

Older African Americans Wary of Outdoor Exercise

BY JANE NEFF ROLLINS

Contributing Writer

LOS ANGELES — Fears about personal safety appear to be a barrier to exercise among older African Americans in low- and moderate-income areas of Los Angeles, Dr. O. Kenrik Duru reported at the annual meeting of the Society of General Internal Medicine.

While developing a community-based physical activity intervention for older

African Americans, the investigators conducted six focus groups in Los Angeles during 2004 and 2005 with a total of 59 African Americans aged 60 years and older. The subjects were from four senior centers that had significant African American populations—two in a low-income area and two in moderate-income areas. In each center, investigators recruited a convenience sample of interested ambulatory seniors.

The participants averaged 66 years old and 75% were female; 59% had graduated

from high school, and 71% had annual incomes of less than \$10,000, said Dr. Duru, a third-year National Research Service Award fellow at the University of California, Los Angeles.

Many participants reported exercising three to seven times weekly, but often the duration was short (10-15 minutes). Residents of both low- and moderate-income neighborhoods preferred indoor activity, such as low-impact aerobics, to outdoor activity. Although participants consistently

mentioned a concern for physical safety, other reasons for preferring the indoors included availability of air conditioning and restrooms, and the avoidance of bugs.

Participants in low-income neighborhoods worried most about things they had seen in their neighborhoods, such as gang activity, assaults on older people, and unleashed dogs. Those in moderate-income neighborhoods were less likely to have experienced crime or problems with dogs, he said. ■

Exercise Cuts Daytime Fatigue In Sleep Apnea

BOSTON — Depression, metabolic syndrome, and lack of exercise exacerbate daytime sleepiness in obese patients with sleep apnea, Dr. Alexios Sarrigiannidis said at the annual meeting of the Endocrine Society.

Dr. Sarrigiannidis and his colleagues in the Sleep Research and Treatment Center at Pennsylvania State University, Hershey, reviewed data for 708 consecutive patients, 470 men and 238 women, mean age 50 years, who had been referred for symptoms consistent with sleep apnea and had at least five episodes of apnea/hypopnea per hour. Mean body mass index was 34.9 kg/m² for men and 39.2 for women.

Participants completed the General Health Questionnaire; the Epworth Sleepiness Scale; and the Physical Activity Questionnaire. All were assessed for metabolic syndrome and underwent a standard, 8-hour nocturnal polysomnographic recording.

Among men, the mean apnea/hypopnea index score (representing the total number of either apnea or hypopnea episodes/hr of sleep) was 39.9, significantly higher than the 29.2 reported in the women. Measures of sleepiness and physical activity were similar for both groups.

Of the study population, 39% of the men and 62% of the women met the diagnostic criteria for major depressive disorder, and 69% of the men and 68% of the women fulfilled the criteria for metabolic syndrome. In both groups, about 43% did not get regular physical exercise.

Using logistic regression analysis, "exercise was the strongest [statistically significant] predictor of excess daytime sleepiness in men, followed by depression," Dr. Sarrigiannidis reported in a poster presentation. "In the women, depression and metabolic syndrome, in that order, were the most important predictors."

Independent of body weight, "participating in regular exercise appears to have somewhat of a protective effect in terms of daytime sleepiness, particularly among men," Dr. Sarrigiannidis said. Exercise improves insulin resistance and reduces visceral adiposity, he said, noting that clinicians should encourage physical activity as a way to help combat daytime fatigue in individuals with sleep apnea.

—Diana Mahoney



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