## Test spots exercise risks

## Over 45, other groups should be screened

T IS extremely difficult to identify persons who may be fatally a tricken during exercise. Neither superior litness, regular exercise participation, nor the absence of cardiac risk factors guarantees profection against an exercise death.

Two important clues, however,

guarantees protection against an exercise death.

Two important clues, however, have emerged.

• Cardiovascular complications during exercise are often preceded by warning symptoms, including chest or stomach pain.

• A very low HDL-cholesterol the good form of cholesterol has also been shown to be a potential indicator of increased exercise risk.

Heart Association's Committee on Exercise, "The risk of strenuous exercise in the sedentary population may be minimized or perhaps even cilminated through proper preliminary testing and the individualized prescribing of exercise programs."

Although exercise stress testing is widely recommended and extremely useful to establish the safety of vigorous exercise participation, the test is not infallible. Normal exercise test responses have sometimes occurred in persons who subsequently experienced complications during exercise initiations, coupled with the millions of Americans now exercising, suggest that it is impractical to use exercise testing as a routine screening procedure for all persons sharting exercise programs.

ACORDINICHY, THE American College of Sports Medicine recommends stress tests only for selected exercisers, based on age, risk factors, and the presence of disease:

• Apparently healthy individuals at or above age 45.

• Individuals at or above age 3 with at least one of the following risk factors: high blood pressure, chosteroic, disperties smoking, aborrently response to the second of the collection of the second age 50; and diabetes mellitus.

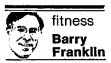
## Pamphlet aids teen parents

A new pampliet that helps teen parents manage their lives and the lives of their born and unborn habies has been published by Oakland Community College.

"Break the Pattern," available from local school districts, OCC campuses and social service agencies, aims to help young parents avoid lives of poverty, welfare and dependence. It has nine pages of addresses and telephone numbers for such services as counseling, legal, financial aid, residence halls.



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Individuals at any age with known heart, lung, or other disease.

RECOMMENDATIONS to reduce the incidence of cardiovascular complications during exercise include:

• Insure medical clearance and follow-up, including exercise testing for "high risk" adults and patients with heart disease. Although the need for routine exercise testing in all physically active persons has been questioned, exercise testing

Maintain a mild-to-moderate intensity exercise program. The lower the exercise intensity, the less likely it is that a complication will occur. Moreover, a reduced training intensity may be compensated for by increasing the exercise duration or franciscing.

increasing the exercise duration or frequency.
You exercise program should not be preceived as more than "somewhat hard." As a general rule of thumb, if you cannot carry on a conversation comfortably during activity, you are probably working too hard.

• Seek medical advice if heart rhythm irregularities are detected or exertional symptoms occur. Warning symptoms include stomach

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 Emphasize appropriate warm and cool-down procedures. A Emphasize appropriate warm, up and cool-down procedures. A gradual warmup (e.g., comfortable walking or mild tension bleycling) may decrease the occurrence of serious heart irregularities that can occur with sudden strenuous exer-

tion.

A cool-down, involving continued slow movement after vigorous exercise, reduces the possibility of post-exercise lightheadness and related consequences.

lated consequences.

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