

Keeping active pays off in your 70s and 80s

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New research from Bath, Bristol and UWE-Bristol finds that older people who undertake at least 25 minutes of moderate or vigorous exercise everyday need fewer prescriptions and are less likely to be admitted to hospital in an emergency.

(Medical Xpress)—Older people who undertake at least 25 minutes of moderate or vigorous exercise everyday need fewer prescriptions and are less likely to be admitted to hospital in an emergency, new research has revealed.

The findings, published in the journal *PLoS ONE*, reinforce the need for exercise programmes to help <u>older people</u> stay active. It could also reduce reliance on NHS services and potentially lead to <u>cost savings</u>.

In the first study of its kind looking at this age group, researchers from the Universities of Bath, Bristol and UWE-Bristol looked at data from 213 people whose average age was 78.



Of people studied, those who carried out more than 25 minutes of moderate to <u>vigorous physical activity</u> per day – such as walking quickly, cycling or swimming -received 50 per cent fewer prescriptions than those who were more active over a four to five year period.

Such physical activity leads to a higher metabolism and better circulation, reducing the risk of conditions and diseases common in older age such as <u>high blood pressure</u>, type 2 diabetes, <u>coronary heart disease</u> and strokes.

The study found that very little exercise carried a higher risk of unplanned hospital admissions. Those who carried out just three minutes of moderate to vigorous physical activity were twice as likely to face hospital admissions when compared to those who averaged 39 minutes.

These results remained significant even when other factors affecting health were taken into account, such as socio-economic status, education, weight, existing disease and level of physical function.

Researchers measured physical activity using accelerometers – small gadgets that monitor all movement throughout the day – alongside elements of physical function including balance, leg strength and walking gait.

Medical records were then examined to investigate health service usage over the next four years. This captured visits to GPs and walk-in appointments, hospital visits, unplanned admissions to hospital and the number of <u>prescriptions</u> needed.

Professor Ken Fox, from Bristol University's Centre for Exercise, Nutrition and Health Studies who led the study said: "Until now, very little has been known about the value of physical activity in later life, particularly when people are in their 70s and 80s. This research



underlines that keeping older people active brings a whole range of health benefits, as well as reducing reliance on the NHS and potentially leading to major cost savings."

Dr Afroditi Stathi, co-author from our Department for Health added: "We need to identify innovative ways to support older adults to increase their daily activity. This study suggests that the investment in well-designed and delivered community programmes now could pay significant dividends in healthcare costs and quality of life of older people in the future."

The results support the recent recommendations from NICE that all GPs should encourage <u>physical activity</u> in their older patients.

Exercise should be targeted and tailored to those in their 70s and 80s, aiming to increase muscle strength, balance, coordination and aerobic fitness to prevent falls.

Dr Bethany Simmonds, lead author from Bristol University's Centre for Exercise, Nutrition and Health Studies said: "We know that leading a physically active life has health benefits for all ages, but this study suggests there may also be economic benefits by reducing reliance on medication and preventing costly emergency <u>hospital admissions</u>."

More information: Simmonds B, Fox K, Davis M, Ku P-W, Gray S, et al. (2014) "Objectively Assessed Physical Activity and Subsequent Health Service Use of UK Adults Aged 70 and Over: A Four to Five Year Follow Up Study." *PLoS ONE* 9(5): e97676. DOI: 10.1371/journal.pone.0097676

Provided by University of Bath



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