People with chronic medical conditions have special needs in regard to physical activity. Such people should consult with their general practitioner (GP) before they change their levels of physical activity. This would ensure the type of activity chosen:

- is safe
- can be of the most benefit to the person.

After consulting with their GP, a physical activity program may have to be developed by a physiotherapist or the person may need to attend a special group tailored to people with their condition.

**Falls**

Falls are caused by a combination of many factors, including decreased balance and decreased strength. Performing appropriate physical activity can help to prevent falls.

Special physical activity programs are available for people who fall, such as the NoFalls Program and balance classes.

People with a problem with falls or near falls may need to be reviewed at a Falls and Mobility Clinic. These are special outpatient services in hospitals, which have a geriatrician, physiotherapist, occupational therapist and other health professionals assessing people and developing a treatment plan to reduce future risk of falls.

See falls prevention resources listed under Physical Activity Resources in Section 6 ‘Nutrition, Physical Activity and General Resources’ in this Resource Kit. In the resource *Standing on your own two feet* (Australian Pensioners and Superannuants’ Federation, 1999), older people talk about how to prevent falls. This resource is available in a range of languages other than English.

**Arthritis**

Arthritis affects a person’s joints. There are two main types of arthritis: osteoarthritis and rheumatoid arthritis. The two conditions present differently and are managed quite differently. Physical activity can help people with arthritis by strengthening the muscles to protect joints, decreasing pain, and preventing joints from becoming stiff.

Activities such as walking, water exercise, strength training, tai chi and dancing are often appropriate for people with arthritis. However, there is evidence that vigorous and prolonged activity can aggravate arthritis. People with arthritis need to be careful performing physical activity when they have pain and should avoid exercise of very painful inflamed joints, unless it is under a GP’s or physiotherapist’s strict supervision.

Diet can assist in managing some types of arthritis, for example, weight control to reduce pressure on weight-bearing joints. Foods containing Omega-3 fats have some benefits through their anti-inflammatory effect in the body. Seek further advice from a dietitian.
Diabetes mellitus

People with diabetes mellitus require special medical attention and diet to ensure blood glucose levels are controlled and reduce their risk of longer term complications.

Physical activity can help improve the control of blood glucose for some people with diabetes mellitus. In particular, endurance exercise and strengthening exercises can be of benefit.

People with diabetes who are taking tablets or insulin for their condition have an increased risk of a hypoglycaemic reaction ('hypo') if undertaking unplanned or more than the usual amount of exercise.

To ensure that the risk is minimised, obtain the latest information on preventing and managing hypoglycaemic reactions. The following steps will assist in this.

- Ask your local diabetes educator or dietitian for information and/or training on how to prevent people from experiencing 'hypos' and how to recognise and treat a ‘hypo’ if it occurs.
- Ask the person with diabetes mellitus what education they have had on what to do in the event of a hypoglycaemic reaction or 'hypo'.
- Ask the person if they aware of the types of symptoms they may have as warning signs.
- Access further important information from the following organisations:
  - International Diabetes Institute: www.diabetes.com.au or 03 9258 5050
  - Diabetes Australia: www.diabetesaustralia.com.au or 1300 136 588

Osteoporosis

Osteoporosis is where the bones become more brittle and there is an increased chance of fracture. Physical activity, especially resistance training type exercise combined with good nutrition, with particular attention to adequate calcium intake and access to direct sunlight, important for Vitamin D, can help to prevent risk of fractures (Refer to Help sheet 5.6 Nutrition resource manual, and Help sheet 4 in this Resource Kit).

Being physically active is also important for people with osteoporosis. The focus of the physical activity program should be the prevention of falls and fractures and the maintenance of overall health.

For more information on osteoporosis, contact the Osteoporosis Foundation on www.osteoporosis.org.au or 8531 8099.
Cardiac and lung (pulmonary) conditions

There are many different types of heart, circulatory and lung conditions. Physical activity can have a positive or negative effect on the person’s health depending on the condition. Therefore, when a person has a cardiac condition and lung condition, medical advice should always be sought before they change their physical activity levels.

Cardiac rehabilitation groups and pulmonary rehabilitation groups are available for people who have cardiac and lung conditions that can be improved by physical activity. GPs and health professionals usually make these referrals.

References


The Osteoporosis Foundation: [www.osteoporosis.org.au](http://www.osteoporosis.org.au)