

Perspective

Life Style Interventions for Management of Type 2 Diabetes

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DESCRIPTION

Lifestyle interventions are recommended as first-line treatment for diabetes in all age groups. However, little is known about the effectiveness of lifestyle interventions in older adults with diabetes. Lifestyle interventions improve glycemic control and age-related outcomes in older adults with diabetes and comorbidities. In senior citizens (65+), there is high prevalence of diabetes is strongly associated with increased obesity and physical inactivity in old age, a serious public health concern.

Obesity exacerbates age-related declines in metabolism and physical function, leading to frailty. However, weight loss therapy in older adults is controversial due to concerns that weight loss may exacerbate underlying sarcopenia and frailty and that attempting lifelong changes in diet and exercise habits may lead to stress and anxiety. Weight loss is difficult and interventions that are effective in young adults cannot be assumed to be applying to older adults with diabetes, low muscle mass, and frailty. In addition, therapeutic approaches may differ between young adults and the elderly, as it is becoming increasingly important to prevent the loss of lean body mass that accompanies weight loss in older adults. Older adults are at risk for diabetes due to lifestyle changes and reported that a combination of weight loss and regular exercise resulted in the greatest improvement in physical function. Lifestyle measures improved insulin sensitivity and other cardiometabolic risk factors, but sustained improvements in insulin sensitivity were only achieved when weight loss was combined with regular exercise. Therefore, a combination of weight loss and exercise regimens may decrease the metabolic and functional complications in older adults at risk of diabetes. However, it is not established whether such lifestyle interventions are effective in specific older populations with diabetes and related comorbidities. Older adults with diabetes were restricted to relatively healthy. Due to directly applicable clinical trial data on

lifestyle interventions for older adults with diabetes, current treatment recommendations are based on recommendations. The prevalence of type 2 diabetes continues to increase steadily as more people live longer and grow heavier. Older adults (65 years) with diabetes are at risk of developing a similar spectrum of microvascular complications. They are also at increased risk of functional impairment and other common geriatric syndromes such as cognitive impairment, depression, urinary incontinence, falls, and persistent pain. Healthier lifestyle intervention programs delivered by primary health services have been shown to be feasible and effective for people at high risk of type 2 diabetes. Over the past decade, Norwegian health authorities have encouraged local governments to set up services for people with unhealthy lifestyles, highlighting the need to prevent type 2 diabetes. The Community lifestyle intervention program is recommended to be based on the theoretical approach.

Older people are especially vulnerable to diabetes. As people age, they need fewer calories, but many continue to eat the same way they did when they were younger, which results in weight gain. Older people tend to exercise less, which is another risk factor for type 2 diabetes. However older adults with diabetes are very motivated to change lifelong habits. They had excellent compliance with the intervention, showed significant weight loss. Physical activity is considered a cornerstone in the management of Type 2 diabetes and refers to any bodily movement produced by skeletal muscle that requires the consumption of energy. In people with type 2 diabetes, participation in regular exercise has been shown to improve glycaemic control, reduce diabetes-related complications, and improve quality of life. Physical fitness is described as the ability to perform physical activity and activities of daily life effectively at various stages within a person's lifecycle. Health-related physical fitness is defined as cardiopulmonary fitness, muscle strength, flexibility, and body composition.

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