Risk Assessment of Elderly Exercise in Chengde

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ABSRTACT. On the basis of combing domestic and foreign research, this study uses the literature data method, logical analysis method, participatory observation method, and in-depth interview method for 175 elderly people who often participate in physical exercise in Chengde City. Analyze the risks and their coping styles when encountering risks, use case study methods to observe their risk coping behaviors during physical exercise, use qualitative methods to analyze and explain, and explore the concept of risk coping with elderly physical exercise in Chengde City, The characteristics and processes are aimed at providing risk coping strategies for the elderly in physical exercise in the future, providing scientific guidance for the elderly in coping with physical exercise, in order to improve the quality of life of the elderly, and better promote the realization of the goal of the national fitness program in China.

KEYWORDS: Elderly, Exercise risk, Assessment

1. Introduction

In modern society, science and technology continue to develop and develop, and people 's desire to have a healthy body is becoming more and more urgent. Physical exercise is a physical exercise method. Physical exercise can promote the prevention and relief of its own diseases. The gradual improvement of the production level, the gradual improvement of people's living standards, the gradual improvement of the quality of life, and the affluence in material life are becoming more and more prosperous. There are advantages and disadvantages to these changes, which has led to many bad habits. The elderly's physical immunity is gradually declining and physical functions are gradually aging and declining. More and more chronic diseases and sudden illnesses often occur in the elderly, such as hypertension, hyperlipidemia, hyperglycemia, diabetes, heart disease. , Cancer, etc., leading to the physical condition of the elderly is getting worse and worse. The underlying factors such as dysfunction and sequelae caused by diseases have long existed. This uncertainty has brought a lot of inconvenience to the elderly. Many chronic diseases occur in the elderly, and the elderly are easily injured when they exercise alone. In

order to effectively reduce the injuries caused by these factors for the elderly, this study takes the elderly in Chengde as the research object, and Carry out health screening, correctly layer and evaluate risks, increase insurance coefficients for their exercise safety, ensure that injuries caused by other factors are correctly avoided during exercise, and develop sports exercises for the elderly in Chengde on a reasonable basis Planning and planning guidance.

2. The Status Quo of the Elderly in Chengde

2.1 Participation of the Elderly in Chengde

Chengde has a long history of culture. The campus sports in the university have a great impact on the elderly in Chengde. Most of the older exercisers have received high-energy education, or they like to exercise and become a hobby. According to the interview survey, it is concluded that the exercise time of most elderly people is more than 2-3 times a week, and each exercise time will be more than half an hour, which is mainly based on personal lifestyle, living habits and physical exercise. As determined by attitude, physical exercise is allowed within the scope of personal time. The senior citizens in Cheng de usually have a very positive attitude and thought about participating in sports.

2.2 Situation of Places for Senior Citizens in Chengde

Because of sports venues, the elderly in Chengde City lack a lot of places to exercise, there is no suitable sports field, so most of the places to exercise are in open parks, broad communities, squares and other places Places, most of these places have good greening, high air freshness index, and are more suitable for older people's sports than other places. Most of the elderly like to exercise together. They can communicate with each other and exercise their bodies. This exercise can make exercise more orderly, which is conducive to communication and communication. Exercise together can promote each other's enthusiasm and develop More and more hobbies make sports less boring and more fun. However, the public facilities available to the elderly in Chengde are still too few and insufficient, the exercise seems too monotonous, the exercise is not rich enough, and there are still too few places to move. Simple exercise does not have a real exercise effect.

2.3 Participation of Elderly People in Chengde

According to the research, the elderly in Chengde City have a wide range of hobbies, and there are many fitness sports projects, such as fitness dancing, walking, jogging, etc. These are more popular among the elderly. Most of these projects have small intensity coefficients and technical requirements It is not very high, most of the required fields are unrestricted, easy to carry out, and have great benefits to physical health. However, some physical exercise programs do not have clear and

reasonable guidance, and many times there are no suitable sports fields. Most sports are not It is suitable for the elderly to exercise and is not good for the health of the elderly. Some elderly people are also unclear about sports knowledge and common sense. They cannot exercise effectively when choosing and performing sports exercises. They cannot reasonably judge their own specific conditions and do not combine their physical conditions and health. Participate in sports activities suitable for you. Although sports are good for your health and can delay aging, if you do not choose the sports that are suitable for you.

2.4 The Purpose of Chengde Senior Citizens' Participation in Sports

Part of the senior citizens in Chengde participate in physical exercise because of their own interests and hobbies, some are to please their mood and relax, some are to adjust their own mood and relax, and some are to be able to maintain physical health and enhance physical fitness, so as to achieve effective The effect of preventing diseases, but some elderly people take exercise as a stress or burden. However, this situation is not completely absolute. Some elderly people still do their own hobbies to achieve the purpose of exercising, reduce the incidence of diseases, and promote physical health.

2.5 The Ways for Seniors in Chengde to Participate in Exercise

According to the survey, only a few elderly people in Chengde City do not like group sports, but most elderly people like to exercise together. The reason is that with the development of society, competition is becoming more and more intense, and many elderly people are forgotten by their children. When you feel uncomfortable with the rhythm of life, you will also feel bored. At this time, the elderly will like to go to some more lively places to relax and chat with other elderly people. They can exercise and relax during exercise. Can learn from each other in the same sports venue at the same activity location, achieve ideological unity and consensus, and understand each other in communication, the elderly together can create a unique atmosphere, enrich their daily life, have Conducive to their physical and mental health, this has great benefits, so collective projects are more popular among older people.

3. Health Screening for Senior Citizens in Chengde Before Exercising

3.1 Contents of Health Screening

People can benefit a lot from exercise, but exercise also has risks. In order to ensure that exercise is safe, what aspects of health screening should be performed before exercise? You can learn from the following aspects.

3.1.1 History

Current medical history, mainly including cardiovascular disease, metabolic disease (especially glucose metabolism disorder), respiratory symptoms, especially recurrent wheezing, chest tightness, cerebrovascular disease, bone and joint disease, Six aspects of malignant tumors. Known cardiovascular, pulmonary, and metabolic diseases include the following: cardiovascular disease; lung disease; metabolic disease. Past medical history is used as a reference. Family history: presence or absence of genetic disease.

3.1.2 Possible Main Symptoms or Signs of Cardiovascular, Pulmonary and Metabolic Diseases

Mainly include: with or without chest pain; with or without rest or shortness of breath during proper exercise; with or without dizziness or syncope; with or without sitting or paroxysmal dyspnea at night; with or without ankle swelling and pain; with or without palpitation or tachycardia With or without intermittent claudication; with or without cardiac murmur.

3.1.3 Medication

Is the medicine being taken a medicine that can affect the pulse and blood pressure? Lifestyle habits, in order to exercise scientifically and reasonably, to understand the testers' living conditions 1 to 2 days before the exercise test, whether they stay up late, get tired, get drunk the night before, and work overtime for a long time.

3.1.4 Physical Activity

Reasonable and planned physical activity can promote people's physical and mental pleasure, maintain a good mood and full mental state, and can attract more people to participate in sports. Exercise can bring health to people, but it also brings harm to some people. Without a reasonable exercise plan, it is dangerous, so you must understand your physical condition before performing physical activities, or you can ask for advice like professionals.

3.1.5 Cardiovascular Risk Factors

Harmful factors were age, family history, smoking history, blood glucose abnormalities, dyslipidemia, hypertension, obesity, and sitting still. The positive factors are high-density lipoprotein and active fitness activities.

3.2 Risk Assessment

In most cases, doing what you can do is safe. However, there are certain risks for special situations or groups. In addition to possible sports injuries during exercise, it may also cause a greater accidental risk to individuals.

Of course, you don't need to weigh the ratio between the benefits and the risks of

sports. Risks only occur in special situations and people. As long as we correctly evaluate the risks in sports, our sports are safe. To ensure the rationality and reliability of exercise, athletes are classified into three danger categories: low-risk, medium-risk, and high-risk based on appropriate recommendations provided by medical examinations, physical activity / sports, exercise testing, and physician guidance. Generally, the process by which we classify individuals into these danger categories is called risk stratification. The basis of risk stratification is whether there are known cardiovascular, pulmonary, and / or metabolic diseases; whether there are symptoms and signs of cardiovascular, pulmonary, and / or metabolic diseases; and whether there are risk factors for cardiovascular disease. A questionnaire on basic information and physical activity preparation was conducted on 175 elderly people in Chengde.

3.2.1 Low Risk

According to the questionnaire survey, the total number of low-risk people accounted for 80 people, accounting for 46% of the total number. Individuals in the low-risk group did not have symptoms / signs of cardiovascular, pulmonary, and / or metabolic diseases or diagnosed diseases, and not many Risk factors for cardiovascular disease. Most elderly people suffer from one of the symptoms of hypertension, hyperlipidemia, and hyperglycemia. The risk of acute cardiovascular events in this population is very low. Physical activity / exercise can be performed without the necessary medical examination and permission Under safe circumstances.

3.2.2 Medium Risk

According to the questionnaire survey, the middle-risk group accounted for 17 people, accounting for 10% of the total number. Individuals in the middle-risk group did not have symptoms / signs of cardiovascular, pulmonary, and / or metabolic diseases or diagnosed diseases but had 2 Risk factors for one or more cardiovascular diseases. Most elderly people have two or more symptoms of hypertension, hyperlipidemia, and hyperglycemia. The risk of acute cardiovascular events in this population is increased. However, most people at intermediate risk can be treated without medical examination And permit safe participation in low to moderate intensity physical activity. However, before participating in more intense exercise, medical examinations and exercise tests are necessary.

3.2.3 High Risk

According to the questionnaire survey, the total number of high-risk people accounted for 78 people, accounting for 45% of the total number. Individuals in the high-risk group had one or more symptoms / signs of cardiovascular, pulmonary, and / or metabolic diseases or diagnosed diseases. Some elderly people have heart disease or can only participate in physical activities recommended by a doctor. Some elderly people experience chest pain or severe belching during physical exercise, and they also fall or lose consciousness due to dizziness. Activity or exercise

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aggravates bone or joint pain or dysfunction. The risk of acute cardiovascular events in this population has increased to a high level and a comprehensive medical examination and permission should be obtained before participating in any intensity physical activity or exercise.

4. Conclusion

By performing health screening before exercise, the elderly in Chengde must choose the appropriate fitness path and fitness method based on their health and physical characteristics. To be aware of the need for scientific fitness, it is best to exercise on the advice of a physician or professional to reduce possible risks and scientific fitness.

References

- [1] Nelson M E, Rejeski W J, Blair S N,et al. Physical Activity and Public Health in Older Adults: Recommendation From the American College of Sports Medicine and the American Heart Association[J]. Circulation, 2007, 116(9): 1094-1105.
- [2] HEWETT TE, LINDENFELD TN, RICCOBENE JV,et al. The effect of neuromuscular training on the incidence of knee injury in female athletes a prospective study[J]. Am J Sport Med, 1999, 27(6):699-706.
- [3] CANTU R C,VOY R. 2nd-impact syndrome-a risk in any contact sport[J]. Phys Sports Med, 1995, 23(6):27-34.