

Exercise aids rehabilitation following stroke

[During a stroke](#), the blood supply to the brain is interrupted. In the United States, stroke is the third most common cause of death. Costs related to stroke are expected to reach an estimated \$62.7 billion in 2007, according to statistics from the [Centers for Disease Control and Prevention](#). Risk factors for stroke include high blood pressure, heart disease, atrial fibrillation (irregular, fast heartbeat), high blood cholesterol levels, diabetes, tobacco use, alcohol use, physical inactivity and obesity.

To compare the effects of exercise training and relaxation training following a stroke, a team in the United Kingdom recruited 66 people who could walk, average age 72 years, who completed rehabilitation and did not have significant confusion, dysphasia (speech disorders) or contraindication for exercise. Three times a week for 12 weeks the exercise group engaged in endurance and strength training and the relaxation group practiced attention control.

At the end of the period, results for the timed up-and-go test, walking economy and role-physical score from the [SF-36](#) (problems with work or daily activities) were significantly better for the exercise group. At 7 months, role-physical was the only significant difference between groups.

The researchers concluded that "exercise training for ambulatory stroke patients was feasible and led to significantly greater benefits in aspects of physical function and perceived effect of physical health on daily life."

[SOURCE: Journal of the American Geriatrics Society, 55\(6\):892 \(June 2007\)](#)