51 - APTITUDE AEROBICS IN APPRENTICES OF WALK THAT ACCOMPLISH SOLEMNITY PRESCRIPTION OF THE EXERCISE

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Introduction: For the promotion of the regular and healthy practice of the physical activity for the population, it is indispensable that there are an appropriate prescription and accompaniment of the physical exercises. In the prescription it is fundamental to find the best dosage, optimizing the relationship between risk and benefit, in a way that permits the orientation to provide the expected benefits. Not being common to existence of programs of exercise orientation for the population, the apprentices undergo the solemnity-prescription, based on information transmitted by the media. Such information are contestable, because the quality of the orientations that arrive at the lay, most of the time didn't instruct enough and end up creating obstacles for the regular and healthy practice of the physical activity. General **Objectives:** Verify the aerobic aptitude in walk apprentices that accomplish solemnity-exercise prescription. Specific **Objectives:** Measure the levels of aerobic aptitude in the apprentices of the walk; Know and analyze the components of the exercise used in the solemnity-prescription. Research **Questions:** Q1: What is the level of aptitude aerobics in individuals that practice physical exercises without the prescription and the appropriate orientation for the accomplishment of the activity? Q2: The components of the exercise use in the prescription are in agreement with the recommendations found in literature? **Literature Review:** The physical aptitude is considered by NIEMAN (1999) as "a condition in which the individual possesses energy and enough vitality to accomplish the daily tasks and to participate of recreational activities without fatigue". He also tells that the physical aptitude can be related to the sporting abilities and to the health. The physical aptitude related to the health has as components the force and muscular resistance, the flexibility, the corporal composition and the aptitude aerobics, being this the one of direct interest in the study. Relating physical activity and health, PITANGA (2004) tells that "larger levels of practice of physical activities seem to be one of the decisive factors of the health, that by being in the proximities of the positive pole should influence in the improvement of the life quality of the population ". Establishing a direct relationship of the aptitude aerobic with the health, NIEMAN (1999), in agreement with ACSM, mentions that the cardio breathing resistance was related with the health because the people that avoided the aerobic exercises presented a correlation with a larger risk of premature death due to any cause, especially for heart diseases. The aptitude aerobics, also known as capacity cardio breathing, is defined by FERNANDES FILHO (2003) as "the ability to accomplish physical activities of dynamic character that involve great muscular mass that goes from moderate intensity to high discharge for lingering periods(...) it is dependent of the functional state of the systems breathing, cardiovascular, muscular and your physiologic-metabolic relationships (...) and he/she refers to the functional capacity of your absorption systems, transport, gives and use of oxygen for the fabrics during the physical exercises". Demonstrating the relation of the physical conditioning and health, ACSM (1999) tells: physical conditioning related to health concerns the capacity that your heart, your sanguine vases, your lungs and your muscles have to resist to the daily tasks and, occasionally, to unexpected physical challenges with the minimum of fatigue and discomfort. Relating the aptitude aerobics and the risk of cardiovascular mortality, NEGRÃO and BARRETO (2005) demonstrated that the low aptitude is associated directly to the high death risk by cardiovascular and coronary disease. They also show that larger indexes of capacity aerobics were linked to the reduction of the risk factors incidence for cardiovascular disease. Considering exercise prescription, ARAÚJO is mentioned (2000), and defines: "the technique of the exercise prescription is the successful integration of the exercise science with behavior techniques that result in adhesion to the long term programs and materialization of the individual objectives". The prescription should contain four components that are mentioned by WILMORE and COSTILL (2001): "the exercise prescription involves four basic factors: the type of the exercise, the frequency of the participation, and the duration of each exercise period and the period intensity of the exercise ". Defined the factors, we mentioned the orientations suggested by the ACSM apud NIEMAN (1999), that recommend aerobic exercises as the walk, the race, the cyclism, the swimming, the dance among other, as the exercise type; the weekly frequency from 3 to 5 times a week, preferentially in most of the week days; from 20 to 60 minutes of exercise session duration; with an intensity range from 50 to 85% of the maximum heart frequency, estimated by the calculation: 220 - age. Considering the solemnity-prescription a risk for the health, because it can be qualified like an inadequate orientation, POLLOCK and WILMORE, (1993) demonstrating the importance of the appropriate prescription of exercises, tell that: the prescription of exercises wrong or erroneous advising can provoke a muscular stress or to articulate unjustified and/or pains, besides other orthopedic problems, fatigues excessive and precipitation risk of a heart attack (...). Most of the told incidents happened due (...) to the incorrect prescription of exercises, to the inadequate supervision (...)". POLLOCK and WILMORE (1993) mentioned that "the people can vary a lot their conditions of health and physical conditioning, structure, age, motivation and needs; consequently, an individual approach is recommended in terms of exercises prescription ". About the importance and the need to prescribe and to guide in a correct way the exercises, GHORAYEB and BARROS (1999) tell that, "the individuals begin the physical activity with incorrect orientation or without any orientation type. The physical exercise should be prescribed for the intended results, and if it is above the limits, it can result in risks of orthopedic lesions or of cardiovascular complications¨. **Methodology:** This research was characterized as a traverse study, accomplished with 42 walk apprentices, all of the feminine gender, with age group from 23 to 56 years, that were divided in age groups for the analysis. The data were obtained through a handbook of personal data (name, age, date of birth, gender, main occupation, diseases, and use of medicines and data of the exercise prescription regarding components, the weekly frequency and duration of the session. The type of the exercise is the walk and each apprentice's intensity was established individually, each one establishing a rhythm subjectively stipulated as appropriate for itself); a record of data collection (necessary data for the calculation of VO2 max, as, (1) time of the test; (2) heart frequency in the end of the test; (3) weight; and transcribed of the handbook of personal data, (4) the age and (5) the gender); and in the application of the Mile Test (Kline, 1987). The analysis of the data was made through analytic-descriptive statistics, analyzing and comparing the data among the age groups and also independent of the age, using the percentage, average and standard deviation (SD) of the indicators. **Results and Discussion:** The analyses will be made starting from the indicators of VO2 max. measured for the application of the Test of Mile The classification of the aerobic apprentices' condition is based on the table inserted in the protocol of the Mile Test, mentioned by NAHAS (2001). The age group from 20 to 29 years (9 apprentices, 22% of the total) came with the largest levels of aptitude aerobics. Most (77%) is within the advisable strip. Other 23% are in athletic condition. In this group, none of the apprentices is classified with low aptitude or in risk condition for the health. This conditioning level can also be favored by the age, being this a decisive factor of the VO2 max rates. In the group from 30 to 39 years (15 apprentices, 35% of the total), begins to appear the cases within risk condition (6%) and it low aerobic aptitude (20%). Still in this group, most is in the advisable strip of conditioning (60%), and 14% present athletic condition. In the group from 40 to 49 years (11 apprentices, 26% of the total), 9% of the apprentices are in risk condition and other 9% are with low aerobic aptitude. Most of the apprentices

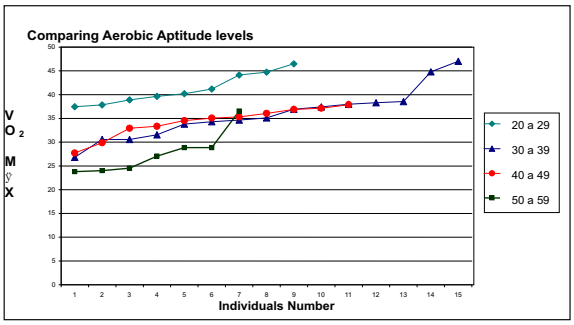
of this age group also are inside of the advisable strip (64%). Present athletic condition 18% of the participants. The proportion of aerobic conditioning of these two age groups (30 to 39 and 40 to 49) are plenty similar, being different the proportions of the other ages. The apprentices from 50 to 59 years (7 apprentices, 17% of the total) presented the smallest indexes of aerobic conditioning. Most of the apprentices (43%) are in risk condition. Among all the participants, 14 % presented low aptitude. This means that most of this age group doesn't train enough to promote benefits for your health. WILMORE and COSTILL (2001) tell that "a minimum threshold for the frequency, duration and intensity of the exercise should be reached before any aerobic benefit is obtained ". The other apprentices of this group, 29% are in the advisable strip and 14% are in athletic condition. In this group is noticed a decline of the aerobic conditioning. Such effect can be linked to the case of this group to present the highest age group among all the groups, but "that a significant ratio of the deterioration attributed to the age can be explained by the tendency of the people to exercise less as they get old". (NIEMAN, 1999)

Aerobic Aptitude Ratio Classification

Classification\Groups	20 a 29	30 a 39	40 a 49	50 a 59	Proporção de Aptidão
Athletic Condition	23%	14%	18%	14%	16% (7)
Advisable Strip	77%	60%	64%	29%	60% (25)
Low Aptitude	0%	20%	9%	14%	12% (5)
Risk Condition	0%	6%	9%	43%	12% (5)

***Table 1** : Shows also the aptitude ratio without consider the age. The number between parentheses indicates the total of apprentices in each case. Classification (Nahas, 2001).*

According to Table 1, most of the apprentices of the 3 younger groups are in the advisable strip of aptitude aerobics. Just the group from 50 to 59 years has most of your apprentices in risk condition. In all the groups they are apprentices in athletic condition. Above the 30 years cases of risk condition appear and it lowers aptitude. The group from 20 to 29 years just presented conditioning in the highest classifications, in the advisable strip and in the athletic conditioning. Making the analysis without considering the age, it is verified that most presents aerobic conditioning in the advisable strip for the health, reaching index of 60% of the cases. Other 16% are considered athletically conditioned. About 24% of the cases call our attention. There is 12% of the total with low aptitude and other 12% are in risk condition. So, approximately 1/4 of the apprentices seem not practice enough exercise to acquire the benefits of the physical activity, turning evident the correction needing and adaptation of the exercise prescription. Probably, a simple increment of the intensity is enough to alter this picture of indicators of aptitude aerobics, improving the apprentices' conditioning, because the analyzed data of the components of the exercise prescription used by the apprentices, demonstrates the factors duration and weekly frequency inside of the suggested recommendations. ¨There is a strong relationship dose-answer between the amount of physical activity and the protecting effect, being the risk decreased as the activity is increase "(GHORAYEB and BARROS, 1999). In the comparison of the levels of VO2 max. rates among the groups, demonstrated in the Graph 1, it is noticed a distinction of the group from 20 to 29 years to the others, a likeness of indicators among the groups from 30 to 39 years and from 40 to 49 years; and a new distinction of the group from 50 to 59 years with an apprentice standing out from the others. Those differences among the groups don't mean that an entire group is better conditioned than the other. Analyzing the indicators individually, it is verified in many cases, that women of a group with more age present a higher VO2 max. ratio than women of another younger group. These over positions of indicators can suggest an aerobics changeable condition. Aerobics satisfactory Conditioning presented in a certain age can be insufficient in subsequent ages. This is due to the people's fact to lose capacity aerobics due to the age and also for the inactivity, as tells POLLOCK and WILMORE (1993) in some longitudinal studies, revealed a lineal reduction in the VO2 max rates with the age, and seems to be a less significant fall per year in active individuals if compared to the sedentary ones. This can happen in case the individuals don't follow an appropriate orientation and prescription of exercises for an acquisition of a larger level of VO2 max. rates and its consequent maintenance, because "most of the training is lost inside a relatively short period of time after it is suspended". (FOX et al, 1991)



Graphic 1: Shows the VO_2 max rates of the apprentices. It is noticed the individual indicators level and its comparison with other apprentices and the level between the age group.

Table 2 shows the VO_2 max ratio of the groups, where can be noticed that people in an older age group may present higher indicators that younger walkers.

Age Group	20 a 29 years	30 a 39 years	40 a 49 years	50 a 59 years
Apprentice		**VO_2 max**		
1	37,45	26,80	27,74	23,78
2	37,86	30,56	29,85	24,01
3	38,90	30,57	32,94	24,52
4	39,64	31,54	33,34	27,07
5	40,19	33,80	34,53	28,83
6	41,17	34,30	35,08	28,84
7	44,12	34,64	35,32	36,53
8	44,74	35,11	36,04	
9	46,48	36,94	36,89	
10		37,42	37,15	
11		38,00	37,87	
12		38,29		
13		38,55		
14		44,81		
15		47,02		
Average ± SD	**41,17 ± 3,21**	**35,89 ± 5,28**	**34,25 ± 3,12**	**27,65 ± 4,47**

Table 2: Shows the number of apprentices of each age group and respective VO_2 max. Rates. Also presents the average and Standard Deviation reached by group.

In the rising of data accomplished in the research, referring to the components of the exercise, the practice of the walk is defined as the exercise type, activity this previously defined for the research bound itself. In relation to the weekly frequency, all the age groups are within the suggested recommendations. The data on Table 3 demonstrate an average non inferior to 4 weekly sessions of walk. The age group that presented the largest average was the one from 40 to 49 years, with 5,37 weekly sessions SD± 1,59. As to the duration of the session, the groups are also framed in the orientations, and in some cases, are above the suggested recommendations. The lowest average found among the groups is 57 minutes for session, according to data on Table 2.

Age Group (years)	Weekly Frequence (sessions/week)	Session Duration (minutes, hundredths of min.)
20 a 29	4,77 ±1,92	66,25 ±21,99
30 a 39	4,53 ±1,79	57,27 ±16,63
40 a 49	5,37 ±1,59	70,62 ±23,66
50 a 59	4,33 ±1,21	57,00 ±6,70

Table 3: *Shows referring data to average and Standard deviation of weekly frequency (weekly session) an d session duration* (minutes, hundredths of min.) *, divided by age group.*

For characterizing as a traverse study, was not possible to verify the intensity of the exercise stipulated by the apprentices, because it would be necessary to accompany and to discover the heart frequency reached in the exercise or to apply the subjective sensation of effort for a appropriate space time to calculate the intensity average, being able to esteem the intensity reached in the exercise. In case it was chosen a question of the questionnaire, the obtained answer it would be a subjective evaluation and could not be expressed in values, what would not have validity as form of evaluation of the exercise intensity. This way, is considered that the intensity just corresponds to a comfort state in the accomplishment of the exercise, what cannot be enough for the acquisition of an aerobics satisfactory aptitude, considered inside of an advisable level for the health. Evidencing the importance of the appropriate exercise prescription, NODARI JÚNIOR (2005) in a study that tried to investigate variations in the indicators of the aptitude aerobics in apprentices of aerobic exercise, with certain intensity for the subjective sensation of effort or percentile of maximum heart frequency, was verified difference among the two prescriptions, and the prescription based on 70% of the maximum heart frequency presented an adult and significant variation of VO2 max. rates in relation to the other prescription, demonstrating this way, the needing of a correct prescription of exercises. In spite of most of the apprentices present a satisfactory condition of aptitude aerobics, the orientations and the professional accompaniment are recommended in all ages. **Conclusion:** In relation to the aerobic conditioning, most of the apprentices of the 3 younger groups are in the advisable strip of aptitude aerobics. Just the group from 50 to 59 years has most of your apprentices in risk condition. In all the groups the apprentices are in athletic condition. Above the 30 years the cases of risk condition appear and their aptitude is lower. In such cases, the apprentices seem not practice exercise enough to acquire the benefits of the physical activity, turning evident the correction needing and adaptation of the exercise prescription. In relation to the components of the exercise, the practice of the walk is defined as the exercise type, activity this previously defined for research bound itself; as to the weekly frequency, all the age groups present an average non inferior to 4 weekly sessions; in relation to the duration of the session, the lowest average found among the groups is 57 minutes per session. As there is no parameter for measure the intensity, it could be considered as a comfort state in the accomplishment of the exercise and it is probable that the intensity is the decisive factor in the cases of risk condition and low aptitude aerobics found in the test. In spite most of the apprentices present a satisfactory condition of aptitude aerobics, the orientations and the professional accompaniment are recommended in all ages. In this population in specific, it seems to be indispensable starting from the 30 years, being this, the age group where cases of aptitude aerobics appear below the advisable for the health, possibly caused by the solemnity-prescription of exercises. Before the exposed, it is evident the need of accompaniment of the population physically active, and for that, to accomplish researches trying to know pertinent data to the exercise, as aptitude aerobics, corporal composition, forces and muscular resistance, flexibility, risk factors and other, making possible to qualify the support to the exercise.

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APTITUDE AEROBICS IN APPRENTICES OF WALK THAT ACCOMPLISH SOLEMNITY PRESCRIPTION OF THE EXERCISE

Summary

Objective: In order to characterize the profile of the aerobic aptitude in walk apprentices who accomplish exercise solemnity prescription. **Method:** It is a traverse study, accomplished with n=42, of the feminine gender, age group from 23 to 56 years, they were divided in age groups. The data were obtained through handbook of personal data, data collection record and in the application of the Mile Test (Kline, 1987). The analysis was made through descriptive statistics, using the percentage, average and standard deviation of the indicators. **Results:** The practice of the walk is defined as the exercise type, and it is defined for the research bound itself; as to the weekly frequency, all the age groups present an average non inferior to 4 weekly sessions; considering the duration of the session, the lowest average found among the groups it was 57 minutes for session. There was not parameter for measure the intensity, which could be considered as a comfort state in the accomplishment of the exercise. It is probable that the intensity is the decisive factor in the cases of risk condition and low aptitude aerobics found in the test. As to the aerobic conditioning, most of the apprentices of the 3 younger groups are in the advisable strip of aptitude aerobics. The group from 50 to 59 years has most of their apprentices in risk condition. In all the groups there are apprentices in athletic condition. Above the 30 years cases of risk condition appear and the aptitude is decreased, according to data presented on Table 1. In such cases, the apprentices seem not exercise enough to acquire the benefits of the physical activity, turning evident the correction needing and adaptation of the exercise prescription.

Classification\Age Group	20 a 29	30 a 39	40 a 49	50 a 59
Athletic Condition	23%	14%	18%	14%
Advisable Strip	77%	60%	64%	29%
Low Aptitude	0%	20%	9%	14%
Risk Condition	0%	6%	9%	43%
Average/SD VO_2 max.	41,17±3,21	35,89±5,28	34,25±3,12	27,65±4,47

Table 1*: Demonstrate aerobic aptitude ratio and the average and SD of VO_2 max. (ml/kg/min^{-1}) related to the apprentices age. Classification (Nahas, 2001).*

Conclusion: In spite most of the apprentices present a satisfactory condition of aptitude aerobics, the orientations and the professional accompaniment are recommended in all the ages. A larger attention seems to be indispensable starting from the 30 years, being this, the age group where cases of aptitude aerobics appear below the advisable strip for the health, possibly caused by the solemnity prescription of exercises. Probably, an increment of the intensity is enough to alter this picture of aptitude aerobics indicators, improving the apprentices' conditioning.

Key words: Physical Activity, Aerobic Aptitude, Exercise Prescription.

L'APTITUDE AÉROBIQUE DANS APPRENTIS DE PROMENADE QUI ACCOMPLIT PRESCRITION DU MOI MEMÊ DE L'EXERCICE

Le résumé

L'objectif: Caractériser le profil de l'aptitude aérobique de apprentis de la promenade qui accomplissent prescrition du moi memê de l'exercice. La méthode: C'est une étude de la traverse, a accompli avec n=42, du sexe féminin, tranche d'âge de 23 à 56 années, ils ont été divisés dans les tranches d'âge. Les données ont obtenu au moyen de formulaire de données personnel, dossier de collection de données et dans la candidature de l'Épreuve de Mille (Kline, 1987). L'analyse a été faite au moyen de statistiques descriptives et utilise le pourcentage, moyenne et déviation standarde des indicateurs. **Les résultats**: L'entraînement de la promenade est défini comme le type de l'exercice, et il est défini pour le propre delimitação de la recherche; avec rapport à la fréquence hebdomadaire, toutes les tranches d'âge présentent un non moyen inférieur à 4 sessions hebdomadaires; par rapport à la durée de la session, la moyenne la plus basse trouvée parmi les groupes est de 57 minutes pour session. Il n'y avait pas paramètre pour évaluation l'intensité, pourrait être considéré comme un état du confort dans la réalisation de l'exercice. C'est vraisemblable que l'intensité est le facteur décisif dans les cas de condition du risque et d'aérobique de l'aptitude basse trouvée dans l'épreuve. Avec rapport à l'aérôbico de la climatisation, la plupart des apprentis des 3 plus jeunes groupes rencontrent dans la bande recommandée d'aérobique de l'aptitude. Le groupe de 50 à 59 années a la plupart de ses apprentis dans condition du risque. Dans tous les groupes ils rencontrent des apprentis dans condition athlétique. Au-dessus des 30 cas des années de condition du risque paraissez et il baisse l'aptitude, d'après données de Tabela1 heures. Dans tel emballe, les apprentis ressemblent pour ne pas exercer assez pour acquérir les avantages de l'activité physique et tournent évident le besoin de la correction et adaptation de la prescription de l'exercice.

les lassification\Age en	**20 a 29**	**30 a 39**	**40 a 49**	**50 a 59**
La Cor**ghiompeth**létique	23%	14%	18%	14%
La Bande recommandée	77%	60%	64%	29%
L'Aptitude basse	0%	20%	9%	14%
Risquez la Condition	0%	6%	9%	43%
Average/SD VO_2 max.	41,17±3,21	35,89±5,28	34,25±3,12	27,65±4,47

Table 1: Démontrez proportion de l'aptitude aérobique et la moyenne et SD de VO2 maximum. (ml/kg/min -1) a été en rapport avec l'âge des apprentis. La classification (Nahas, 2001)

La conclusion: Dans rancune la plupart des apprentis présentent une condition satisfaisante d'aérobique de l'aptitude, les orientations et l'accompagnement professionnel sont recommandés dans tous les âges. Une plus grande attention paraît être commencer indispensable des 30 années et est ceci, la tranche d'âge où emballe d'aérobique de l'aptitude paraît en dessous la bande recommandée pour la santé, peut-être causée par la prescription de la solennité d'exercices. Probablement, une augmentation de l'intensité est assez pour changer cette image d'indicateurs de l'aérobique de l'aptitude et améliore la climatisation des apprentis.

Les mots de la clef: L'Activité physique, Aptitude Aérobique, Prescription de l´exercise

APTITUD AERÓBICA EN PRACTICANTES DE CAMINADA QUE REALIZAN AUTOPRESCIPCIÓN DE EJERCICIO

Resumen:

Objetivo: Caracterizar el perfil de la aptitud aeróbica en practicantes de caminada que realizan autoprescripción de ejercicio. **Método:** Es un estudio transversal, realizado con n=42 (cuarenta y dos), del género femenino, rango entre 23 (veintitrés) a 56 (cincuenta y seis) años, fueron divididos por rango de edad. Los datos obtenidos por medio de fichero de datos personales, ficha de colecta de datos en la aplicación del "Teste de Milha" (Test de Milla) (Kline, 1987). El análisis fue obtenido por medio de estadística descriptiva, utilizando el porcentaje, medio y desvío patrón de los indicadores. **Resultados:** La práctica de caminada es definida como el tipo de ejercicio y está definida por la propia delimitación de la

investigación; cuanto a la frecuencia semanal, todos rangos presentan un promedio no inferior a 4 (cuatro) sesiones semanales; en relación al tiempo de la sesión, el promedio menor encontrado entre los grupos es de 57 (cincuenta y siete) minutos por sesión. No hubo parámetro para mensurar la intensidad, podendo ser considerada un estado de bienestar en la realización del ejercicio. Es probable que la intensidad sea el factor determinante en los casos de condición de riesgo y de la baja aptitud aeróbica encontrado en el test. Cuanto al condicionamiento aeróbico, la mayoría de los practicantes de los 3 (tres) grupos mas jóvenes se encuentra en la faja recomendable de aptitud aeróbica. El grupo entre 50 (cincuenta) y 59 (cincuenta y nueve) años de edad posee la mayor parte de sus practicantes en condición atlética. Arriba de los 30 (treinta) años surgen casos de condición de riesgo y baja aptitud, según datos de la Tabla 1. En tales casos, los practicantes parecen no se ejercitar lo suficiente para adquirir los beneficios de la actividad física, tornando evidente la necesidad de corrección y adecuación de la prescripción del ejercicio.

Casificación/rango	20 a 29	30 a 39	40 a 49	50 a 59
Condición atlética	23%	14%	18%	14%
Faja recomendable	77%	60%	64%	29%
Baja aptitud	0%	20%	9%	14%
Condición de riesgo	0%	6%	9%	43%
Promedio / DP VO2 máx.	41,17±3,21	35,89±5,28	34,25±3,12	27,65±4,47

*Tabla **1**: Demuestra las proporciones de la aptitud aeróbica y el promedio y DP del VO2 máx. (ml / kg / min -¹) en relación a la edad de los practicantes. Clasificación (Nahas, 2001)*

Conclusión: A pesar de la mayoría de los practicantes presentaren una condición satisfactoria de aptitud aeróbica, las orientaciones y el acompañamiento profesional son recomendados en todas las edades. Una atención mayor parece ser indispensable a partir de los 30 (treinta) años de edad, siendo éste el rango donde surgen casos de aptitud aeróbica abajo de la recomendable para la salud, posiblemente causados por la autoprescripción de ejercicios. Probablemente un incremento de la intensidad sea suficiente para alterar este cuadro de indicadores de aptitud aeróbica mejorando el condicionamiento de los practicantes.

Palabras-clave: Actividad física, Aptitud aeróbica, Prescripción de ejercicios

APTIDÃO AERÓBICA EM PRATICANTES DE CAMINHADA QUE REALIZAM AUTOPRESCRIÇÃO DO EXERCÍCIO

Resumo

Objetivo: Caracterizar o perfil da aptidão aeróbica em praticantes de caminhada que realizam autoprescrição do exercício. **Método:** É um estudo transversal, realizado com n=42, do gênero feminino, faixa etária de 23 a 56 anos, foram divididas em grupos etários. Os dados obtidos por meio de prontuário de dados pessoais, ficha de coleta de dados e na aplicação do *Teste de Milha* (Kline, 1987). A análise foi efetuada por meio de estatística descritiva, utilizando a porcentagem, média e desvio padrão dos indicadores. **Resultados:** A prática da caminhada é definida como o tipo de exercício, e está definida pela própria delimitação da pesquisa; quanto à freqüência semanal, todas as faixas etárias apresentam uma média não inferior a 4 sessões semanais; em relação à duração da sessão, a média mais baixa encontrada entre os grupos é de 57 minutos por sessão. Não houve parâmetro para mensurar a intensidade, podendo ser considerada como um estado de conforto na realização do exercício. É provável que a intensidade seja o fator determinante nos casos de condição de risco e de baixa aptidão aeróbica encontrados no teste. Quanto ao condicionamento aeróbico, a maioria das praticantes dos 3 grupos mais jovens se encontra na faixa recomendável de aptidão aeróbica. O grupo de 50 a 59 anos tem a maior parte de suas praticantes em condição de risco. Em todos os grupos se encontram praticantes em condição atlética. Acima dos 30 anos surgem casos de condição de risco e baixa aptidão, conforme dados da Tabela1. Em tais casos, as praticantes parecem não se exercitar o suficiente para adquirir os benefícios da atividade física, tornando evidente a necessidade de correção e adequação da prescrição do exercício.

Classificação\Faixa Etária	20 a 29	30 a 39	40 a 49	50 a 59
Condição Atlética	23%	14%	18%	14%
Faixa Recomendável	77%	60%	64%	29%
Baixa Aptidão	0%	20%	9%	14%
Condição de Risco	0%	6%	9%	43%
Média/DP VO_2 máx.	41,17±3,21	35,89±5,28	34,25±3,12	27,65±4,47

***Tabela 1**: Demonstra as proporções de aptidão aeróbica e a Média e DP do VO_2 máx. (ml/kg/min $^{-1}$) em relação à idade das praticantes. Classificação (Nahas, 2001).*

Conclusão: Apesar da maioria das praticantes apresentarem uma condição satisfatória de aptidão aeróbica, as orientações e o acompanhamento profissional são recomendados em todas as idades. Uma atenção maior parece ser indispensável a partir dos 30 anos, sendo esta, a faixa etária onde surgem casos de aptidão aeróbica abaixo da recomendável para a saúde, possivelmente causados pela autoprescrição de exercícios. Provavelmente, um incremento da intensidade seja suficiente para alterar este quadro de indicadores de aptidão aeróbica, melhorando o condicionamento das praticantes.

Palavras-chave: Atividade física, aptidão aeróbica, prescrição de exercício.