SPORTS MEDICINE INSTITUTE

NEWSLETTER

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WHAT'S HAPPENING AT SMI?

As usual, it is a busy time at SMI.

Our team have been busy putting together Performance Sport packages for local sporting associations and have also put together some programs targeting over 55's and business groups.

Run by our team members Laura & Aaron, these packages have been carefully put together to enhance your teams performance, while for the over 55's and business packages, we focus on strength, flexibilty and overall fitness.

Both Laura and Aaron hold degrees in Exercise Science and have also obtained a masters degree in High Performance Sport.

If you or someone you know is interested in finding out more about our group packages, contact our Practice Manager Kylie Spencer on 9525 3444 or alternatively email **manager@sportsmedinstitute.com.au**

JUVENILLE ARTHRITIS & PHYSICAL ACTIVITY

Benefits of physical activity in children with juvenile idiopathic arthritis

Physical activity and exercise are safe and beneficial for the vast majority of children, including those with juvenile idiopathic arthritis (JIA).

Regular physical activity is very important for the general fitness and wellbeing of all children. By playing games with other children, or participating in sports, children can remain physically active and have fun and make friends. Unfortunately, evidence shows that children with JIA are considerably less active than their peers. Although this may be a direct result of the child's symptoms, low levels of physical activity are not necessarily specifically related to disease activity or severity, and control over disease activity with appropriate medicine does not necessarily restore previous physical activity levels.

The problem with being inactive

Ongoing inactivity can result in the creation of a vicious cycle in children with JIA. Decreased physical activity and mobility results in deconditioning, muscle weakness, fatigue, joint stiffness, loss of bone density, and a reduction in movement control. This may then lead to further pain, dysfunction, and further inactivity.

Maintaining physical activity as much as possible minimises the negative effects of inactivity.

Dr Damien McKay

Paediatric Rheumatology Fellow at The Children's Hospital at Westmead & Sports Medicine Institute

Paediatric Sports Medicine Fellow at The Children's Hospital Westmead & Sports Medicine Institute

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Juvenille Arthritis and Physical Activity Continued

Benefits of Physical Activity

Physical activity has wide-ranging health benefits, including improvements in general physical health and quality of life as well as improvements in heart, respiratory and vascular functions and weight control. As children with JIA are generally less active than their peers, they are at risk of losing these general benefits of physical activity.

In younger children, participation in physical activity also plays an important role in the development of their motor skills. In addition, participating with other children in physical activity can result in improvements in self-confidence, self-esteem, independence and social interactions of children and adolescents with JIA.

Benefits of Sports Participation

Participating in either individual or team sports can be a good way of ensuring regular participation in physical activity. If symptoms are well controlled then children with JIA may be able to participate in any type of sporting activity. Some children with JIA may have limitations to the level of physical activity they can participate in, however it is still possible to choose a sport which these children may be able to participate. This allows all children with JIA to get the benefits of regular physical activity. In addition there are all the other benefits that children get from participating in a sport, for example the social benefits of being part of a team.

Benefits of Specific Exercise Programs

Exercise and physical activity may also be used as a specific therapy for children with arthritis. Examples of this include hydrotherapy or the exercises that a physiotherapist may prescribe for a child with JIA. Recent studies suggest that structured aerobic training or low-intensity fitness programs can lead to improved physical fitness, quality of life and functional abilities in children and adolescents with JIA and do not exacerbate arthritis.

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CAN EXERCISE OFFSET A POOR DIET?

Can Exercise Offset a Poor Diet?

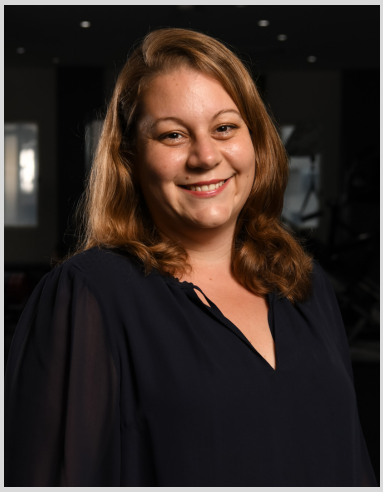
In an ideal world, our indulgences into foods that increase the waistline would be offset by physical activity that we did the day after.

New research conducted by the University of Sydney and published in the British Journal of Sports Medicine investigated whether or not the damage that poor diets can do to our mortality risk can be reversed or negated by being physically active.

Diet and physical activity were assessed for their impact on mortality risk from cardiovascular disease and cancer both together and independently on an adult population. Whilst previous research has been published that high intensity exercise may be helpful in balancing out the body effects of overeating or a poor diet, this new research has not agreed. Instead, the study showed that people who were both highly physically active and ate a nutritious diet were least likely to die from cardiovascular disease or cancer.

So, what is a good diet then? In Australia, it means getting nourishing foods that give us the vitamins, minerals and nutrients that our bodies need. The recommendations for the general population are to consume 5 serves of vegetables daily, where a serve could be 1 cup of mixed salad leaves without dressing, 2 serves of fruits like 1 apple or two apricots and two portions of fish at minimum per week, like salmon. Australians would also benefit from eating less red meat, especially processed meats like salami which are high in saturated fats and preservatives.

More research is needed into the life long effects of diet and physical activity on mortality but for the time being, Dr Thea Werkhoven keeps it simple: Eat well, move for health and you're on the right track for a healthier life.



Dr Thea Werkhoven
PhD, APD AN
Dietitian

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