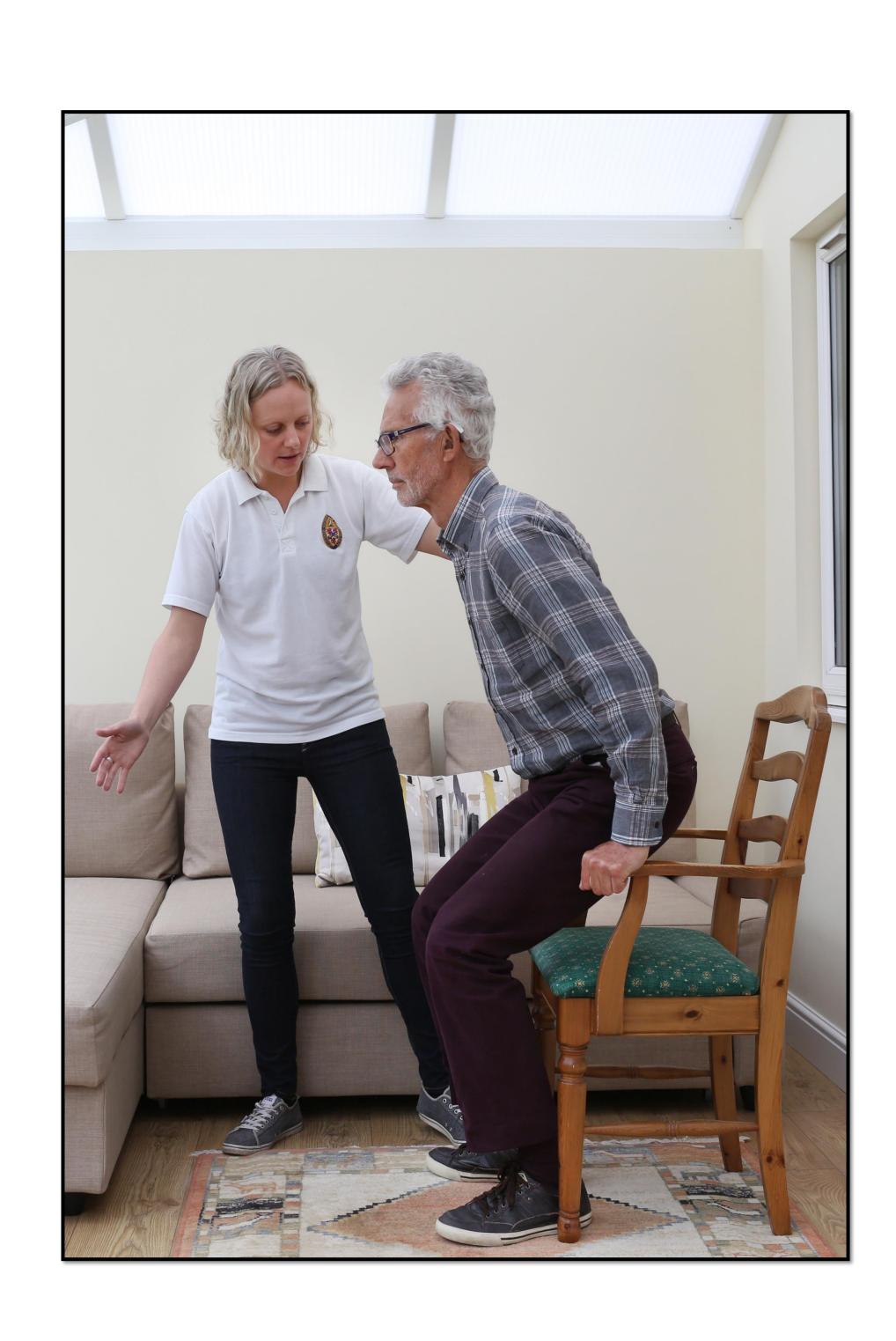






Adherence to Exercise and Physical Activity Interventions in Older People with Cognitive Impairment and Dementia: A Systematic Review

Claudio Di Lorito, Alessandro Bosco, Vicky Booth, Sarah Goldberg, Rowan H. Harwood and Veronika Van der Wardt University of Nottingham, United Kingdom





What we know

- Physical exercise generates multiple benefits for people with dementia, including improvements in functioning, independence and quality of life, and reduced risk of falls and hospitalization
- Benefits are greatest when people with dementia report greater adherence to exercise interventions



What we did

- This review aimed to determine, in the context of exercise interventions for people with dementia:
- How adherence is defined
- Adherence rates at the end of the active intervention period
- Characteristics of interventions associated with adherence



How we did it

- Seven
 databases were
 searched
- 41 studies were included
- Studies were rated for quality and risk of bias
- Data were imported on SPSS and analyzed through correlation / inferential studies



What we found

- Adherence was defined as "Maintaining an exercise regime for a prolonged period of time, following the initial adoption phase"
- Overall adherence rates at the end of the intervention was 70% (SD=21)
- Interventions associated with higher adherence were endurance / resistance training, shorter and lower intensity training, and group delivery (as opposed to individual delivery)

The conclusions of our research

- > Adherence was consistently defined across studies, but it was sparsely reported how adherence to intervention programmes was monitored
- > With 70% adherence at the end of the intervention period, it is unlikely that physical exercise interventions reach the full effects they intend to achieve, particularly long-term
- Additional adherence support strategies (e.g. individual supervision, involvement of carers) are needed