

PPUK - Working with Type 2 Diabetics during Exercise



The focus of the type 2 diabetic's programme is to make lifestyle changes, lose weight, and burn calories by using moderate effort. This programme resembles something akin to an overall health and weight management programme. If there are no complications, often the same type of programme can be used as that for an obese or de-conditioned exerciser.

The type 2 diabetic should endeavour to do the following:

- 1) Lose weight and make better nutrition and food choices.
- 2) Decrease blood pressure and eliminate cardiovascular disease risk factors.
- 3) Increase activity that includes cardio-respiratory, resistance training, and stretching exercises.

Many type 2 diagnoses for diabetes are believed to be more related to lifestyle choices than genetic or other causes. Inactivity and decreased sensitivity of the body's tissues (i.e., exercising muscles) to the insulin that is produced by the pancreas can result in hyperglycemia and the diagnosis of type 2 diabetes.

Because many people with type 2 diabetes are de-conditioned and over-weight, cardiovascular activity that lasts 20 to 60 minutes at an intensity of 40 to 70 percent of functional capacity is appropriate. Low-intensity activity is adequate to improve insulin action and blood glucose control, and more moderate exercise lessens the likelihood of musculoskeletal or foot injury in de-conditioned diabetics. Exercising frequently, five to seven days per week, maximises calorie expenditure that is necessary to lose weight. We believe continuous steady-rate activity is best over the long-haul.

Type 2 diabetics can also benefit from resistance (strength) training exercise that is of light to moderate intensity. This type of training increases muscle mass, increases insulin action, or decreases insulin resistance. Both cardiovascular and metabolic benefits are gained by resistance training. We believe it is a good idea for you, especially if you are grossly de-conditioned, to build a cardio-respiratory base before initiating a resistance training programme. This recommendation, however, does

not always hold true. We will progress you slowly and monitor you closely by employing both heart rate reading and rating of perceived exertion (RPE*) during each workout. If we are unsure in the slightest, we will always check with your physician or GP beforehand. Increases in intensity will be evaluated in comparison to each individual's tolerance level. No rules are written in stone.

Exercise programme progression

Not all diabetics fall into general guidelines. Many type 2 diabetes programmes for both cardio-respiratory and resistance training closely resemble those of apparently healthy and moderately to highly conditioned adults.

The initial programming for type 2 diabetes requires low intensity and short duration because the individual is often out of shape and overweight. Again, we can't stress enough that every client is an individual with individual wants, needs, likes, and dislikes. You will undoubtedly progress faster or slower than another diabetic client. We take all these factors into account to design the safest and most effective programme possible for you... and only for you. Just as no two people are the same, no two programmes are, or should, ever be the same. We recognise and value your individuality, and we strive to portray this belief in our exercise programme progression and design.



* RPE = Your perception of how hard you work on a scale of 1-10.

Doing it with Power!