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PHYSICAL ACTIVITY PRACTICE AND FUNCTIONAL CAPACITY IN ELDERLY

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ABSTRACT

This aging process causes reduction of muscle size and strength what promote muscle weakening and impact in the lower-limb occasioning functional consequences as maintenance of personal independence and compromised ability to realize daily tasks. The objective of the present study is to identify the physical activity practice and funcional capacity in elderly resident in the city of Vitoria da Conquista, Bahia, Brazil. This is a transversal, quantitative and descriptive study. It was selected 80 older from both gender with range of age of 60 to 90 years. To assessed the physical activity level, it was used the International Physical Activity Questionnaire (IPAQ) short form and to evaluate the funcional capacity, the Lawton Instrumental Activities of Daily Living Scale. From the sample, 80% was female, 50% married, 50% of social class E and 90% didn't work. When considered the physical activity level, 85% was considered active and about the functional capacity, 60% were dependent. All the independent subjects were active. There was a significant correlation between physical activity level and functional capacity. The data found shows that physical activity level assists the maintenance of functional capacity leading to independence and autonomy of the elderly.

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INTRODUCTION

The association between the progressive decline in mortality rates and the increase in the fertility indexes promoted an alteration in the demographic basis leading to an increase of aging population (FARIAS-ANTUNEZ *et al*, 2018). The Brazilian Institute of Geography and Statistics census shows that 10.8% of the population is considered elderly and estimates that in 2025, it will be 14% (RODRIGUES *et al*, 2017). This aging process causes alterations in the locomotor system, as reduction of muscle size and strength what promote muscle weakening and impact in the lower-limb occasioning functional consequences as compromised ability to realize daily tasks (BENAVENT-CABALLER *et al*, 2016). Independence can be considered the ability of realize instrumental activities of daily living that interact with the

environment and its loss lead to the need for support of family, caregivers and health care services affecting the quality of life and the limitation in the performance of these activities has been considered a strong predictor for mortality and hospital admission (OPPEWAL et al, 2015). The Lawton Instrumental Activities of Daily Living Scale has been considered a reliable way to assess the functional capacity to performance the instrumental activities through the evaluation of eight tasks and can be answered by interview in ten to fifteen minutes by the elderly or his caregiver (KADAR et al, 2018). Physical activity is an important health behavior and prevent many agerelated problems being associated with successful aging (NAWROCKA et al, 2019). Loss of muscle and bone mass causes changes in the musculoskeletal and neuromotor function what predispose the older to a functional decline increasing the risk of disability what can be avoid with the physical activity because of the benefits on neuromuscular

adaptations that leads to positive increment in functional capacity (TOMAS et al, 2018). Sedentary lifestyle is commonly prevalent in older people and attention is needed to the participation of older in physical activity due to the beneficial effects that its promote in functional ability reducing the risk of limitations what helps to maintain independence and self-reliance, two important items to quality of life (THRALLS; LEVY, 2018; NAWROCKA, MYNARSKI, 2017). Due to the deleterius effect of sedentarism and physical inactivity in the health and their association with non communicable diseases, both are considered an important public health challenge (TAJIMA et al, 2018). Thus the objective of the present study is to identify the physical activity practice and funcional capacity in elderly resident in the city of Vitoria da Conquista, Bahia, Brazil aiming to assist in the elaboration of strategies and interventions that can increase this practice due its benefits to the older health as the mainantance of independence and autonomy.

MATERIAL AND METHODS

This is a transversal, quantitative and descriptive study realized in Vitoria da Conquista, Bahia, Brazil, (latitude de 14° 51' 58', longitude de -40° 50' 22) que, according the Statistic and Geography Brazilian Institute (2010), with nearly 320.129 population. This study is part of a larger project "Epidemiological Profile of obesity in the city from Vitoria da Conquista - Bahia". It was selected 80 older adults of both gender, with range of age from 60 to 90 years to participate from this study answering the questionnaires. It was included the older that responded the Mini Mental Exam to ensure the good cognitive capacity and good physical mobility. Older bedridden, inmates, with low or no mobility, small cognitive capacity, or with noncommunicable disease as Parkinson and Alzheimer were excluded. The International Physical Activity Questionnaire was used to assess the physical activity practice in the short form that was developed to facilitate the monitoring of physical activity in global pattern basis, widely utilized in epidemiological researches for be easily applicable and low cost, validated in 12 countries, including Brazil with reliability largely accepted. The short-form of IPAQ has seven questions to identify the physical activity practice and the classification used was in "active" or "no active" (DAVID et al., 2018). The Lawton Instrumental Activities of Daily Living scale was used to assess the functional capacity of subjects. It was applied for trained people objecting to reduce the evaluation vies. This scale has been widely used in research and assess eight areas of function: ability to use telephone, shopping, cooking, housekeeping, laundry, transportation, responsibility for own medication and ability to control the finances. It can be answered in 10 to 15 minutes for direct interview with the older or the caregivers (KADAR et al, 2018). There is three options of answers "independent", "partial need of help" and "incapacity to realize the task". The score ranges from 1 to 3 for each item being the independence the higher. When the subject is completely independent, the score is 21 (DAVID et al, 2019).

The data was treated and analyzed in Excel program and posted in the statistic program SPSS® 25.0 to access the association between the studied variables and the Pearson Quisquare test was used. The statistical analysis was performed considering the significance level of p<0,05. The participants was advised about the methods that were used in the research and all of the assined the informed consent form attending the

Resolution 466/12 that regulate the human being research. The present study was approved by the Ethic Committee of Independent Northeast College with number 1.859.545.

RESULTS AND DISCUSSION

The sample was composed by 80 elderly from both gender, 80% was female, 50% married and 50% from E social class. The majority of older referred not work, 45% had no education and those who had schooling, the majority (50%) studied in public school.

Table 1. Sample Characterization

		Absolut	Relative
		Frequency	Frequency
Gender	Female	64	80,0
	Male	16	20,0
Marital	Single	8	10,0
Status	Married	40	50,0
	Divorced	12	15,0
	Widower	20	25,0
Social Class	C	4	5,0
	D	36	45,0
	E	40	50,0
Work	Yes	8	10,0
	No	72	90,0
Education	Incomplete Elementary	28	35,0
	Complete Elementary	4	5,0
	Complete High School	12	15,0
	None	36	45,0
Teaching	Public	40	50,0
Type	Private	4	5,0
	None	36	45,0
IPAQ	Active	68	85,0
	No Active	12	15,0
Lawton	Independent	32	40,0
Scale	Dependent	48	60,0

The majority of sample (60%) was classified as dependent in Lawton Scale, similar value to the 65,9% demonstrated by Tavares *et al* (2016) in 1.691 seniors of Uberaba, Minas Gerais, Brazil, higher than found by Nunes *et al* (2017) of 34,2% in 1.593 elderly from Bage, Rio Grande do Sul, Brazil and lower than showed by Queiroz *et al* (2016) of 82,5% in a sample with 60 seniors with predominance of female from Jequié, Bahia, Brazil. This high number of dependent older can be explained by the mean age once the age is an important risk factor for the decrease of functional ability in older adults because of the deterioration related with advanced age that occur in the various physiological systems involved in the ability to do tasks (TAVARES *et al*, 2016).

Table 2. Pearson Qui-square test for association between physical activity and functional capacity

		Physical Activity (IPAQ)		
		Active	No Active	p-value
Gender	Female	56	8	-
	Male	12	4	
	Total	68	12	
Lawton Scale	Independent	32	0	0,001
	Dependent	36	12	
	Total	68	12	

Functional ability decrease with age and is more evident in females (TOMAS et al, 2018). Besides that, there is a decline in motor performance with advanced age, which involves weakness, slowness, power loss, and increase in fatigue of muscles of lower-extremity what reduce the strength and

compromise the functional performance leading to disability (HUNTER; PEREIRA; KEENAN, 2016).

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