



# EXERCISE AND HEALTH – BODY MACHINICS

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PHYSIOTHERAPIST I ( CENTRE IN CHARGE )

TWGHs REHABILITATION CENTRE

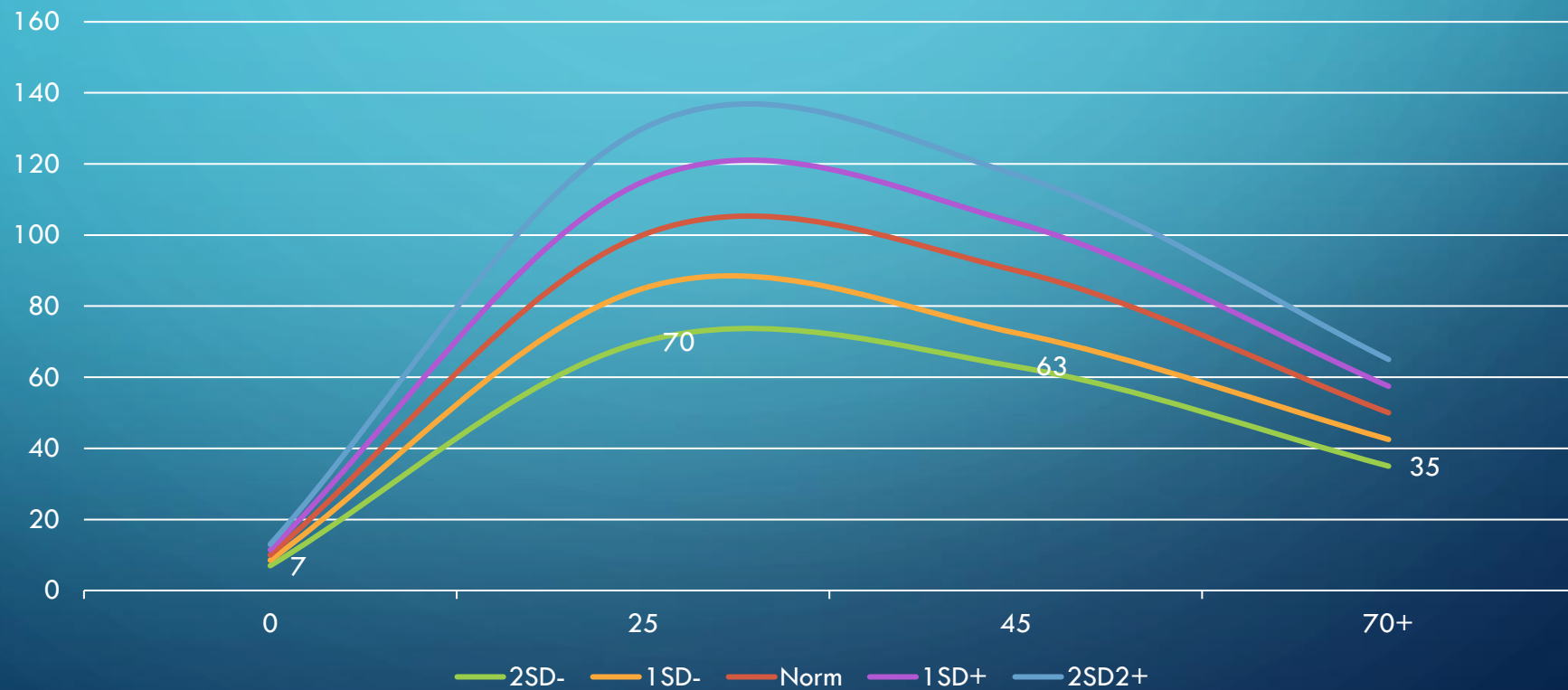
# PHYSICAL FITNESS TREND ON AGE

- Physical fitness VS age



# FACTORS AFFECT THE TREND

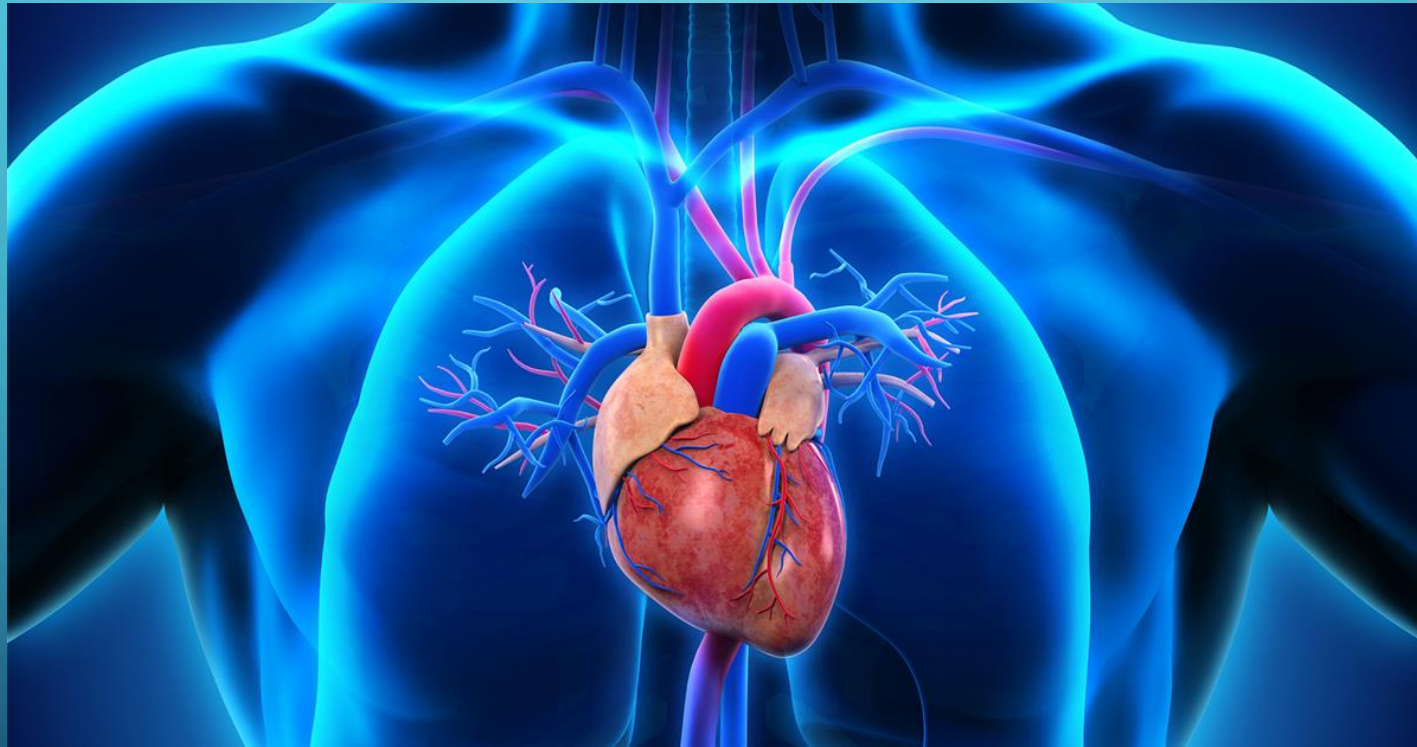
- PF Variation with different factors



# UNDERSTANDING FITNESS

- Cardiopulmonary Function
- Muscle strength
- Range of motion
- Balance and coordination
- Injury and recovery

# CARDIOPULMONARY







# RESTING HEART RATE (HR)

- Count number of the pulse in 15s
- Count after sitting 15min
- When you wake up on your bed



# SPO2

- Oximeter





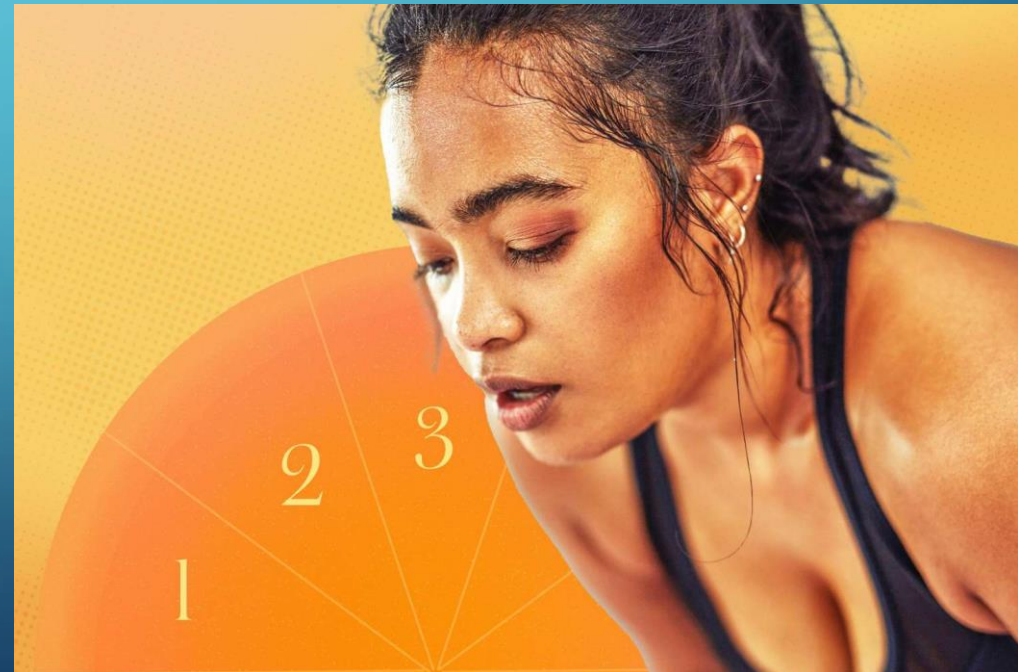
# MAXIMUM HEART RATE ( $HR^{MAX}$ )

- $= 220 - \text{age}$ 
  - E.g.  $HR^{MAX}$ 
    - 20 y.o. = 200/min
    - 30 y.o. = 190/min
    - 40 y.o. = 180/min
    - 50 y.o. = 170/min
    - 60 y.o. = 160/min
    - 70 y.o. = 150/min



# TRAINING INTENSITY

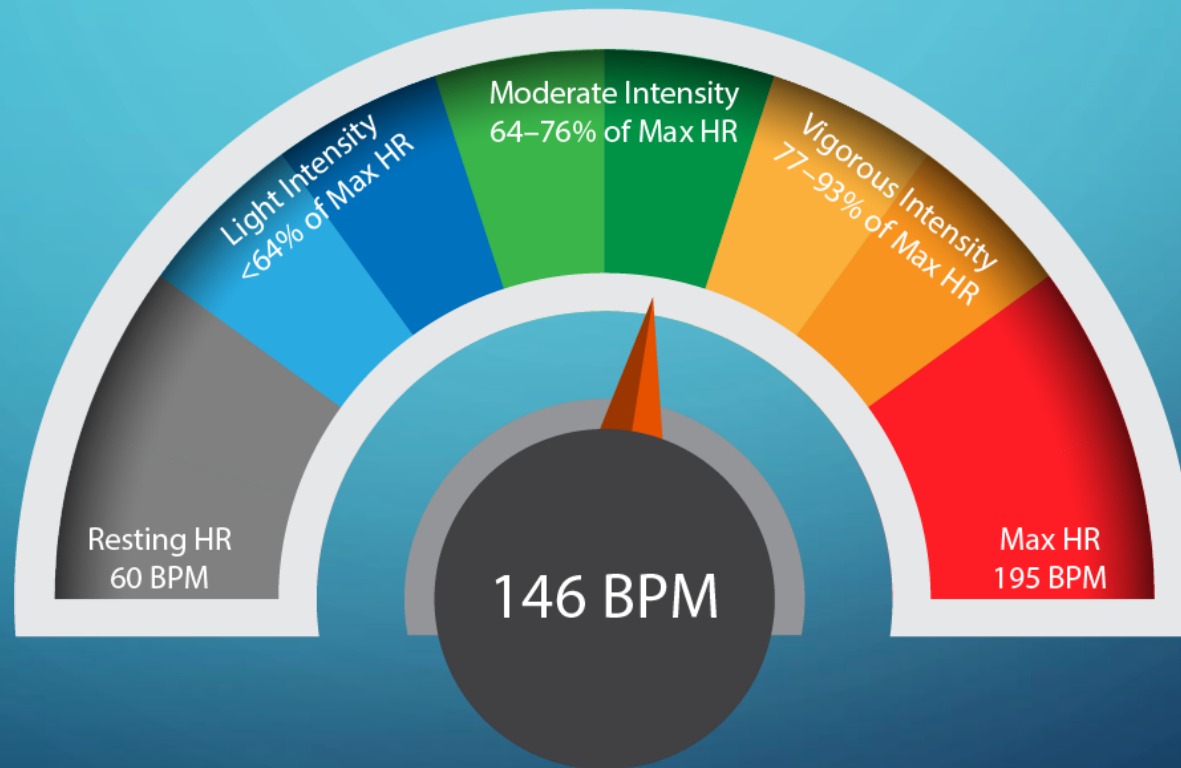
- Target HR
- Rate of Rate of perceived exertion



# TARGET HR

## Heart-Rate Zones

Max Heart Rate (HR) = 220 - Age



Example for 25-year-old:

Max HR = 220 - 25 = 195 beats per minute (BPM)

# RATE OF PERCEIVED EXERTION

RATE OF PERCEIVED EXERTION		
	<b>5</b> VIGOROUS	<ul style="list-style-type: none"><li>• Very Tired</li><li>• Cannot Go Any Further</li><li>• Soaking in Sweat</li><li>• Can't Talk</li><li>• Breathing Fast &amp; Heavy</li><li>• Heart Rate Above 180</li></ul>
	<b>4</b> MODERATE TO VIGOROUS	<ul style="list-style-type: none"><li>• Tired</li><li>• Sweating A Lot</li><li>• Talk is Broken</li><li>• Breathing Fast</li><li>• Heart Rate 160-180</li></ul>
	<b>3</b> MODERATE	<ul style="list-style-type: none"><li>• Getting Tired</li><li>• Sweating</li><li>• Talking is Getting Tougher</li><li>• Breathing a Little Fast</li><li>• Heart Rate 140-160</li></ul>
	<b>2</b> LOW	<ul style="list-style-type: none"><li>• A Little Tired</li><li>• Talking is Fine</li><li>• Getting Warm</li><li>• Breathing Increased Slightly</li><li>• Heart Rate 100-140</li></ul>
	<b>1</b> EASY	<ul style="list-style-type: none"><li>• Not Tired At All</li><li>• Feeling Good</li><li>• Talking is Normal</li><li>• Breathing Regular</li><li>• Heart Rate Below 100</li></ul>

# SIMPLIFIED RATING

- Objective rating
  - HIGH
    - $>80\% \text{ HR}^{\text{MAX}}$
    - Cannot talk fluently
  - MORERATE
    - $>70\% \text{ HR}^{\text{MAX}}$
    - Can talk while cannot sing
  - LOW
    - $<60\% \text{ HR}^{\text{MAX}}$
    - Can sing and talk



# RESULT

- RHR (adult)
  - Athlete =  $<60$ /min
  - Norm =  $\sim 72$ /min
  - Inactive =  $>72$ /min
- Breathing rate 12/min
- SPO2  $>98\%$



# MUSCLE STRENGTH

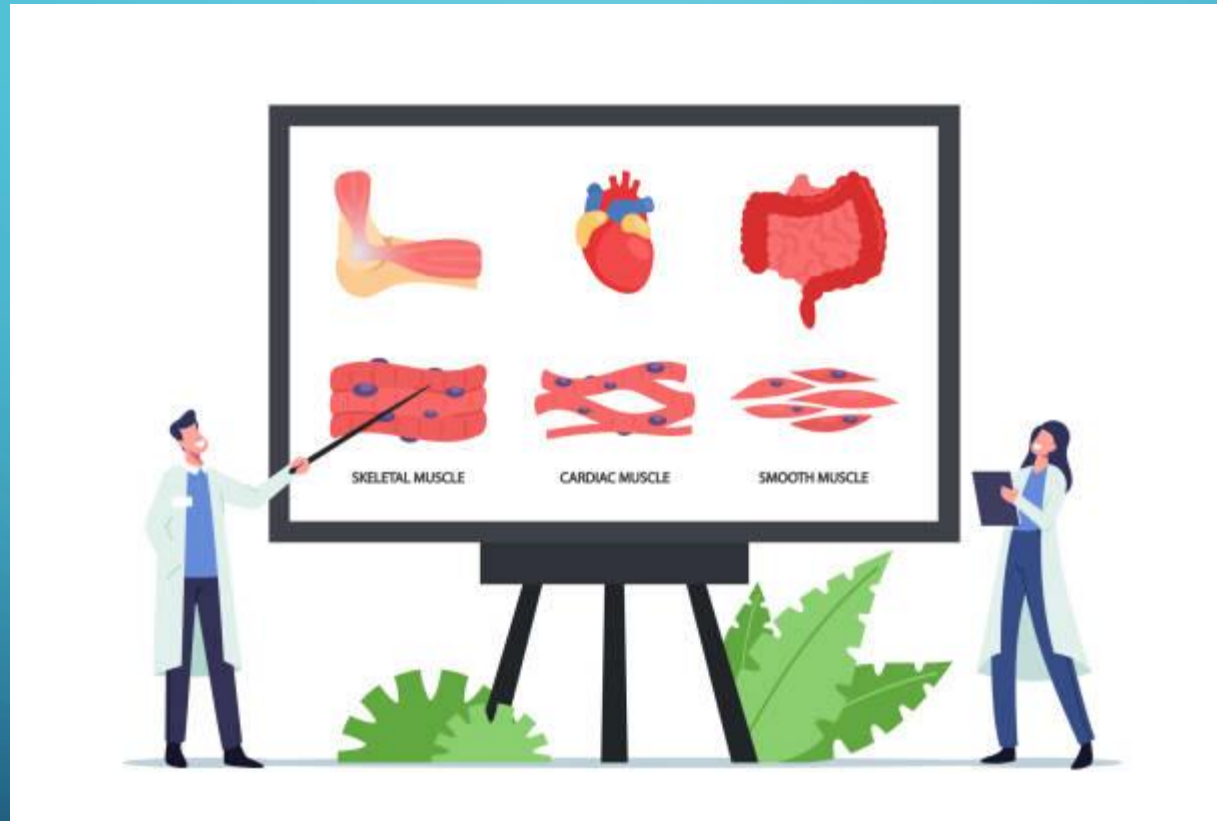


# TEST

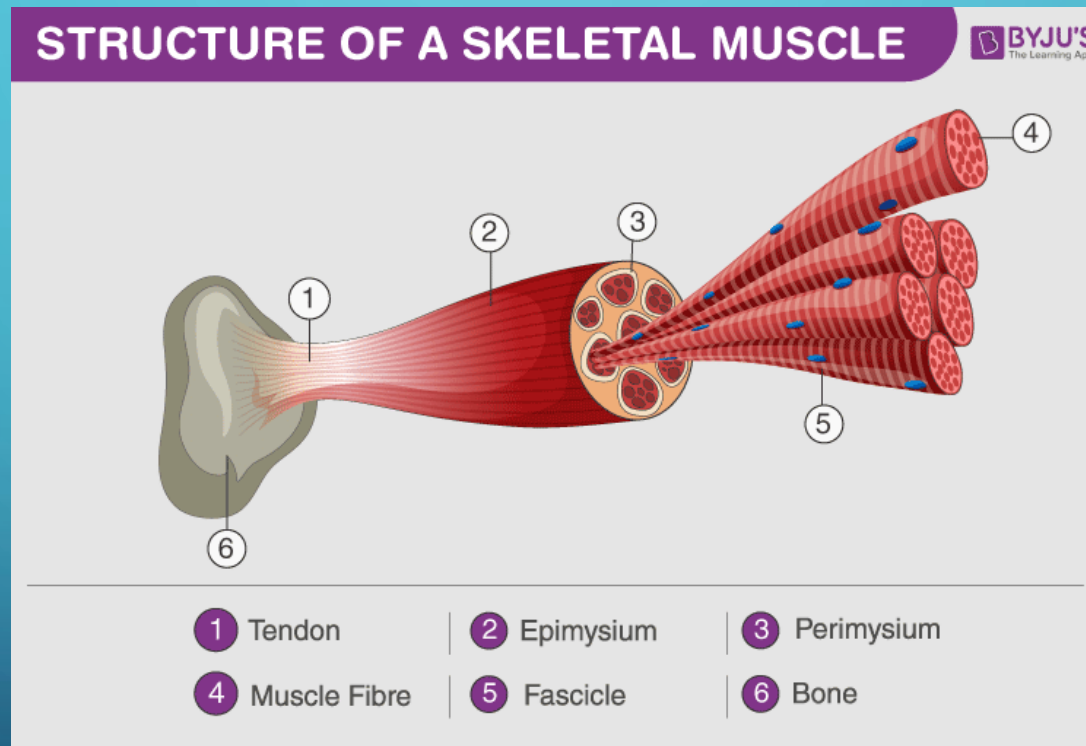
- 30CST
- Hand grip



# MUSCLES



# SKELETAL MUSCLE



# MHC ISOFORMS AND FIBER TYPE

- MHC I processes ATP the slowest and is found in slow-twitch muscle fibers,
  - MHC IIa processes ATP faster and is found in many fast-twitch fibers,
  - MHC IIx processes ATP fastest of all and is found in few fast-twitch muscle fibers
- 
- MHC I (pure isoform)
  - MHC I/IIa (hybrid)
  - MHC IIa (pure isoform)
  - MHC IIa/IIx (hybrid)
  - MHC IIx (pure isoform) – rare
  - MHC I/IIa/IIx (hybrid) – rare

# PLASTICITY AND EXERCISE

MHC I	MHC I/IIa	MHC IIa	MHC IIa/IIx	MHC IIx	
<b>Sedentary</b>	40%	10%	35%	15%	0%
<b>Average Resistance Trainer</b>	25%	8%	60%	7%	0%
<b>Elite Weightlifter</b>	25%	2%	73%	0%	0%
<b>Marathoner</b>	65%	10%	25%	0%	0%



# PLASTICITY AND EXERCISE



*Sedentary*

- ▲ Hybrid
- ▲ Type I
- ▼ Type IIa



*Resistance Trainer*

- ▼ Hybrid
- ▼ Type I
- ▲ Type IIa



*Elite Weightlifter*

- ▼ Hybrid
- ▼ Type I
- ▲ Type IIa



*Runner*

- ▼ Hybrid
- ▲ Type I
- ▼ Type IIa

# MUSCLE CONTRACTION

- Concentric: shorten
- Eccentric: lengthen
- Isometric: unchanged

# MUSCLE STRENGTHEN

- Strengthen proportional to Muscle Cross-section area

# TRAINING INTENSITY

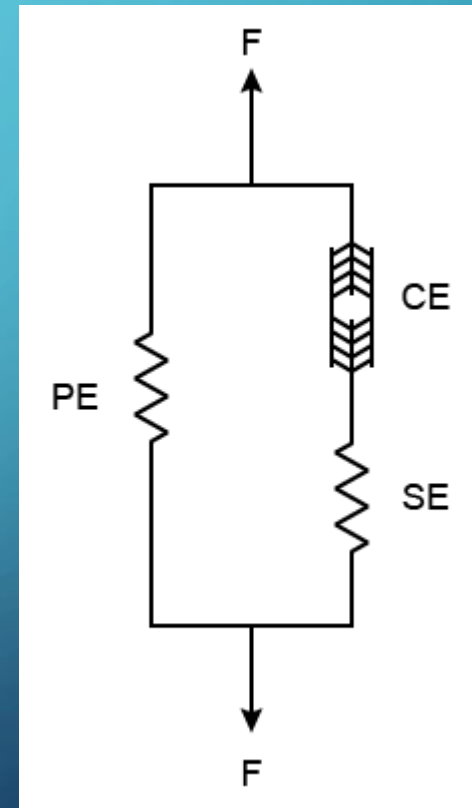
- Repetition-Maxium
  - 1RM
  - <8RM (125% 1RM)
  - 8-20RM
  - 20-30RM (200%-400% of 1RM)
- LIHR (coordination and synergy)
- HILR (muscle strength)
- HIIT (CPF/strength etc.)

# TENDON AND FASCIA

- Collagen fiber
  - Aggrecan binds water and resists compression
  - Decorin promotes fibrillar slippage.
  - Elastin, fibronectin, and tenascin-C function to enhance mechanical stability, aid tendon healing, and allow tendons to revert back to their pre-stretched lengths after normal physiological loading, respectively

# MUSCLE BIOMECHANICS COMPONENTS

- The Series Elastic Component (SEC)
  - Tendon
  - Spring
  - Store energy/absorb shock/enhance power and response time
- The Parallel Elastic Component (PEC)
  - Fascia
  - Frame
  - Direct Force/maintain structure
- The Contractile Component (CE)
  - Muscle
  - Generator
  - Generate force





# MECHANICAL LOAD EFFECTS ON TENDON

Mechanical Load Level	Effects on Tendon
Low	<ul style="list-style-type: none"><li>• ↓ Tensile strength</li><li>• ↓ Size</li><li>• ↓ Collagen production</li><li>• ↓ Anabolic activities</li><li>• ↑ Catabolic activities</li></ul>
Moderate	<ul style="list-style-type: none"><li>• ↑ Tensile strength</li><li>• ↑ Collagen synthesis</li><li>• ↓ Collagen degradation</li><li>• ↓ Adhesions</li><li>• ↓ Inflammatory mediator (e.g. prostaglandin E2)</li><li>• ↑ Tendon stem cells (TSCs) differentiating into tenocytes</li></ul>
Excessive	<ul style="list-style-type: none"><li>• ↓ Tensile strength</li><li>• ↓ Collagen organization</li><li>• ↑ Myofibroblasts</li><li>• ↑ Inflammatory mediators</li><li>• ↑ Tendon stem cells differentiating into non-tenocytes (<a href="#">adipocytes</a>, osteocytes, chondrocytes)</li><li>• ↑ Leukotrienes (↑ edema)</li></ul>

# EXERCISE FOR TENDON AND FASCIA

- Eccentric
- Plyometric

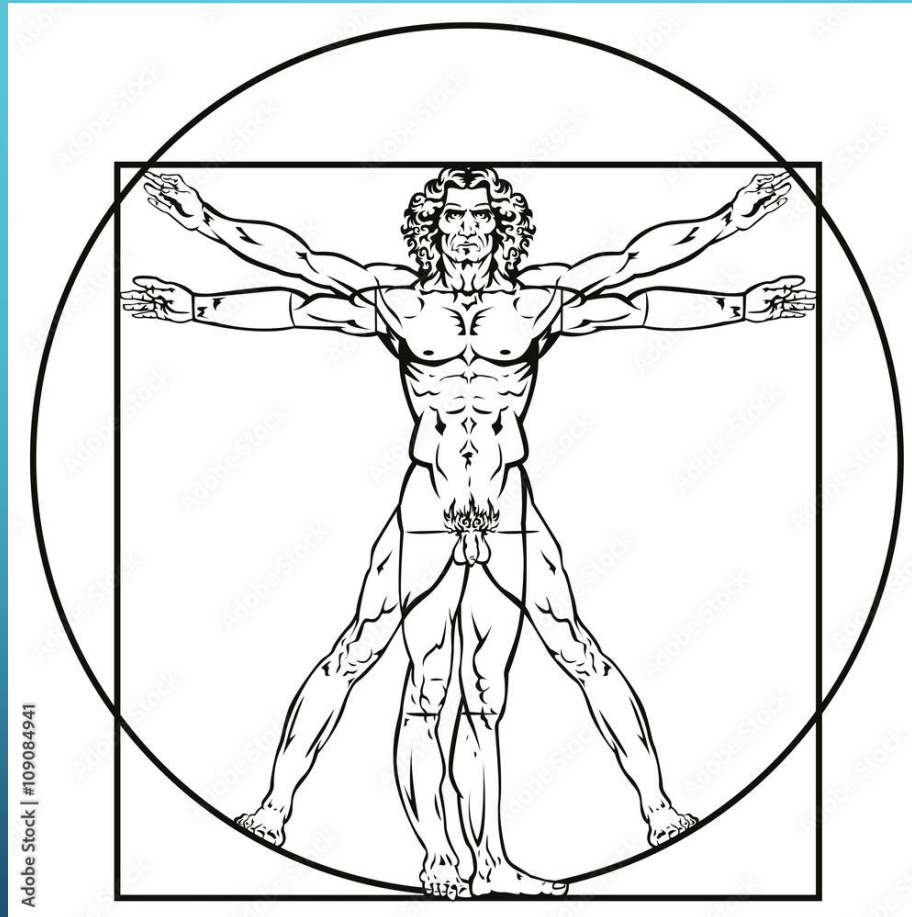
# RESULTS

- Hand Grips

	MALES		FEMALES	
rating*	(lbs)	(kg)	(lbs)	(kg)
excellent	> 141	> 64	> 84	> 38
very good	123-141	56-64	75-84	34-38
above average	114-122	52-55	66-74	30-33
average	105-113	48-51	57-65	26-29
below average	96-104	44-47	49-56	23-25
poor	88-95	40-43	44-48	20-22
very poor	< 88	< 40	< 44	< 20

- 30CST 20rep

# RANGE OF MOTION





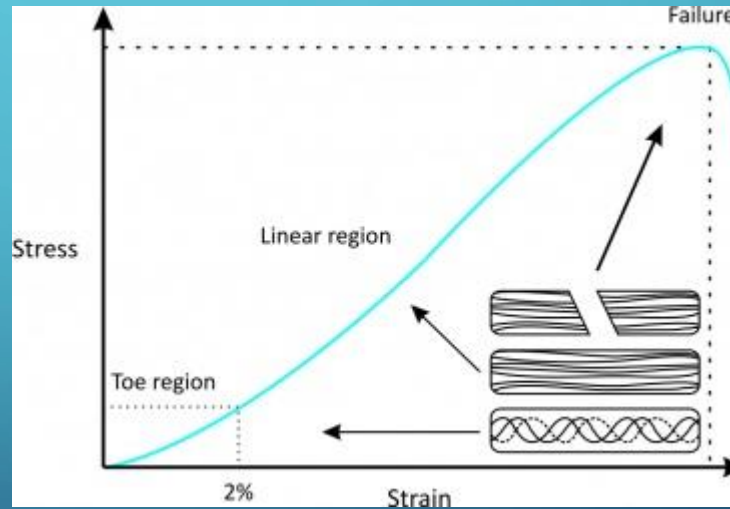
# RANGE OF MOTION FACTORS

- Joint stiffness
- Muscle/tendon length
- Coordination

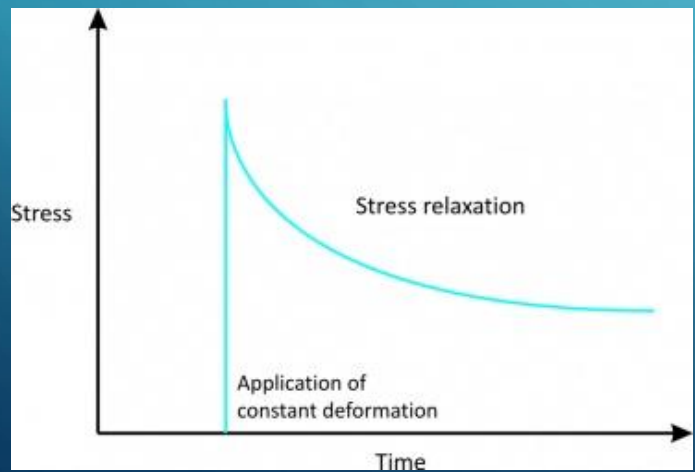
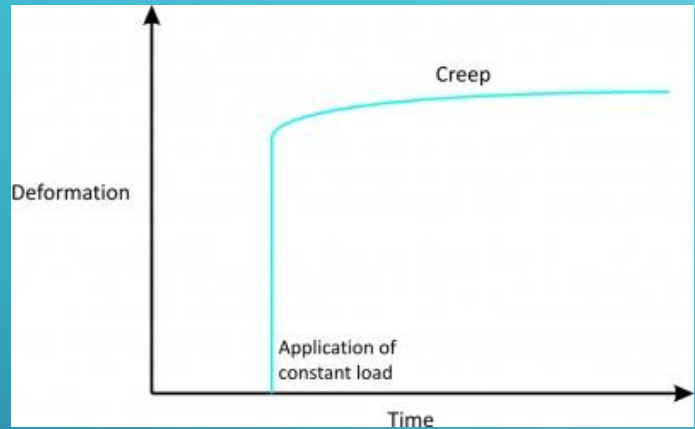


# TENDON MECHANICAL PROPERTIES:

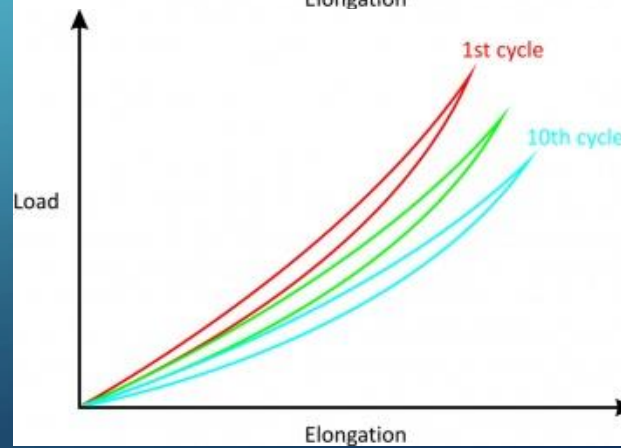
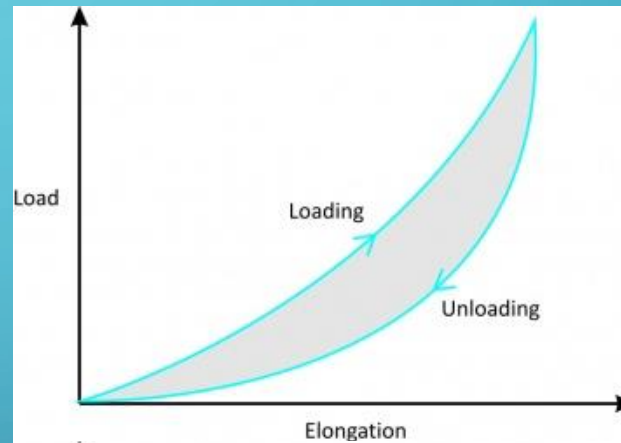
- Non-Linear Elasticity



# TENDON MECHANICAL PROPERTIES: VISCOELASTICITY



## Hysteresis or energy dissipation



# RESULTS

- Muscle length
  - Toe touch
- Joint mobility
  - Beighton score

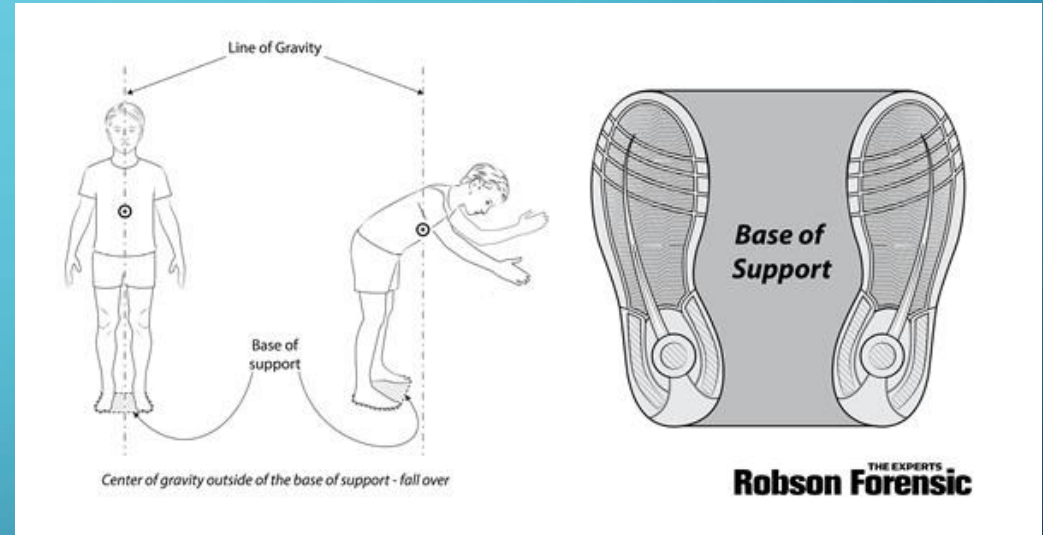
# BALANCE AND COORDINATION





# BALANCE

- Centre of Gravity (CG)
- Base of Support (BOS)
- Balance = Control CG within BOS
- Stability = Area BOS + control of CG



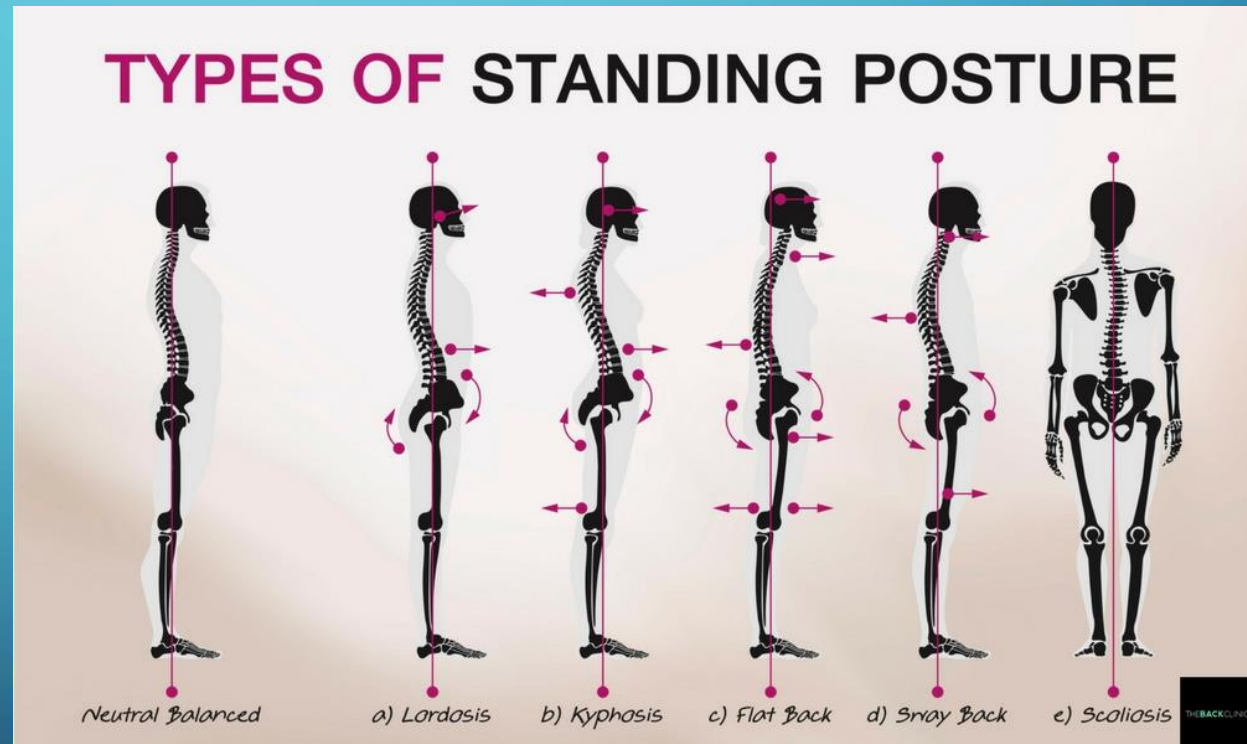
# POSTURAL PROBLEMS

- Neck pain and cervical spine problems
- Shoulder pain
- Elbow and Hand pain
- Back pain
- Knee pain
- Ankle and foot pain
- Other health problem

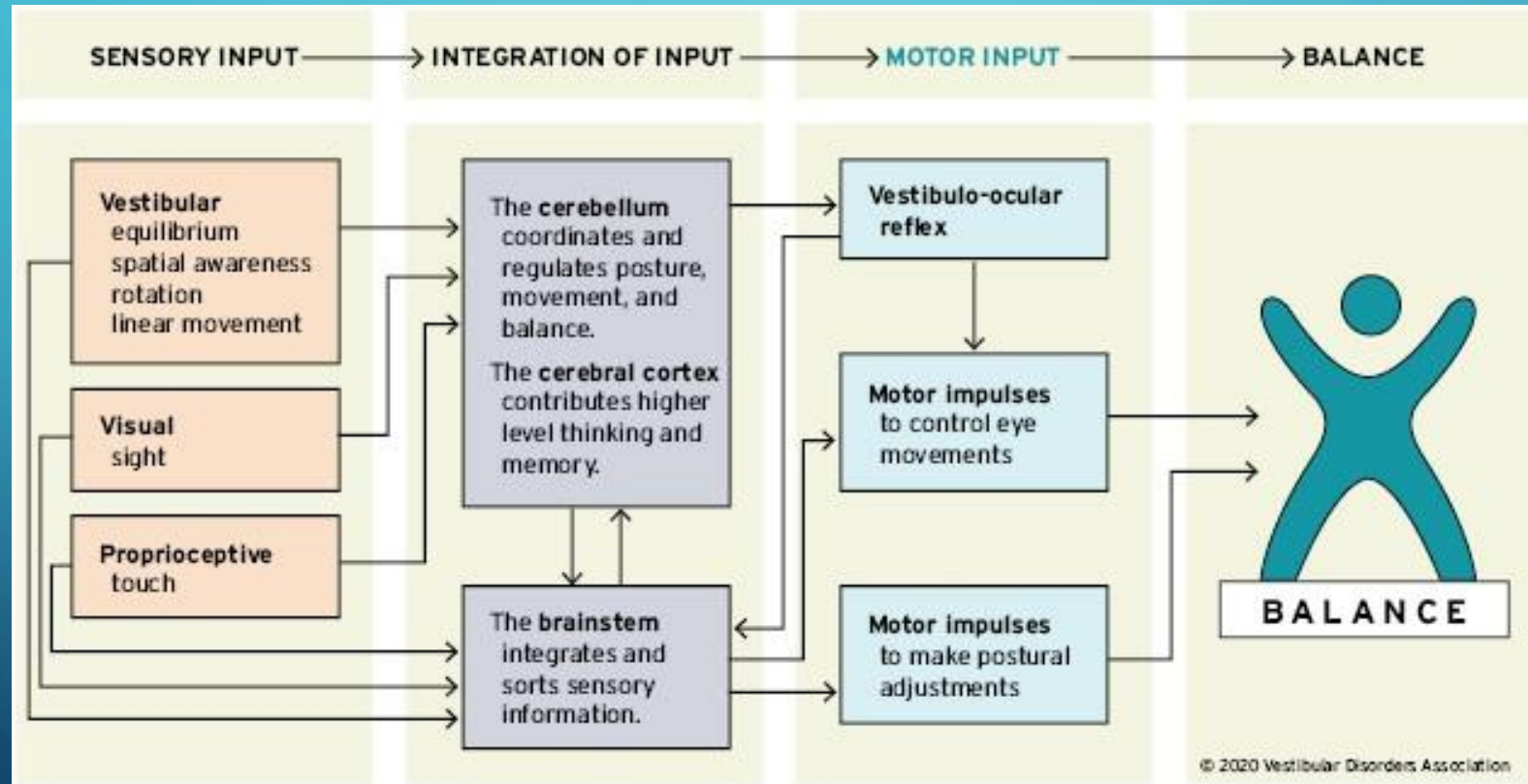


# POSTURAL CONTROL

- Head
  - Chin-in
- Pelvic
  - Belly-in
- Foot
  - Weight on heel



# BALANCE AND COORDINATION



# FUNCTIONAL MOVEMENT

- Muscle synergy
  - Joint mobility
  - Muscle strength
  - Coordination
- Kinetic Chain (e.g. Whiplash)
  - Tendon > muscle > joint



# RESULT

- SLS

Age in Years	Average of 3 trials eyes open in seconds
18-39	43.0
40-49	40.3
50-59	37.0
60-69	26.9
70-79	15.0
80-99	6.2

- Reference: Springer BA, Marin R, Cyhan T, Roberts H, Gill NW. Normative values for the unipedal stance test with eyes open and eyes closed. *Journal of Geriatric Physical Therapy*, 2007; 30:8-15.



# INJURY AND RECOVERY



## **THE 4 STAGES OF RECOVERY AFTER AN INJURY**

# INJURY AND RECOVERY

- Injury and Recovery
  - Acute
  - Sub-acute
  - Chronic
  - Recovery



# CHRONIC PAIN

- Chronic = Pain > 3mth
- Repetitive injury

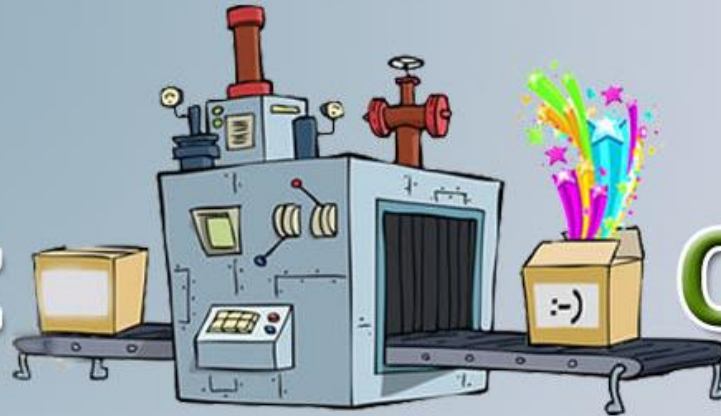
# ACCUMULATIVE INJURY

- Wear and tear rate
  - Exercise
  - Poor habits
  - Injury
- Recovery rate
  - Nutrition
  - Rest
- $\text{Recovery rate} > \text{Wear and tear rate} = \text{Accumulation}$

# BODY MACHINE

# Machine

Input

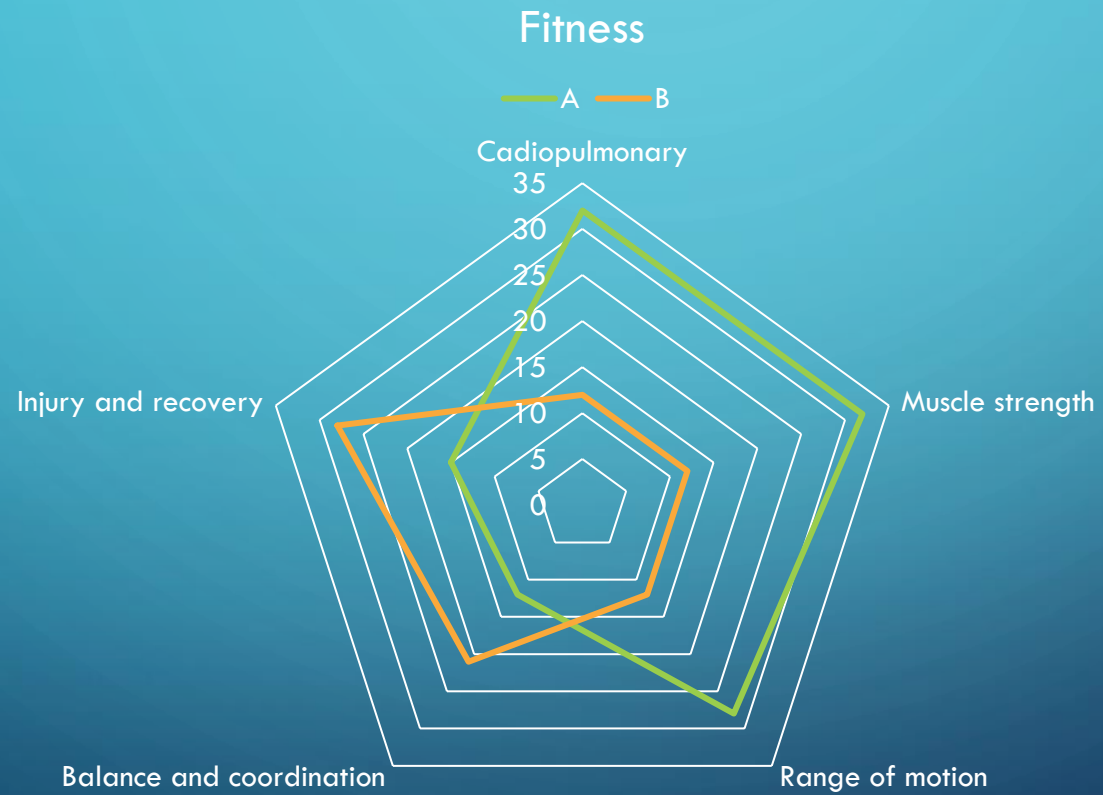


Output

# TRAINING

- Input
  - Any kind of stimulation to body
- Process
  - Recovery
  - Physiological changes
- Output
  - Health and fitness

# TRAINING METHOD





# Q&A

- Thanks!
- 

