

Disabilities strike the middle-aged: Sedentary lifestyle, obesity among major reasons

June 4 2010, By Cynthia Billhartz Gregorian

Lucille Morris was in her mid-50s when she was diagnosed with Type 2 diabetes. Not long after, she began experiencing pain and numbness in her feet from neuropathy. Walking felt painful and wobbly.

"Sometimes my feet feel like they're frozen and are so stiff they don't want to move," said Morris, 64, of Ballwin, Mo. "When I walk on uneven surfaces, like in the grass, I don't feel like I'm in control of my balance."

Twenty-five years ago, a hobbled woman in her 50s would have seemed unusual. Not anymore. [Health care providers](#) report an increase in the number of patients under age 64 suffering from disabilities in the past decade or so.

"The people I'm seeing are aging more quickly than the people I used to see, and for what seems appropriate," said Dr. F. David Schneider, chair of family and community medicine at St. Louis University.

Studies show similar findings on a national level. Researchers at the University of Michigan and the RAND Corp. analyzed information from the 1997 to 2007 National Health Interview Survey and found that more than 40 percent of people ages 50 to 64 reported having difficulty doing one of nine physical functions, such as stooping, standing for two hours, walking a quarter mile or climbing 10 steps without resting. The health problems most often cited included neck and back problems, arthritis, diabetes, anxiety and [emotional problems](#).

Researchers noted that the 40 percent figure was in contrast with the older group, age 65 and older, who reported a decrease in disabilities during that same period.

The study, published in the April edition of the journal "Health Affairs," also found that some middle-aged respondents -- less than 2 percent, but growing -- need help with personal care activities. Those include getting out of bed, using the toilet and shopping for groceries.

The national study didn't pinpoint a root cause of the increase in disabilities among middle-aged people, but local [health care](#) providers list these as the biggest reasons: obesity, sedentary lifestyles and lack of preventive medical care.

"I don't think people are taking time for themselves to be focused on healthy behaviors," said Carolyn Baum, director of occupational therapy at Washington University.

And it's more complex than just handing people a sheet of paper with instructions on how to eat and exercise.

"We need to address how people plan their daily lives, how they educate their family members to help them do what they need to do," Baum said.

MOVE YOUR BODY

While the increase in disabilities among middle-aged people mirrors the rise in obesity rates, experts stress that those of normal weight do not have a free pass to sit and do nothing.

"One thing that creates disability is not using your body," Schneider said. "People who exercise and move and do things physically are less apt to be disabled."

Technology, he said, is a big culprit in promoting inactivity. There was a time, he added, when people got up and walked down the hall to talk to co-workers. Now they send e-mails or instant messages.

Inactivity and poor nutrition lead to cardiovascular disease and diabetes, which can lead to a host of problems that make moving about difficult.

As we age, people of all body types are also subject to deterioration of cartilage in joints and the loss of bone density and muscle mass.

Sherry Muir, assistant professor of occupational therapy at St. Louis University, said Johns Hopkins Arthritis Center found that losing 11 pounds decreased the risk of osteoarthritis in the knees by 50 percent.

"We talk so much about obesity, but we forget that even a 10- to 15-pound weight gain causes significant problems in the hips and knees," Muir said. "And our mobility relies primarily on our hips, knees and back."

Plus, she said, the cartilage in the joints between our bones is kept alive and healthy by the fluid that surrounds it. Exercise helps keep the fluid around the cartilage clean.

"It's like a sponge," Muir said. "When you move, you squish the sponge and push out all the waste product and then the joint sucks in all the healthy stuff."

She blames clothes dryers for decreasing the range of motion in people's shoulders: "Washing those clothes on a wash board, squeezing then hanging them kept our joints healthy. I believe some damage happens to our cartilage just by not moving."

IT'S NEVER TOO LATE

Lucille Morris knows she's obese. It didn't seem like a big deal until she was diagnosed with diabetes and then neuropathy. Suddenly, walking became painful and scary.

"People tell you to exercise, but they don't tell you what's good for neuropathy," she said.

Several weeks ago, she learned about a study at Washington University that's looking at whether people with diabetes and peripheral neuropathy can increase their activity and leg strength without increasing their foot problems.

Morris signed up.

She spent one morning stretching, doing balance and strength exercises, then walking on a treadmill.

Afterward, she reported feeling more energized and stable. She was even able to traverse a cemetery without worrying that she might stumble and fall.

"I didn't even think about the fact that I did that until I got home," she said.

Dr. Michael Mueller, associate director of the Movement Science Program at Washington University and lead researcher on the study, said it's never too late to make lifestyle improvements. Anyone, with or without disabilities, will see health benefits.

"Any exercise program takes six to 12 weeks before you start to see the effect, although some people report that after just a couple of weeks they feel better and have various improvements," he said.

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