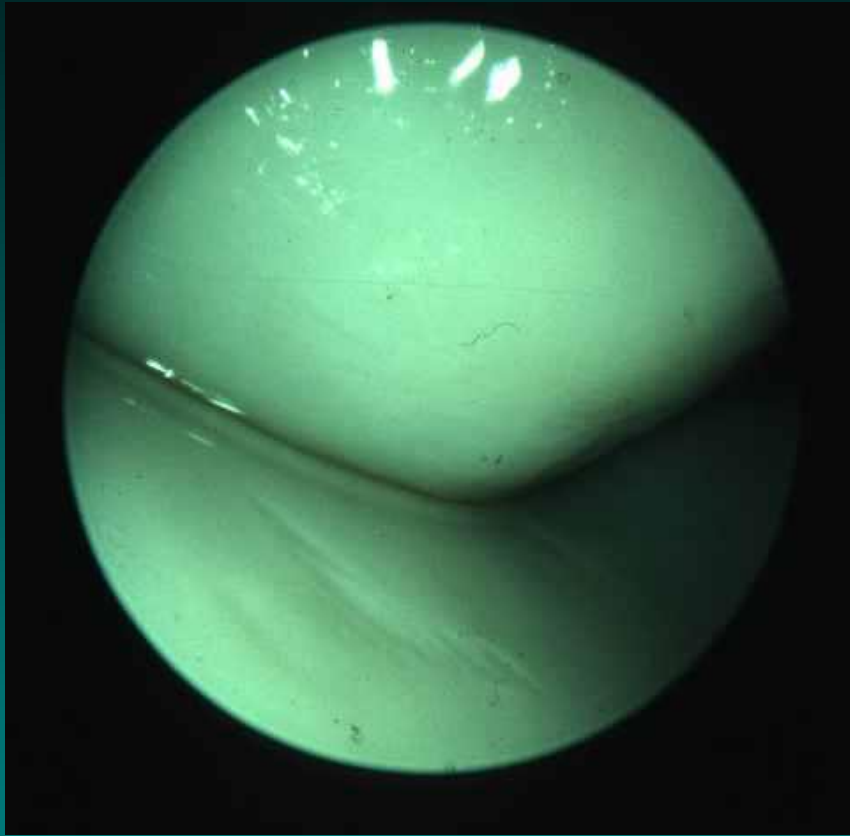
*Zusammenfassung:* Während der letzten Jahre haben die Belastungen, welchen die Gelenke berufsmässig ausgesetzt sind, beträchtlich abgenommen. Heute fordern die Leute ihren Bewegungsapparat meistens gewollt mit spielerischer Ab-







# Knorpel







# *Sport for Health: How much?*

## *Recommendations of the American College of Sports Medicine (1993)*

*Frequency: 3-5 x / week*

*Intensity: 60-90% HR max or  
50-85% VO2 max*

*Duration: 20-60 minutes*

*aerobic / big muscle group /*



# ***Aging: The Benefits of Exercise***

***If exercise could be packed into a pill, it would be the single most widely prescribed and beneficial medicine in the nation.***

***Robert N. Butler, M.D.***

***Director National Institute of Aging***







