



#### Day Care Centres of Active Ageing and Effect on NCDs Dr.Prabha Adhikari Dr TMA Pai Endowment Chair in Geriatrics and Gerontology

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# Introduction



- Geriatric patients Chronic disease burden
- Psychosocial issues, economic
- Clog physicians clinic by frequent visits
- Physicians precious time wasted, cost
- Cannot concentrate on emergenciesand needy
- My own elders in the family



Thus was Born.....KMC Chaithanya2002 -14 members –in a room

- I.To provide day care for the sick elderly
- 2.To promote active ageing by exercise, yoga, healthy drink
- 3.To use their expertise for teaching
- 4.To create opportunities for new learning
- 5.To provided job opportunities for the needy elderly

6.To create opportunities for social service



#### Founder Members –2002





# **Types of Exercise Training**

- Mobility Exercises
- Resistance Training
- Aerobic Exercise
- Yoga
- Aerobic exercise using bicycle or treadmill
- Walking
- Dancing
- Brain exercises
- Kiegels Exercise

# Who could become members



- Any senior citizen healthy or sick
- Any body with chronic life style diseases
- Anybody who wants to age actively
- Membership fee of Rs500/life time
- Or Annual membership Rs 100

#### Activities other than exercises

- Other activities tried in the centre:
- 1.Computer learning
- 2.Teaching medical students local languages
- 3.Teaching children with learning disabilities
- 4.Painting pots, making greeting cards
- 5.Medicinal plant garden
- 6.Library of used magazines
- 7.Juice and tube feeding centre for patients
- 8.Fruit stall for patients
- 9.Shop for sale of items needed by patients and students

10. visit to various homes for the aged, centres for challenged children



# Other activities



- BP ,check monthly sugar test for diabetics
- Educative lectures
- Annual day, National days, Festivals
- Creativity
- Latest hobby-group walking

# Add on centres



- Centre for basic sciences
- 7 more centres added
- Needs of nearly 1200
  senior citizens

Exercise type varied



#### 8 centres-KMC Chaithanya Club -Spoorthi Hub



### 12 years of regular exercise



#### Effect of yoga-prevention of progression



### **Daily Exercise**



# Reversal of Diabetes and its complications



#### Reversal of Diabetes for 12 years





# Dancing



#### **Resistive Exercises**



## Walk



# Results -Effect on diabetes, hypertension, dylipidemia

- Prevention of progression for 12 years
- Reversal of diabetes-Aerobic exercise -4
- Reversal of complications -PVD,IHD,CCF -6
- Reduction in HbA1c
- Improvement in Heart rate variability
- Improved lipid goals, blood pressure goals
- Reduction in physician visits

### Benefits

- Effect of supervised integrated exercise on heart rate variability in type 2 diabetes mellitus.
- <u>Bhagyalakshmi S</u>, <u>Nagaraja H</u>, <u>Anupama B</u>, <u>Ramesh B</u>, <u>Prabha A</u>, <u>Niranjan</u>
  <u>M</u>, Shreedhara A- Kardiol Pol. 2007 Apr;65(4):363-8; discussion 369.
- Increase in the heart rate variability with deep breathing in diabetic patients after 12-month exercise training.
- Sridhar B, Haleagrahara N, Bhat R, Kulur AB, Avabratha

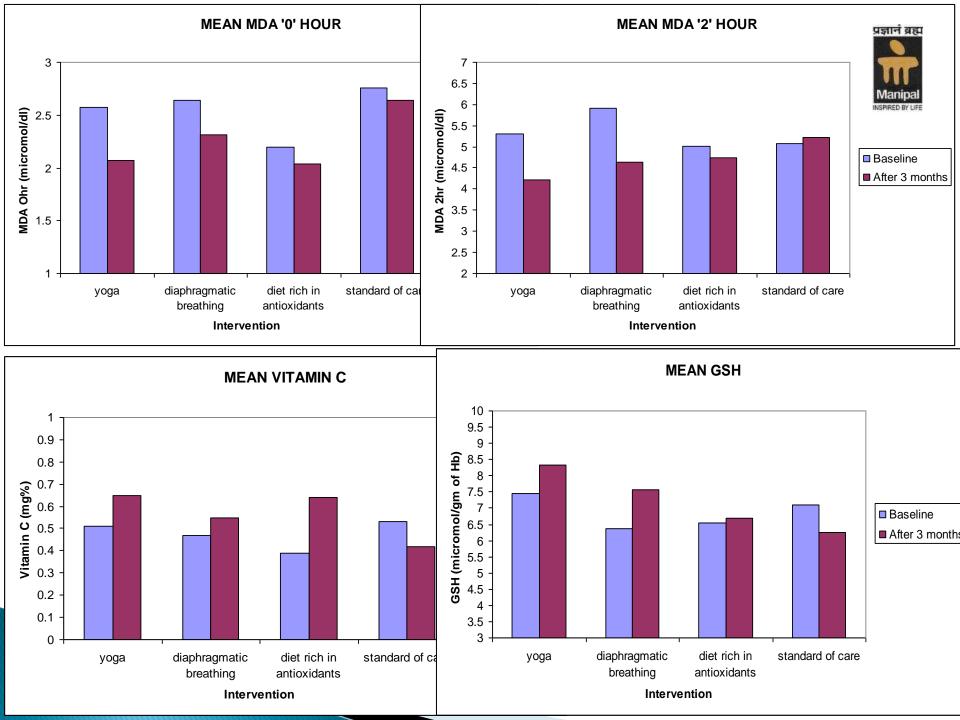
#### Effect of Stretching and Aerobic Exercise on Type II Diabetes(n48)

Parameters	Control(20)	Exercise(28)
FBG Baseline mmol	10.68 <u>+</u> .69	11.21 <u>+</u> 1.21
After 9 months	11.51 <u>+</u> 1.23**	9.52 <u>+</u> 1.02**
HbA1C baseline	8.64 <u>+</u> .64	8.58 <u>+</u> .42
HbA1C 9months	8.93 <u>+</u> .44*	7.18 <u>+</u> .25**
HRV(beats/min) Baseline	14.85 <u>+</u> 1.15	13.03 <u>+</u> .08
After	14.3 <u>+</u> 1.75*	16.5 <u>+</u> 1.11**

#### Effect of Yoga and supervised integrated exercise on Hypertension

- Effects of yoga and supervised integrated exercise on heart rate variability and blood pressure in hypertensive patients J.Chinese Med 2009
- Exercise improved both HRV and BP, Yoga did not improve both but prevented progression, combined interventions achieved both.
- Male hypertensives did better





# Table showing effect on NCDs/age related disorders by questionnaire

Morbidity	Number	Improved -N(%)
Diabetes	37	18(49%)
Hypertension	33	20(60%)
Dyslipidemia	43	15(30%)
Memory loss	16	7(43%)
Musculoskeletal	28	28(100%)
Depression	14	14(100%)
Imbalance	21	19(90%)
Anxiety	10	10(100%)
Insomnia	25	19(76%)
Constipation	21	19(90%)
Obesity	28	15(54%)

## Diabetes , BP , and Lipid targets

- Drug dosages decreased , number of drugs decreased in the member group
- Regular check up controls- drug dosages and number of drugs increased
- No difference in HbA1C, Lipid profile and Blood pressure control (7.54<u>+</u>.72 Vs 7.63<u>+</u>.81)

# Effect on fitness compared to walking controls

- Flexibility
- Balance
- Strength
- 6 minute walk test
- Reaction time
- Timed up and Go test
- All were equal in both groups but increased happiness and decreased loneliness

## Conclusions

- 1. Day care centres based on exercise and regular check up promotes active ageing
- 2. Improves diabetes ,prevents progression,
- 3. Reduces blood pressure
- 4. Reduces lipids
- 5. Decreases drug dosages
- 6. Improves muskuloskeletal symptoms
- 7. Addresses geriatric giants –Imbalance, Depression ,Memory and Incontinence
- This model of care can be replicated all over India to keep the elderly happy and healthy and is cost effective

#### Active Ageing Makes a difference





#### Arise Awake and Exercise......

# Stop not till goal is reached

