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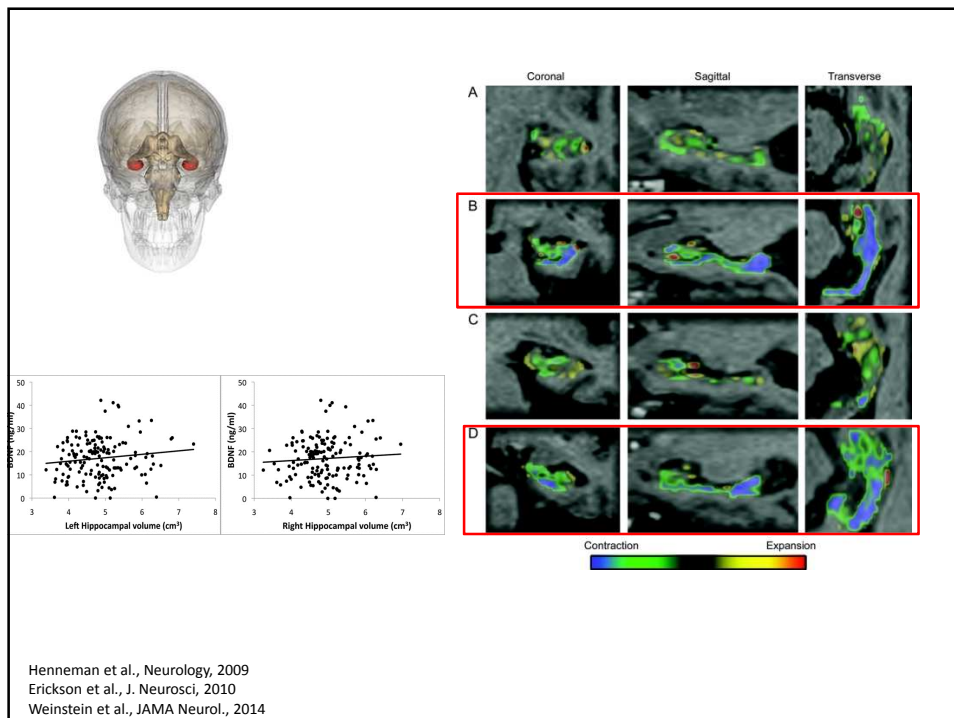


The key to life is balance

Körperliches Training als Interventionsstrategie bei neurokognitiven Störungen?

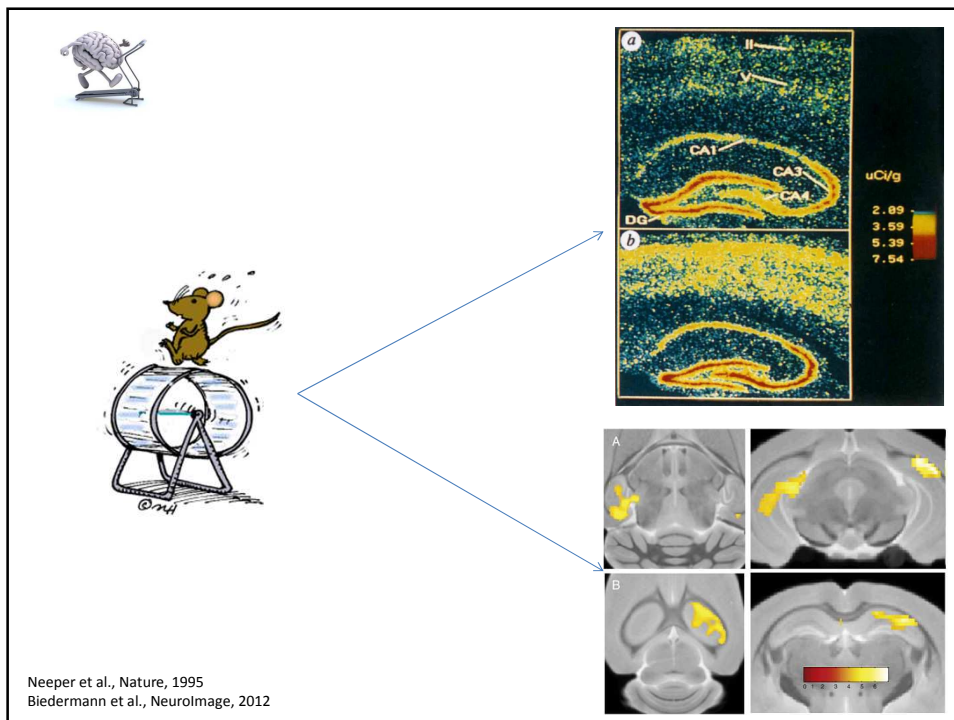
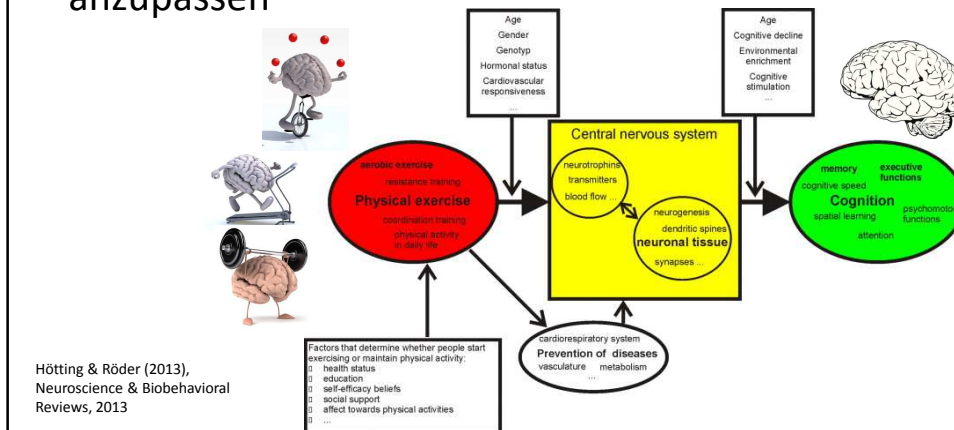
Nico Lehmann

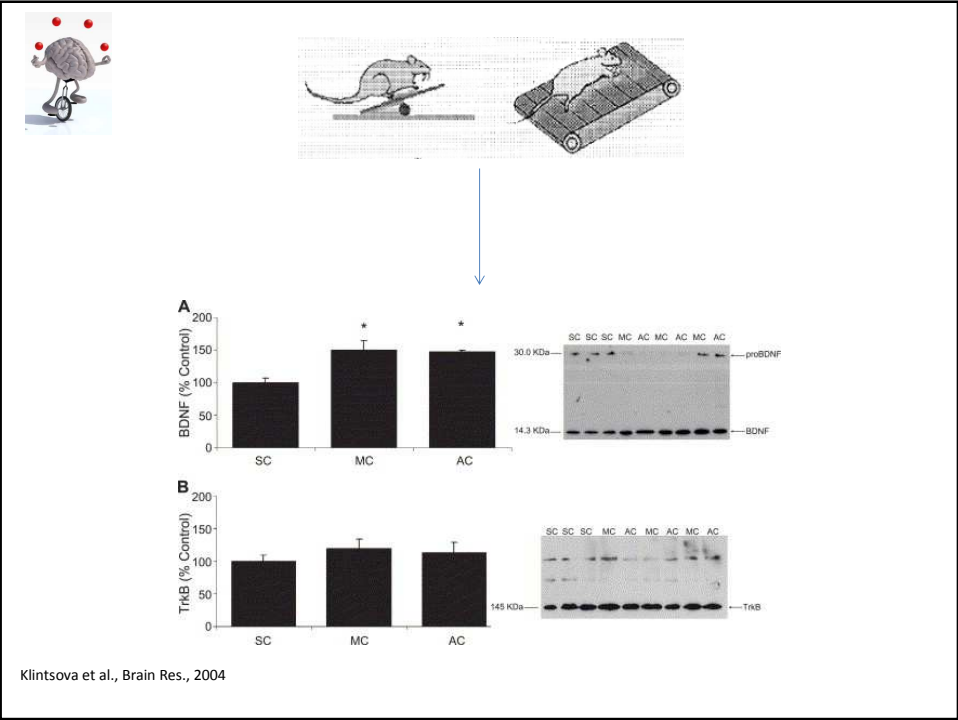
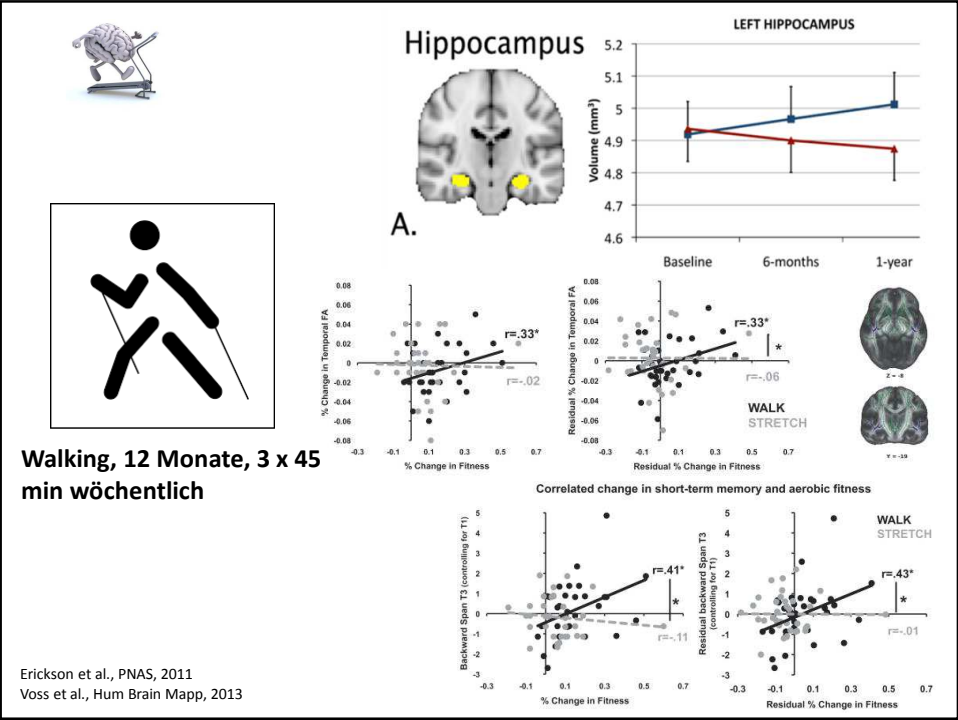
UniFR, Einheit Bewegungs- und Sportwissenschaften



Neuroplastizität

- **Neuroplastizität = lebenslange Fähigkeit** des ZNS, sich an veränderte Bedürfnisse anzupassen

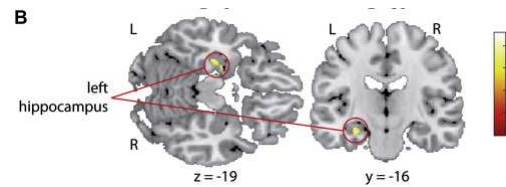
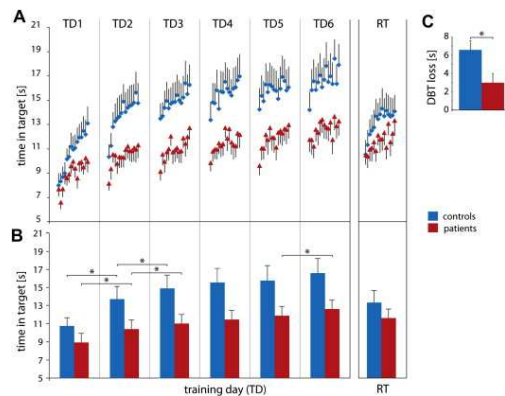






**Gleichgewichtstraining
über 6 Wochen; je 1
Trainingseinheit à 45 min**

Sehm et al., Neurobiol. Aging, 2014



Positive Effekte auf Kognition

frontiers
in Human Neuroscience

[Front Hum Neurosci](#) 2011; 5: 26.
Published online 2011 Mar 17; doi: [10.3389/fnhum.2011.00026](#)

PMCID: PMC3062100

Cardiovascular and Coordination Training Differentially Improve Cognitive Performance and Neural Processing in Older Adults

[Claudia Voelcker-Rehage](#)^{1,*}, [Ben Godde](#)¹ and [Ursula M. Staudinger](#)¹

Journal of
Aging and Physical Activity
Official Journal of ICAPA
[www.JAPA-Journal.com](#)
SCHOLARLY REVIEW

Effect of Resistance-Exercise Training on Cognitive Function in Healthy Older Adults: A Review

Yu-Kai Chang, Chien-Yu Pan, Feng-Tzu Chen, Chia-Liang Tsai, and Chi-Chang Huang

Article | [OPEN](#)

Balance training improves memory and spatial cognition in healthy adults

[Ann-Kathrin Rogge](#), [Brigitte Röder](#), [Astrid Zech](#), [Volker Nagel](#), [Karsten Hollander](#), [Klaus-Michael Braumann](#) & [Kirsten Hötting](#)

Scientific Reports 7, Article number: 5661

Received: 29 March 2017

Impact of Antipsychotic Review and Nonpharmacological Intervention on Antipsychotic Use, Neuropsychiatric Symptoms, and Mortality in People With Dementia Living in Nursing Homes: A Factorial Cluster-Randomized Controlled Trial by the Well-Being and Health for People With Dementia (WHELD) Program

Clive Ballard, M.D., Martin Orrell, F.R.C.Psych., Sun YongZhong, Ph.D., Esme Moniz-Cook, Ph.D., Jane Stafford, Ph.D., Rhiannon Whittaker, C.Sci., Bob Woods, F.B.Ps.S., Anne Corbett, Ph.D., Lucy Garrod, B.Sc., Zunera Khan, B.Sc., Barbara Woodward-Carlton, Jennifer Wenborn, Ph.D., Jane Fossey, D.Psych.

Objective: This study evaluated the impact of antipsychotic review, social interaction, and exercise, in conjunction with person-centered care, on antipsychotic use, agitation, and depression in people with dementia living in nursing homes.

Method: A cluster-randomized factorial controlled trial with two replications was conducted in people with dementia in 16 U.K. nursing homes. All homes received training in person-centered care. Eight homes were randomly assigned to antipsychotic review, to a social interaction intervention, and to an exercise intervention for 9 months, with most homes assigned to more than one intervention. The primary outcome measures were antipsychotic use, agitation, and depression. Secondary outcome measures were overall neuropsychiatric symptoms and mortality.

Results: Antipsychotic review significantly reduced antipsychotic use by 50% (odds ratio 0.17, 95% confidence interval [CI] 0.05 to 0.60). Antipsychotic review plus the social interaction intervention significantly reduced mortality (odds

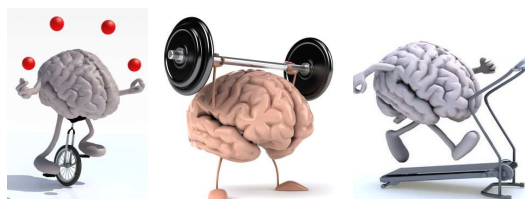
ratio 0.26, 95% CI 0.13 to 0.51) compared with the group receiving neither. The group receiving antipsychotic review but not the social intervention showed significantly worse outcome in neuropsychiatric symptoms compared with the group receiving neither (score difference +7.37, 95% CI 1.53 to 13.22). This detrimental impact was mitigated by concurrent delivery of the social intervention (-0.44, CI -4.39 to 3.52). The exercise intervention significantly improved neuropsychiatric symptoms (-3.59, 95% CI -7.08 to -0.09) but not depression (-1.21, CI -4.35 to 1.93). None of the interventions had a significant impact specifically on agitation.

Conclusions: While reductions in antipsychotic use can be achieved by using a "real world" intervention, this may not be of benefit to people with dementia in the current climate of more judicious prescribing unless nonpharmacological interventions such as social interaction or exercise are provided in parallel.

Am J Psychiatry 2016; 173:252–262; doi: 10.1176/appi.ajp.2015.15010130

Take-home messages

- Anpassungsfähigkeit des Gehirns bleibt ein Leben lang bestehen
- Trainingsempfehlungen
 - Inhalte: Ausdauer, Kraft, Koordination/Gleichgewicht, Beweglichkeit
 - Häufigkeit: zwei bis drei Mal pro Woche, während mindestens drei Monaten



Kunz et al., PPH: Zeitschrift für Psychiatrische Pflege heute, 2015