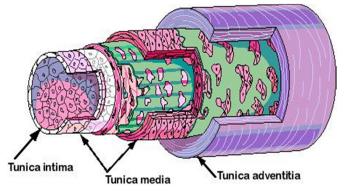
Physical Activity and The Cardiorespiratory System

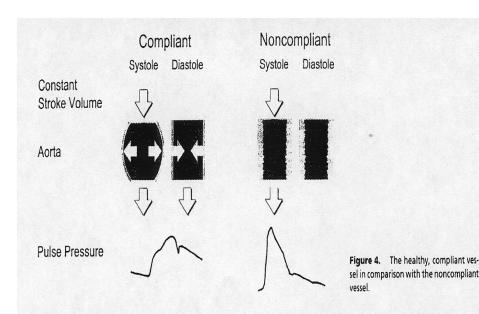
Professor Justin Hall October 21, 2010

Blood Vessel Compliance Changes With Age

Reduced Arterial Blood Vessel Compliance:

- Smooth muscle hypertrophy
- Stiffening connective tissue
 Collagen and fibroblasts





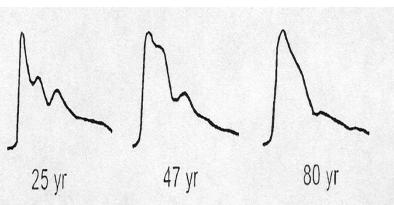
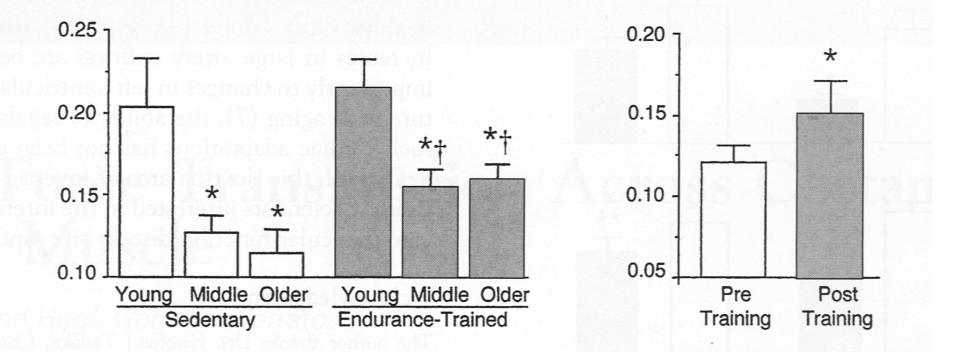


Figure 5. Pulse contour analysis over time shows declining arterial compliance (from McVeigh et al¹⁰).

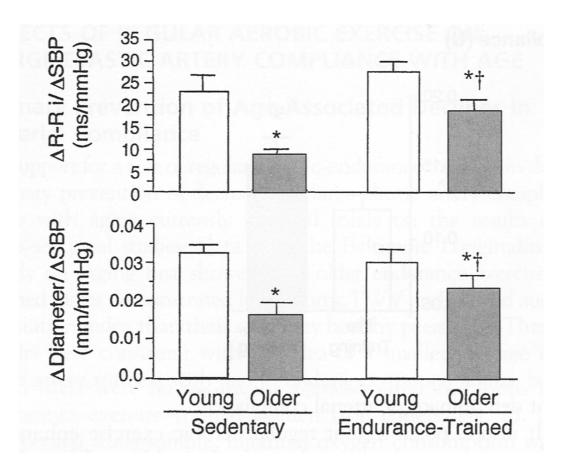
Implication: Elevated Pulse Pressure \rightarrow substantial increased risk for cardiovascular disease and cardiac event

Blood Vessel Compliance: Physical Activity Effect

Carotid Artery Compliance (U)



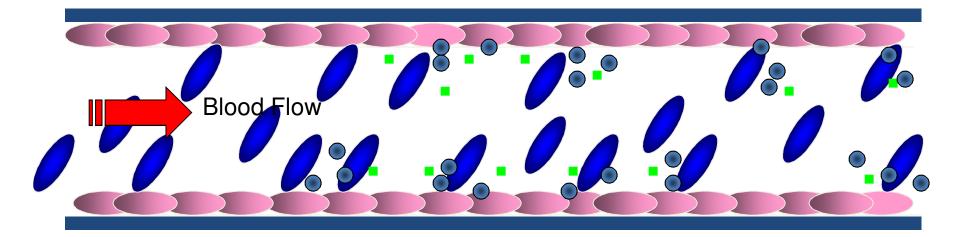
Blood Vessel Compliance: Physical Activity Effect



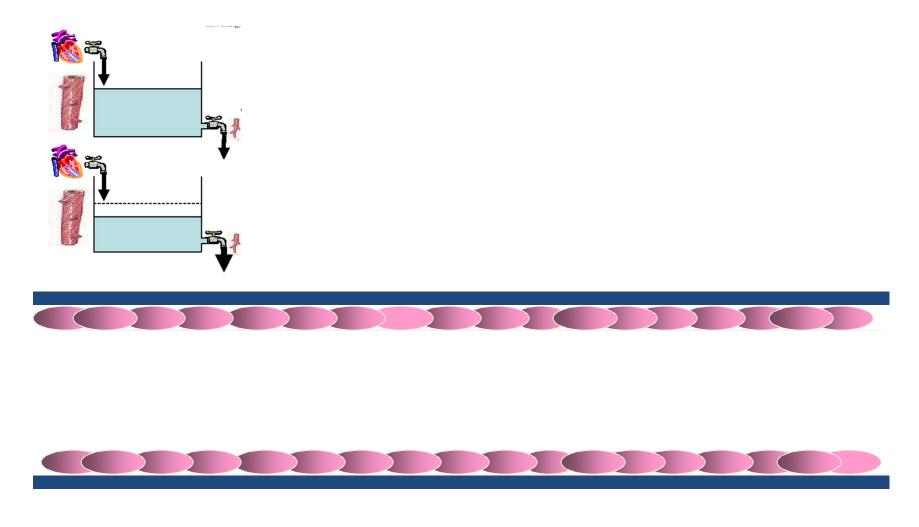
Blood Vessel Endothelium: What Does it Do?

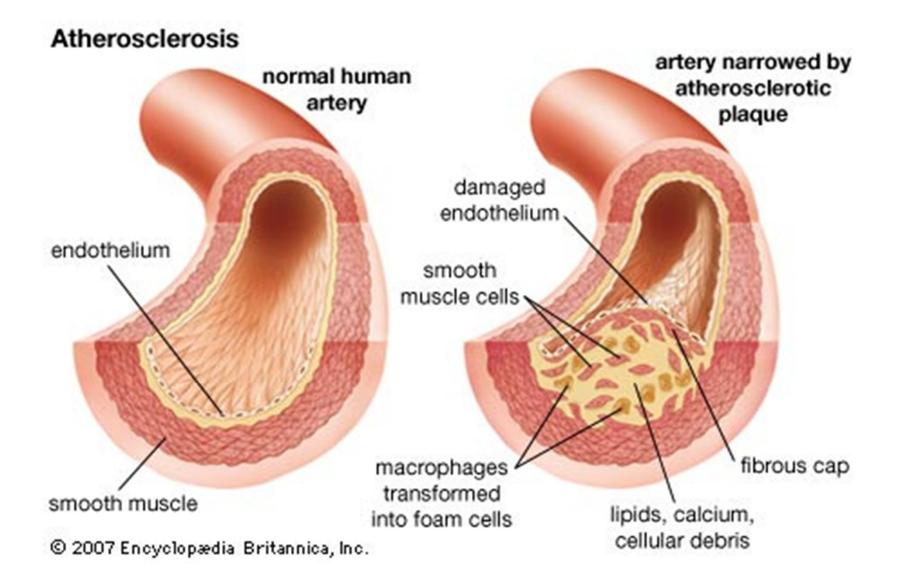
 Endothelial Dependent Flow Mediated Dilation (EDFMD), release of vasoprotective factors

$$= PGI_2$$



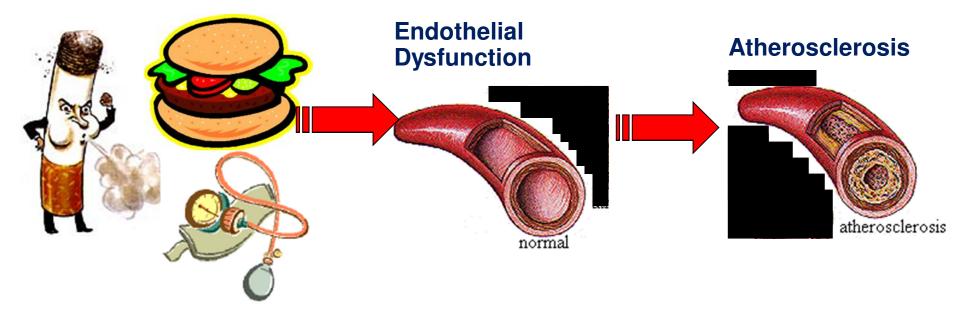
Endothelium Dependent Vasodilation

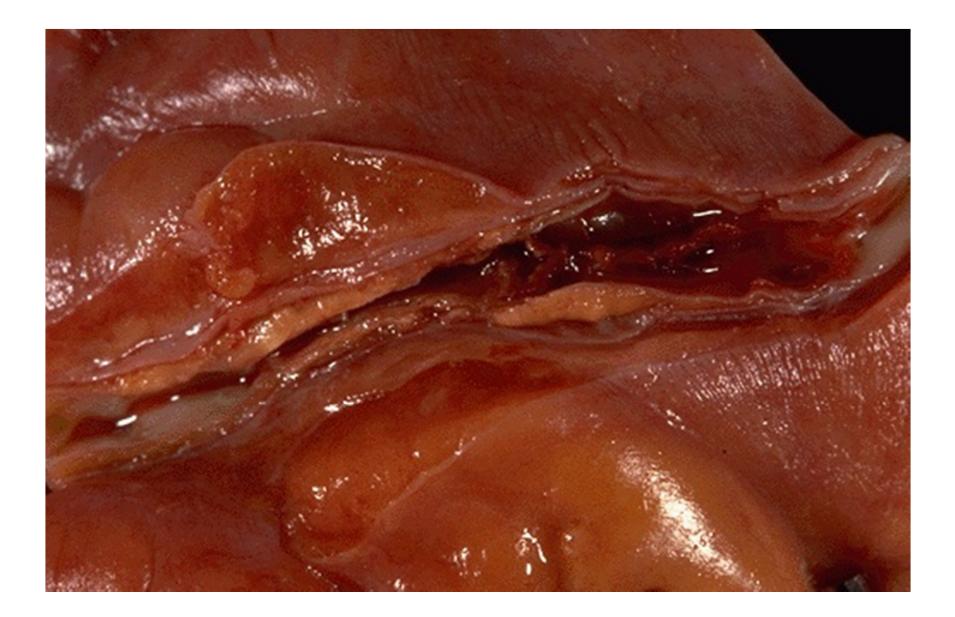




Endothelial Dysfunction

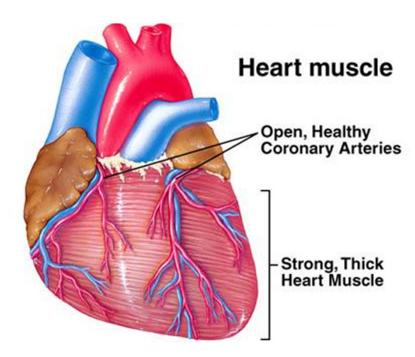
• Endothelial Dysfunction: Impaired ability to dilate in response to a blood flow stimulus or acetylcholine





Physical Activity and the Healthy Heart

- Produces a strong heart muscle
- Promotes good collateral circulation

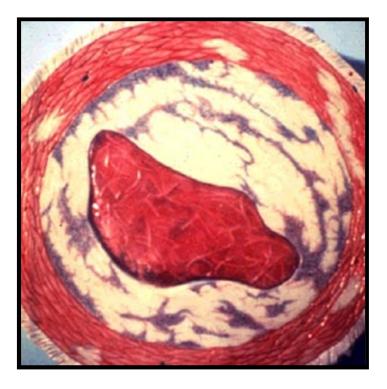


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Coronary collateral circulation

Physical Activity and Atherosclerosis

- Lowers blood lipid levels
- Increases HDL cholesterol (the "good" cholesterol)
- Reduces fibrin deposits (blood coagulation and adhesion of fat molecules to walls of vessels)

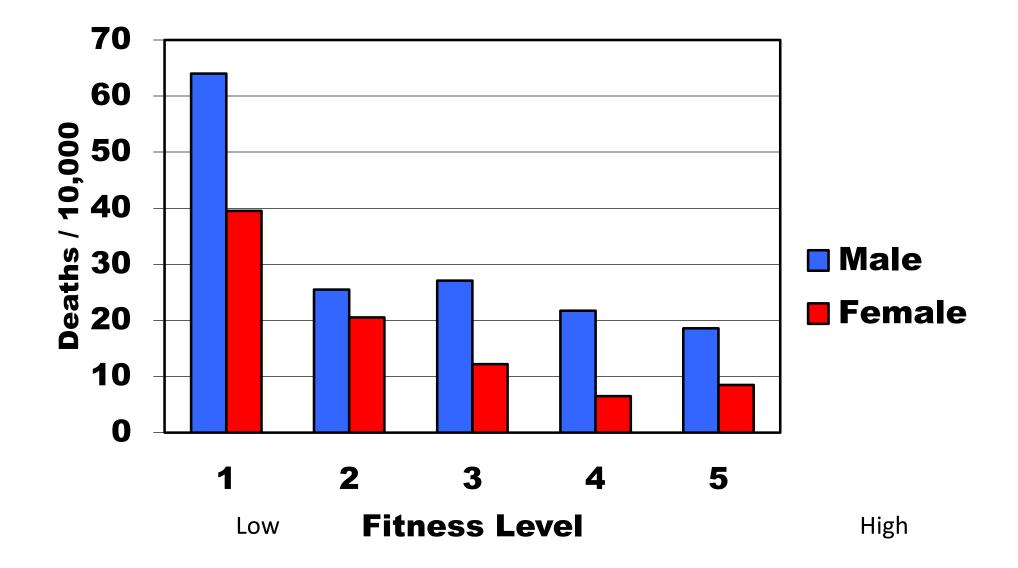


Activity Reduces Coronary Artery Disease Risk

CAD RISK

Level of Physical Activity

CAD Death Rates and Fitness Levels



Physical activity and CAD

- Exercise protects against CAD by:
 - Normalizing blood lipid profile
 - Lowered blood pressure and resting heart rate
 - Improved myocardial circulation and metabolism (protects heart during hypoxic stress)
 - Reduces stress and tension

Physical Activity and Cardiovascular Diseases

Metabolic Syndrome

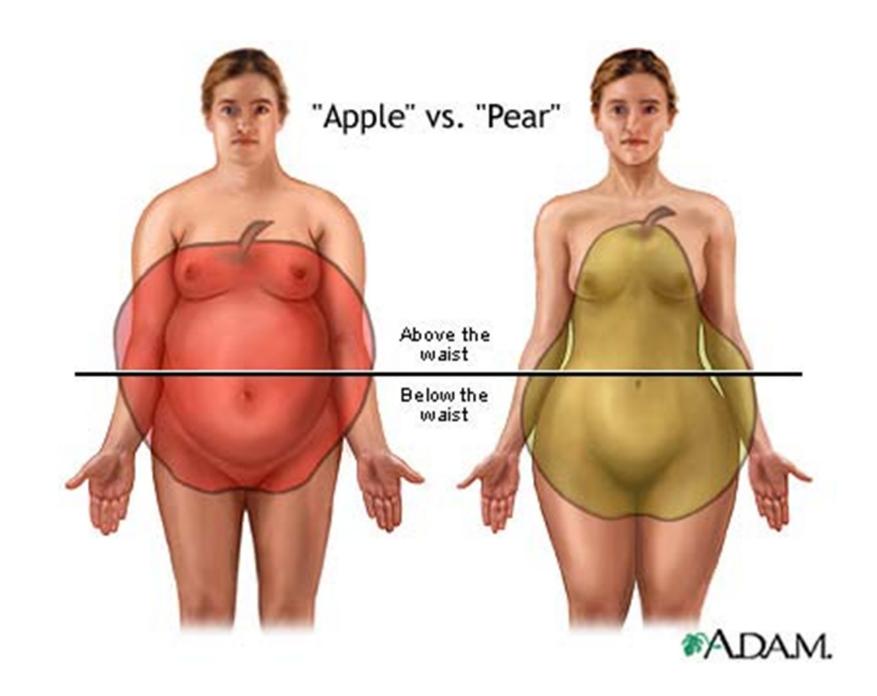
- Clustering of individual conditions or risk factors leading to negative metabolic profile
- Presence of **3 or more** of the following conditions:
 - High fasting blood glucose levels (5.6 mmol/L or higher)
 - High blood pressure (130/85 mmHg or higher)
 - High level of triglycerides (1.7 mmol/L or higher)
 - Low levels of HDL, the "good" blood cholesterol (lower than 1.0 mmol/L in men or 1.3 mmol/L in women)
 - Abdominal obesity [a waist circumference of greater than 102 cm (40 inches) in men and greater than 88 cm (35 inches) in women]

Prevalence

- Affects approximately one in four Canadians
- Varies significantly among ethnic groups; particularly high in Aboriginals
- Due to a steady rise in obesity and an aging population, frequency of metabolic syndrome is expected to increase significantly
- Observed in children and adolescents as well as adults

Complications and Treatment

- May serve as early warning sign for future health problems
- Target and treat individual risk factors to bring them to healthy ranges
- Recommend Weight Reduction and Lifestyle Changes
- No one medication in Canada is indicated to treat the metabolic syndrome



Metabolic Syndrome Summary

Metabolic syndrome (Syndrome X)

- Central obesity
- High blood pressure
- High triglycerides
- Low HDL-cholesterol
- Insulin resistance

