Your Prescription for Health Series

EXERCISING WITH MENTAL RETARDATION

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The benefits of regular physical activity for individuals with mental retardation are numerous, including increased strength and endurance, better weight maintenance and reduced risk of many diseases. Heart disease is a common co-morbidity in persons with mental retardation, so health care providers need to make efforts to reduce the common risk factors for heart disease in their patients with mental retardation. The key to maximizing the benefits of exercise is to help the individual follow a well-designed program that accommodates his or her specific needs and limitations.

Getting Started

- Talk with the individual's health care provider before starting an exercise program and ask for specific concerns about the patient doing exercise.
- The primary goal of exercise training is to find activities that the individual enjoys and that is within his or her functional capabilities. Additional goals include body fat and weight loss and improved muscle strength and aerobic capacity.
- If the individual's fitness level is low, start with shorter sessions (10 to 15 minutes) and gradually build up to 30 minutes of aerobic activity, 5 days per week.
- Recommended activities include swimming, walking and indoor cycling.
- Strength may have important ramifications for vocational productivity and independence. A twice-per-week strength-training program using machines with one to three sets of exercises for the major muscle groups, with 10 to 15 repetitions, is recommended.
- Help create a structured environment by following a standard routine that is consistent and rewarding for the individual. Reward systems and positive reinforcement are particularly effective for helping the individual adhere to the program.
- Activities set to music increase adherence and are particularly effective, as are community-based exercise programs.

Exercise Cautions

- Exercise should always be supervised.
- While strength-training gains may be apparent within 10 to 12 weeks, it may take considerably longer (four to six months) to observe improvements in cardiorespiratory endurance.

Your exercise program should be designed to maximize the benefits with the fewest risks of aggravating your health or physical condition. Consider contacting a certified health and fitness professional* who can work with you and your health care provider to establish realistic goals and design a safe and effective program that addresses your specific needs.

IN THE SERIES:

- > Cardiovascular Diseases
- > Pulmonary Diseases
- > Metabolic Diseases
- > Immunological/ Hematological Disorders
- > Orthopedic Diseases and Disabilities
- > Neuromuscular Disorders

*If your health care provider has not cleared you for independent physical activity and would like you to be monitored in a hospital setting or a medical fitness facility, you should exercise only under the supervision of a certified professional. The American College of Sports Medicine (ACSM) has two groups of certified fitness professionals that could meet your needs. The ACSM Certified Clinical Exercise Specialist (CES) is certified to support those with heart disease, diabetes and lung disease. The ACSM Registered Clinical Exercise Physiologist (RCEP) is qualified to support patients with a wide range of health challenges. You may locate all ACSM-certified fitness professionals by using the ProFinder at www.acsm.org.

For more information, visit www.exerciseismedicine.org or e-mail eim@acsm.org.