KINESITHERAPY, ERGOTHERAPY AND SPORT AS FACTORS IMPROVING THE QUALITY OF LIFE OF OLDER PEOPLE

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Abstract
Kinesitherapy, Ergotherapy and sports activities find their application in the recovery and rehabilitation of older people through various exercises, tourism, sports games, and training in daily living activities. Through them, the older people are distracted from various problems; they have an emotional effect and contribute to achieving new skills and training in new occupational activities. Classes are held individually or in groups, in different conditions - in rehabilitation centers, homes for the older and other specialized centers for medico-social rehabilitation. Self-care and activities of daily living are crucial to the independence of older people. They are related with getting up in the morning, morning toilet, breakfast, eating during the day, dressing, undressing, cleaning the house, etc. It is about moving the body with or without walking aids. These activities are diversified with various sports games.

Keywords: recovery, rehabilitation, physical exercises, occupational activities, sports games, older people.

INTRODUCTION
The theme of physical activity and quality of life of older people is particularly topical to the demography of the Europeans and in particular the Bulgarians. Today people around the age of 75 years are 7.5% of the European population, but it is expected in the next 30 years, they would represent 14.4%. Most of these older people have some physical or mental disabilities, whether congenital or acquired, or simply due to natural aging. EUROSTAT researches show that by the end of 2040 elderly people with significant and severe disabilities will represent 6.5%, which is 24.5 million people. Therefore, good health culture of young people today will help them to become healthy and active adults. A prevention and dissemination of best practices will help older people to have a better quality of life (Balkanska, 2006).

“Ageing, it’s a little sad, but it’s the only way to live longer,” said French. It is very important even now to identify activities for socialization of older people. Premature aging is a problem not only in Bulgaria and it is the result of lack of exercise, not just muscles but also mentally and intellectually. To encourage active participation of the elderly in social life, they should be supported to continue learning throughout their lives. Another aspect of this problem is to create competence of the people who work with the elderly.

And useful pastime is heading to overcome the crisis of the age, a means for social development and socialization. A healthy lifestyle - proper diet, mental and physical activity, social activity contribute to a normal and natural aging process called active, prosperous, healthy aging (Vodenicharov, Savova, Pavlova, Maksimova, Balkanska et al., 2009).

Ergotherapeutic activities, Kinesitherapy (KT) and sport are used in social rehabilitation and treatment of the elderly. Their multi effect counteracts premature aging and maintain aging organism to the highest possible structural and functional level. Recommended are forms of group activity, but in the absence of such a possibility older people can engage independently as in advance they are given the necessary instructions for self and proper implementation of physical exercises and Ergotherapeutic activities (Karaneshev, 1987).

Ergotherapy is an active process in which the patient is involved in purposeful activity, satisfying them emotionally (Koleva, 2009). Also it is used in the recovery and re-integration of older people through different working classes and training in activities of daily living (ADL). It distracts the elderly, divert their attention from the various problems, it has an emotional effect in various activities and contributes to the development of new skills (Vacheva, 2010). Classes are held in different conditions - in rehabilitation centers, homes for the elderly and other specialized centers. Patients age from different groups, depending on the specifics of each group. Every age has its own pattern of daily activities, which is typical of the life period. In middle age - various work activities, and for the elderly-
- training in ADL and entertaining Ergotherapy (horticulture, etc.) (Koleva (Колева), 2011).

The purpose of this paper is to study the literature sources and practical methods in Bulgaria and other European countries for the implementation of Kinesitherapy and Ergotherapy to improve the physical activity and the quality of life of older people.

DISCUSSION

Kinesitherapy for older people solves a number of specific tasks associated with the specific disease depending on the affect on organs and systems:

• To slow the aging process;
• To improve the function of respiratory system and cardiovascular system;
• To counter the senile problems of the body;
• To overcome hypokinesia;
• To motivate elderly people for regular sport activities and promotion of physical activity.

The basic principles of KT in older people are: general effect on the body, individual approach and gradual load (Karaneshev (Карнешев), 1991).

The basic forms of activities in KT for older people are: morning exercises; of Kinesitherapy activities, dosed walking, terrain treatment, tourism, Ergotherapy, folk dances and swimming.

Recommended is the form of group activity. But for adults with musculoskeletal problems, problems in nervous system, respiratory system, cardiovascular system and joint disorders, the activities are individual and under the control of professionals (Ilieva & Marinkov (Илиева & Маринков), 1997). In both cases, the elderly should periodically undergo medical examinations / at least once in 6 months / and besides the usual tests, the physical activity should be assessed using the standard tests appropriate for the different diseases and disabilities.

Means of KT used in the activities are: physical exercises, breathing exercises, Mechano therapy; suspension therapy; manual methods for mobilization of joints (Karaneshev (Карнешев), 1991), elements of various sports most often combined; cyclical exercises in developing endurance, walking for terrain field treatment and tourism, cycling and swimming, tennis, badminton, tennis and table tennis are also considered suitable for the elderly, Ergotherapy and activities of daily living / ADL/ (Топузов (Топузов), 2007).

Methodological guidelines:

• In early stage of the activities with adults and older people it is need to be used simple exercises and manageable work and entertainment activities; ADL training and entertaining Ergotherapy are mainly used;
• The methods of Play Therapy are used including entertaining games with a little exercise;
• The load should be gradually and accurately dosed, which is determined by the reduced recreational and adaptive capabilities of the organism (Koleva (Колева), 2011).

Self-service and ADL are crucial to the independence of older people. They are associated with getting-up in the morning, morning toilet, breakfast, feeding during the day, dressing, undressing, cleaning the house, etc... It is about moving the body in space with or without assistive devices. Mastering ADL needs precise determination of the rehabilitation potential of older people, precise determination of the motor capabilities and real scheduling of activities. The type assistive devices are determined depending on the motor disorders, determined are the possibilities of using devices for walking and self-service at home and at work (Колева, Колева), 2009).

There is need of developing an Ergotherapy program depending on the rehabilitation potential and individual abilities of the elderly.

Ergotherapy program includes several important elements facilitating the re-socialization of the individual:

• Deliberate mastering of skills;
• Integrate skills in the activities;
• Activities define the roles of the individual;
• Self learning, incl. ADL;
• Training in the performance of work and crafts;
• Training activities filling free time;
• Application of arts to improve the skills and activities and targeting to creativity;
• Transportation (functional, by public transport, by car);
• Environment - activities are performed tailored to individual needs and abilities, most used environment pre-adapted to the older people (Топузов (Топузов), 2007).

Skills are required in carrying out the activities in Ergotherapy. They are handled in order to fulfill the tasks of self-service, to carry out manufacturing activities or spend their leisure time. Skill is defined as a component of performance, which is included in practice, and the performance is an outward expression of the skill.

Mastering crafts for older people and their application for healing purposes has many advantages over implementation of the exercise:

• When applying craft work, the fatigue occurs more slowly;
• Distracting the attention of the old person from their illness or disability;
• More endurance is achieved through exercise;
• Training effect is achieved faster by increasing the amount of movements, muscle strength and coordination of movement.

Crafts incite creativity, awaken the initiative and stimulate the creative joy of the elderly (Топузов (Топузов), 2007).

From the sports activities applied are movable and less movable games, and elements of sports games. They are performed from different starting points depending on the motor abilities of older people, as the best effect is achieved through outdoor activities. From the sports elements a greatest application have the swimming, basketball shooting and cycling on a terrain without slope.
CONCLUSIONS
In recent years many hospices have been opened in Bulgaria. Increasing is the number of Homes for old people, licensed by the Ministry of Labor and Social Policy by the Law on Social Services. These homes shelter a large number of elderly people permanently or just during the day. Restructured are many hospitals with wards for further treatment and rehabilitation, in which most treated are in older age. Many Spa centers in seaside and mountain resorts also serve the elderly during the off-peak season.

Society is still indebted to the elderly in terms of:
• Improving quality of life through healthy eating, organized physical activity, kinesiotherapy and sports activities;
• Prevention of cardiovascular diseases and over-coming the complications;
• Overcoming hypokinesia;
• Organizing target activities;
• Distraction from the problems;
• Slow down the aging process.

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