[IMAGE]

Fight Disease Naturally With the Power of Exercise

By Editorial Staff

Looking for a single health pursuit that can defend against a multitude of diseases – even if you're suffering from one? Embrace the power of exercise. Research supports exercise as a natural prescription for a wide range of health conditions, and its value goes far beyond prevention.

In fact, a recent study evaluated the role of exercise as a treatment option for a whopping 26 major diseases classified into seven major categories: musculoskeletal system diseases, metabolic system diseases, cardio-cerebral vascular system diseases, nervous system diseases, respiratory system diseases, urinary system diseases, and cancers. For each disease within a particular category, researchers determined the impact of exercise on disease variables and whether particular exercises (vs. exercise in general) work best in that regard. Here are a few examples.

Note: For reference, abbreviations quoted in the study text below include: AE (aerobic exercise), HE (home-based exercise), HIIT (high-intensity interval training), RE (resistance exercise), CT (combined aerobic and resistance training) and ME (multi-modal exercise; in other words, various types of exercise).

- *Coronary Artery Disease*: "Exercise interventions for CAD included AE and HE. The most common forms of exercise included walking, cycling, jogging, and Tai Chi. Long-term, moderate-intensity walking exercise decreased the severity of sleep apnea in CAD patients. HIIT reduced the morbidity and mortality of CAD and prevented atherosclerosis. It had beneficial effects on heart function and quality of life in patients and did not increase the risk of cardiovascular diseases."
- <u>exercise Copyright â Stock Photo / Register Mark Stroke</u>: "Vigorous AE was also a method used to effectively improve the aerobic capacity of stroke patients with hemiplegia [symptoms affecting one side of the body]. In RE protocols, after long-term PRT combined with balance training, the patient's balance ability was improved in 3 months and the stroke patients' walking ability improved in 3–6 months. Low-intensity RE with balance training was beneficial for improvement in plasma lipids, glucose, and exercise capacity. Short-term respiratory muscle training combined with routine physical training improved lung function and exercise capacity. Long-term CT improved cognitive ability and reduced mild cognitive impairment in patients with stroke hemiplegia."

- *Parkinson's Disease*: "AE, RE, and ME had some positive effects on patients with PD. AE protocols included walking and the use of bicycles and treadmills. These forms of exercise were usually performed under moderate to high intensity for a long term. AE usually showed positive effects on patients' walking capacity, exercise function, velocity, and step length. AE also improved the executive ability of patients with cognitive impairment. Additionally, AE was used for early rehabilitation."
- *Alzheimer's Disease*: "AE improved the patients' daily activity ability and cognition ... Long-term balance exercise was also prescribed, and improved the patients' exercise capacity. Long-term ME significantly improved upper and lower body muscle strength and flexibility, agility and dynamic balance, as well as the endurance fitness, gait, and balance abilities of patients with AD. Long-term, customized HE decreased the risk of falling in the late stage of the disease and improved the executive function of community-dwelling older people with memory disorders."
- *Colon Cancer*: "Long-term, moderate-intensity AE reduced the visceral adipose tissue content, increased health-related fitness, and reduced the recurrence risk of colon cancer among patients with Stages I, II, and III disease. Long-term, moderate-intensity, high-dose AE improved the favorable prognosis of biomarkers and the multiple HRQoL [health-related quality-of-life] outcomes of patients with colon cancer. Long-term CT had a beneficial effect on reducing patient fatigue. Low- to moderate-intensity exercise shortened the length of postoperative hospital stays and improved bowel movement after colectomy."
- Osteoporosis: "[C]ommonly used forms of exercise for OP treatment include AE, RE, CT, and balance training. The AE and RE programs stimulated bone synthesis and decreased bone resorption in postmenopausal women with OP, but exercise while wearing a weighted vest was better for improving balance. Long-term Tai Chi exercise decreased the loss of bone mineral density and reduced the risk of fractures in the study population. Short-term submaximal AE provided significant improvements in static and dynamic balances in postmenopausal osteoporotic women. Long-term, low-intensity balance and strength training significantly improved the strength and balance capability of women with OP. Long-term resistance training and balance training had a direct impact on the habitual walking speed of elderly women with a history of OP. Supervised long-term, high-intensity CT increased bone mineral density and effectively prevented fractures in senior citizen populations."

These are just a few examples from this important study, published in the *Journal of Sport and Health Science*. It also covers the value of exercise for everything from low back pain to prostate and breast cancer, to depression and lung disease, to hip fractures and type 1 / type 2 diabetes, and more. Fortunately, the study available free of charge in its entirety by <u>clicking here</u>. Once you see how powerful exercise can be, make

sure to discuss which exercise approaches will work best for you – whether you're currently suffering from one of these 26 diseases ... or working hard on a daily basis to prevent getting any of them!

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