184 - ASSOCIATION BETWEEN THE LEVEL OF PHYSICAL ACTIVITY RCQ AND IMC FOR AGE OF INHABITANTS OF THE CITY OF RIO DE JANEIRO

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INTRODUCTION:

The physical inactivity (*sedentarismo*) represents an important cause of atony, of reduced quality of life and premature death in contemporaries society, particularly in the industrialized countries. Amongst the cardiovascular illnesses, the risk of one occurrence *infarto* in sedentary individuals is two times bigger for sedentary individuals when compared those who are regularly active. Being that if to compare this pointer with the estimate that 60% of the adult population are not enough active, we can conclude that the population risk attributed to the *sedentarismo* becomes an important factor of risk. (NAHAS, 2003)

The *sedentarismo* is related to a life style with little physical activity. This can be measured through the energy expense or great caloric expense that an individual needs to carry through its activities of work and domestic, leisure and locomotion. If this great expense caloric is less than 500kcal per week this individual is classified as sedentary(S) and if the person makes physical activities that accumulate a great expense 1.000kcal per week, it is classified moderately active(MA). The prevalence of overweight and *obesidade* is usually related to little physical activity.

It is a consensus between the professionals of the area of sciences of the sport that the more physically active individuals are healthful or tend to try minors taxes of mortality for degenerative chronic illnesses (BLAIR et al. 1989).

The objective measure of physical activity is of utmost importance to quantify the association between physical activity, health and illness, more than 30 different techniques of mensuração have been used to determine the level of physical activity in adults (HATANO 1993, VOORRIPS 1991, HASKELL 1992, WELLENS 1989, HASKELL and YEE 1993, arroll 1991, gretebeck 1992, dishman 1992, washburn 1990).

OBJECTIVES:

The study had as objective to analyze the association between the level of physical activity, IMC and RCQ in people with age above of 15 years.

METHODOLOGY:

It is a descriptive research of inquiry, with data-collecting without, however, intervening with the study object.

Was used it as research citizens 110 female individuals of the city of Rio De Janeiro.

For analysis of the level of physical activity the short version ofIPAQ (International Questionnaire of Physical Activity) was used as instrument. Used in diverse places, including Brazil, where it was validated in short and long versions (CRAIG, 2003).

The questionnaires were given to the individuals with age above of 15 years, which had to be filled and given back soon after that in the same place.

RESULTS:

The data had demonstrated a greater percentile of active individuals(A) in all the searched age bands. The IMC in the age between 15 and 30 was bigger in the very active(VA) people, and the RCQ, was bigger in active(A) people. Between 30 and 60 years, the IMC and the RCQ were bigger in insufficiently active(IA) people. In people above of 60 years, was found IMC greater in active individuals(A), and bigger RCQ in very active individuals(VA), as we can observe in tables to follow.

Classification	***15-30***	***30-60***	***>60***
Very active(VA)	20 (29.85%)	15 (40.54%)	1 (16.67%)
Active(A)	38 (56.72%)	18 (48.65%)	5 (83.33%)
Insufficiently active **(IA)**	9 (13.43%)	2 (5.41%)	0 (%)
Sedentário(S)	0 (0.0%)	2 (5.41%)	0 (0.0%)

15-30				
	VA	**A**	**IA**	**S**
IMC	22.72 ± 3.14	21.86 ± 3.23	22.41 ± 3.25	±
RCQ	0.77 ± 0.09	0.85 ± 0.46	0.73 ± 0.05	±

It can be observed that VA women between 15 and 30 years, have the IMC higher than A and IA, probably because VA have a higher lean mass. The RCQ of IA women is smallet than A and VA, probably because the IA women have a bigger hip circumference than the individuals of the other categories.

30-60				
	VA	**A**	**IA**	**S**
IMC	25.46 ± 6.24	25.42 ± 5.27	28.84 ± 2.84	--
RCQ	0.81 ± 0.09	0.79 ± 0.07	0.91 ± 0.10	--

It can be observed that the IA women between 30 and 60 years, have IMC higher than the A and VA, probably because they have a higher fat mass. The RCQ of the IA women is greater that the A and VA, because the IA individuals have a bigger waist circumference.

>60				
	VA	**A**	**IA**	**S**
IMC	25.22	25.82 ± 0.90	--	24.44 ± 2.28
RCQ	0.87	0.85 ± 0.05	--	0.79 ± 0.00

It can be observed that the A women above of 60 years, have IMC higher than VA and IA, and the S women have a lesser RCQ, probably for the fact of the sample of individuals in this age band was as well lesser, running away to the rule.

CONCLUSIONS:

Through the analysis of the presented data, it is observed that most of the interviewed women have an active life, what does not mean that they practise any type of physical exercise, since the IPAQ does not considers if the person is or is not an athlete.

The IMC and the RCQ would have to be lesser in individuals VA, what cannot be observed in the carried through research, since IMC and the RCQ, equally to the IPAQ, does not considers if the person is or is not athlete, consequently not considering the fat percentage of the evaluated individual.

Observing the gotten results, we can notice that the IPAQ is not a good instrument for the evaluation, since an activity considered light for not practicing of physical exercise, is well different of an activity considered light for practitioners of physical exercise or an athlete, making this an evaluation of the perception that the individual has exactly of itself, and not of what it really is.

Is also important to stand out that a greater percentile of active individuals is related to the *fulfilment* of the recommendations of walking 3 days/week and 30 minutes for session; moderate activity 3 days/week and 30 minutes for session or vigorous activities 5 days/week and 20 minutes for session. These active and very active individuals demonstrate a practical concern in the regular practice of physical activity and use ways of locomotion and daily activities that favor an active life style consequently acting in the prevention and promotion of the health through the combat to the *sedentarismo* and prevention in the development of degenerative illnesses chronic.

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ASSOCIATION BETWEEN THE LEVEL OF PHYSICAL ACTIVITY RCQ AND IMC FOR AGE OF INHABITANTS OF THE CITY OF RIO DE JANEIRO

SUMMARY: The physical activity is now a priority in the Public Health. One of the declared primordial factors of comment on the physical inactivity, is the prevalence of *sedentarismo* and behaviors of risks to the health, in part, decurrent of the inexistence of one politics of monitoring epidemiologist focusing the exposition of risk behaviors. Where the estimate of insufficiently active brazilian adults would arrive approximately 60%. In Brazil, it is made use of few data on the prevalence of *sedentarismo* in the different ages groups, with this, has a great difficulty to evaluate the behavior how much to the practical one of physical activities due to lack of standardized instruments and with good level of precision for use in population studies and different social and cultural contexts. **Objective:** The study had as objective to analyze and to correlate the level of physical activity, IMC and RCQ of people with age above of 15 years. **Methodology:** It is a descriptive research of inquiry, which had to the data-collecting without, however, intervening with the study object. The study used as citizens 110 female individuals, living of the city of Rio de Janeiro that have above of 15 years. For analysis of the level of physical activity the short versio of IPAQ (International Questionnaire of Physical Activity) was used as instrument. Used in diverse places, including Brazil, where it was validated in short and long versions (CRAIG, 2003). For the calculations of *IMC* (Index of Corporal Mass), the protocol of Quetelet was used and the protocol for calculation of *RCQ (Relação Cintura Quadril)*. The questionnaires were given to the individuals with age above of 15 years, which had to be filled and given back soon after that in the same place. Techniques of descriptive statistics for analysis of the data had been used. **Results:** The data had demonstrated to percentile greater of active individuals in all the searched ages bands. The IMC in the age between 15 and 30 were bigger in the very active people, and the RCQ, was bigger in active people. Between 30 and 60 years, IMC and the RCQ were bigger in insufficiently active people. In people above of 60 years, was found IMC greater in active individuals, and bigger RCQ in very active individuals. **Conclusion:** Through the analysis of the presented data RCQ can be concluded that the association between the level of physical activity, IMC and RCQ does not exist. **Palavras-Chave:** physical activity, IPAC, IMC, RCQ.

LA INVESTIGACIÓN SOBRE NITROGENATES LIMITA LA CONCENTRACIÓN EN EL NIVEL DE PLASMATICS DEL CORREDOR DURANTE UN EJERCICIO DE ALTA INTENSIDAD Y DE LA DURACIÓN LARGA

RESUMEN: La actividad física ahora es una prioridad en la salud pública. Uno de los factores primordiales declarados del comentario sobre la inactividad física, es el predominio del sedentarismo y de comportamientos de riesgos a la salud, en la parte, decurrent del inexistence de una política de supervisar a epidemiólogo que enfoca la exposición de los

comportamientos del riesgo. Donde llegaría la estimación de adultos brasileños escaso activos el aproximadamente 60%. En el Brasil, se hace uso de pocos datos en el predominio del sedentarismo en las diversas categorías de edades, con esto, tiene una gran dificultad para evaluar el comportamiento cómo mucho la práctica de actividades físicas debido a la carencia de instrumentos estandardizados y con el buen nivel de la precisión para el uso en estudios de la población y diversos contextos sociales y culturales. **Objetivo**: El estudio tenía como objetivo para analizar y para correlacionar el nivel de la actividad física, de IMC y de RCQ de la gente con edad arriba de 15 años. **Metodología**: Es una investigación descriptiva de la investigación, que tuvieron que la reunión de datos fuera, sin embargo, interviniendo con el objeto del estudio. El estudio usado como ciudadanos 110 individuos femeninos, el vivir de la ciudad de Río de Janeiro que tienen arriba de 15 años. Para el análisis del nivel de la actividad física el versio corto de IPAQ (cuestionario internacional de la actividad física) fue utilizado como instrumento. Utilizado en los lugares diversos, incluyendo el Brasil, en donde fue validado en las versiones cortas y largas (CRAIG, 2003). Para los cálculos de IMC (índice de Mass corporal), el protocolo de Quetelet fue utilizado y el protocolo para el cálculo de RCQ (Relação Cintura Quadril). Los cuestionarios fueron dados a los individuos con edad arriba de 15 años, que tuvieron que ser llenados y ser dados detrás pronto después eso en el mismo lugar. Las técnicas de la estadística descriptiva para el análisis de los datos habían sido utilizadas. **Resultados:** Los datos habían demostrado al porcentaje mayor de individuos activos en todas las vendas buscadas de las edades. El IMC en la edad entre 15 y 30 era más grande en la gente muy activa, y el RCQ, era más grande en la gente activa. Entre 30 y 60 años, IMC y los RCQ era más grandes en la gente escaso activa. En la gente arriba de 60 años, fue encontrado IMC mayor en individuos activos, y un RCQ más grande en individuos muy activos. **Conclusión:** Con el análisis de los actuales datos RCQ puede ser concluido que no existe la asociación entre el nivel de la actividad física, IMC y RCQ.

Palabras claves: actividad física, IPAC, IMC, RCQ.

LA RECHERCHE AU SUJET DE NITROGENATES BONDIT LA CONCENTRATION DANS LE NIVEAU DE PLASMATICS DU COUREUR PENDANT UN EXERCICE DE L'INTENSITÉ ÉLEVÉE ET DE LA LONGUE DURÉE

SOMMAIRE: L'activité physique est maintenant une priorité dans la santé publique. Un des facteurs primordiaux avoués du commentaire sur l'inactivité physique, est la prédominance du sedentarismo et des comportements des risques à la santé, en partie, decurrent de l'inexistence de l'une politique de surveiller l'épidémiologue focalisant l'exposition des comportements de risque. Là où l'évaluation des adultes brésiliens insuffisamment actifs arriverait approximativement 60%. Au Brésil, c'est fait à utilisation de peu de données sur la prédominance du sedentarismo dans les différentes catégories d'âge, avec ceci, a une grande difficulté pour évaluer le comportement comment beaucoup à la pratique d'activités physiques dues au manque d'instruments normalisés et avec le bon niveau de la précision pour l'usage dans des études de population et de différents contextes sociaux et culturels. **Objectif** : L'étude a eu comme objectif pour analyser et corréler le niveau de l'activité physique, d'IMC et du RCQ des personnes avec l'âge ci-dessus de 15 ans. **Méthodologie** : C'est une recherche descriptive d'enquête, qui a dû le rassemblement des données en dehors, cependant, intervenant avec l'objet d'étude. L'étude utilisée comme citoyens 110 individus féminins, vie de la ville de Rio de Janeiro qui ont en haut de 15 ans. Pour l'analyse du niveau de l'activité physique le versio court d'IPAQ (questionnaire international d'activité physique) a été employé comme instrument. Utilisé dans les endroits divers, y compris le Brésil, où il a été validé dans les versions courtes et longues (CRAIG, 2003). Pour les calculs de IMC (index de Mass corporel), le protocole de Quetelet a été employé et le protocole pour le calcul de RCQ (Relação Cintura Quadril). Les questionnaires ont été donnés aux individus avec l'âge ci-dessus de 15 ans, qui ont dû être remplis et être indiqués en arrière peu ensuite cela dans le même endroit. Des techniques des statistiques descriptives pour l'analyse des données avaient été employées. **Résultats** : Les données avaient démontré au percentile plus grand des individus actifs dans toutes les bandes recherchées d'âges. L'IMC dans l'âge entre 15 et 30 étaient plus grand dans les personnes très actives, et le RCQ, était plus grand dans les personnes actives. Entre 30 et 60 ans, IMC et les RCQ étaient plus grands dans les personnes insuffisamment actives. Dans les personnes ci-dessus de 60 ans, a été trouvé IMC plus grand dans les individus actifs, et plus grand RCQ dans les individus très actifs. **Conclusion :** Par l'analyse des données présentées on peut conclure RCQ que l'association entre le niveau de l'activité physique, IMC et RCQ n'existe pas. **Mots clés** : activité physique, IPAQ, IMC, RCQ.

ASSOCIAÇÃO ENTRE O NÍVEL DE ATIVIDADE FÍSICA RCQ E IMC POR IDADE DE MORADORES DA BARRA DA TIJUCA, ZONA OESTE DO MUNICÍPIO DO RIO DE JANEIRO

RESUMO

A atividade física é agora uma prioridade na Saúde Pública. Um dos fatores primordiais declarados de observação sobre a inatividade física, é a prevalência de sedentarismo e comportamentos de riscos à saúde, em parte, decorrente da inexistência de uma política de vigilância epidemiológica focalizando a exposição de comportamentos de risco. Aonde a estimativa dos brasileiros adultos insuficientemente ativos chegaria aproximadamente a 60%. No Brasil, dispõe-se de poucos dados sobre a prevalência de sedentarismo nos diferentes grupos etários, com isso, há uma grande dificuldade para avaliar o comportamento quanto à prática de atividades físicas devido à falta de instrumentos padronizados e com bom nível de precisão para utilização em estudos populacionais e em diferentes contextos sociais e culturais.

Objetivo: O estudo teve como objetivo analisar e correlacionar o nível de atividade física , IMC e RCQ de pessoas com idade acima de 15 anos. **Metodologia:** É uma pesquisa descritiva de inquérito, devido ao levantamento de dados sem, entretanto, interferir no objeto de estudo. O estudo utilizou-se como sujeitos 110 indivíduos do sexo feminino, moradores da cidade do Rio de Janeiro que tenham acima de 15 anos. Para análise do nível de atividade física foi utilizado como instrumento o IPAQ (Questionário Internacional de Atividade Física) na versão curta. Utilizados em diversos locais, incluindo o Brasil, onde foi validado nas versões curta e longa (CRAIG, 2003). Para os cálculos de IMC (Índice de Massa Corporal), utilizou-se o protocolo de Quetelet e o protocolo para cálculo de RCQ (Relação Cintura Quadril). Os questionários foram entregues aos indivíduos com idade acima de 15 anos, onde deveriam ser preenchidos e entregues logo em seguida no mesmo local. Foram utilizadas técnicas de estatística descritiva para análise dos dados. **Resultados:** Os dados demonstraram maior percentual de indivíduos ativos em todas as faixas etárias pesquisadas. O IMC na faixa etária de 15 à 30 foi maior nas pessoas muito ativas, e o RCQ, foi maior em pessoas ativas. Entre 30 e 60 anos, o IMC e RCQ foram maiores em pessoas insuficientemente ativas. Em pessoas acima de 60 anos, encontrou-se IMC maior em indivíduos ativos, e RCQ maior em indivíduos muito ativos. **Conclusão:** Através da análise dos dados apresentados pode-se concluir que não existe associação entre o nível de atividade física, IMC e RCQ.

Palavras-Chave: atividade física, IPAC, IMC, RCQ.