HOW TO SELECT AN EXERCISE PROGRAM

The Michigan Parkinson Foundation’s Professional Advisory Board and Board of Directors approved a Position Paper on the importance of exercise in the management of PD. Brian Cooper, OTR (Residential Home Health), Member of MPF’s Professional Advisory Board wrote the following description of appropriate exercises:

There are three main types of exercise to consider with Parkinson’s: aerobic conditioning or cardiovascular exercise, strength or resistance training, and stretching or flexibility exercises.

An exercise program consisting of cardiovascular activities, stretching, strengthening, walking and balance training resulted in significant improvements in daily function and quality of life related to mobility and maintaining independence with activities of daily living.

**Aerobic or Cardiovascular Conditioning:**
Examples of aerobic or cardiovascular exercise include: walking (using trekking sticks), cycling, swimming, boxing, dancing, rowing, stair stepper or use of an elliptical machine.

**Strength Training or Resistance Training:**
Examples of strength or resistance training include: lifting weights, completing exercises using body weight including squats, push-ups and lunges. When lifting weights, it is important to keep in mind that light weight can be more effective than using a heavy weight that could result in injury. Often 2-5lbs when used appropriately can be effective as well as using resistance bands.

**Stretching:**
Stretching programs should focus on postural deficits, improving trunk and head extension, pectoralis stretching to address rounded shoulders and improve lung functioning, hamstring stretches, and finger extension exercises. Activities incorporating stretching include yoga, pilates, and exercise programs geared toward fall prevention.

**Fall Prevention/Balance Exercises:**
There are many types of exercise programs that are geared toward fall prevention. One resource for fall prevention exercises are Sit and be Fit classes that can often be found on PBS. There are many books that are also dedicated to this subject. One comprehensive book is: *How to Prevent Falls: Better Balance, Independence and Energy in 6 Simple Steps* by Betty Perkins-Carpenter.

**How to Get Involved With Exercises:**
Group or community based exercise programs, local gyms or YMCA, Senior center, contact a Physical or Occupational Therapist that specializes in neurological rehab, or has a strong background in working with Parkinson’s patient’s that can assist you in developing an exercise program that is safe and suitable to address your needs.

Get an exercise partner from a support group so that you can encourage one another to stay committed to an exercise program. Research has found that people are more inclined to adhere to their program and also enhances motivation.


**Intensity:**
As we are finding out, intensity is a valuable component of exercise. Movement only becomes exercise when it is done several times per week at an intensity that is high enough to be physically challenging. In other words, it may be necessary to break a sweat. Because Parkinson’s is a disease of slowed movement, exercising at a slow rate may not provide the best results. Research shows that it is not the exercise, but the intensity which is most beneficial. This is where a therapist or an exercise partner may be beneficial to assist you in calibrating yourself to maintain a high intensity with your exercise.

**Determining an exercise program that is appropriate for you:** It is important to take into consideration your physical capabilities when completing exercises. Often, it is necessary to start an exercise program in sitting due to balance deficits that can increase your risk for falls, as you progress, the exercises can be graded to be completed in standing.