

THE SANOGEN AND THE CORPORAL POSTURE

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Abstract: This article presents some general aspects that are based on an ongoing study on the choice of therapeutic swimming as a primary means of recovering or rehabilitating postural physical deficiencies in children during growth and development.

Introduction: The etiology of functional deficiencies is very varied and widely discussed in the literature, some authors note that etiologic factors can act directly on the spine, causing deformities and deviations of various types and may affect other segments or anatomical structure of the body, causing an imbalance static and dynamic, transmitted from stage to stage to the coliforms. [1]

Except for those deficiencies that are of congenital or infectious etiology (polio, tuberculosis, rheumatic, genetic) in the period of growth and development, there are times that are favorable to postural posture instability due to postural growth, its detection must be as early as possible to prevent aggravation and, implicitly, structuring. Methods of evaluation and identification of spine deficiencies are known and accepted by the majority of specialists, annual check-ups are carried out in school and family doctors, all forms of control over children are carried out, and yet the number of scoliosis, cifoscolioses is in an alarmingly high number. [3,4]

More recent studies highlight the aspects of the etiopathogenicity of the physical deficiencies of the spine, both those are triggered and maintain the state of pathological conflict, as well as the genetic factors incriminated by various authors. The author Jianu M. states that the vicious positions adopted by children in school and office are completely wrong, because scoliosis occurs more in girls than in boys, and the period of the first signs of deformation occur at prepubertal age and not at younger age when temperamental children is likely to engage in incorrect positions.

On the other hand, it agrees with the etiopathogenesis of the other authors, grouping the etiology of scoliosis into intrinsic factors: genetic;

the role of the orthostatic position; rash anomaly; the role of the intervertebral disc and extrinsic factors: the role of melatonin; the role of blood platelets; role and nervous system; the role of paravertebral muscles and the influence of osteoporosis. [2]

Recognizing and appreciating the sanogenic qualities of swimming on the human body by health professionals and those in the field of physical culture recommends swimming as a primary means of preventing and correcting functional spinal functional deficiencies such as cystosis, lordosis, scoliosis and combinations of them. [5, 6].

Material and Method: In order to highlight this aspect of the personality of the persons involved in the growth and deactivation of the children, namely the parents and the specialists in education and health, we made their questioning about the phenomenon of installation of the spine deficiencies and their achievements in order to manage them . There were two questionnaires, one from the parents and one for the specialists in the field. I have selected the questions regarding the use of swimming as a way of recovering the spine deficiencies.

The question relates to the activities that children want to do to maintain the state of health at an optimal level, graphic representation in the figure 1.

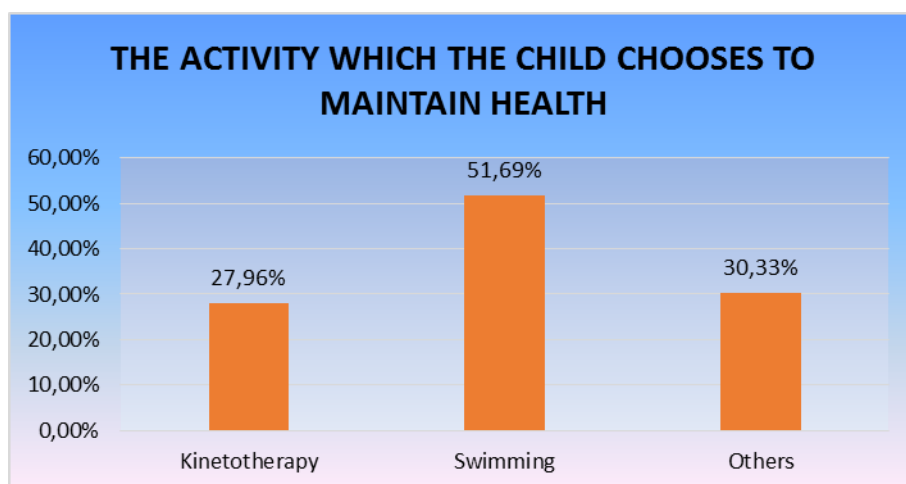


Fig.1 Graphic representation of the activity the child prefers

The answers to the final questionnaire in the questionnaire where the parents' choices about the physical activities to be carried out by their children were: 51.69% swimming, 30.33% other sports and surprising kinetotherapy 27.96%.

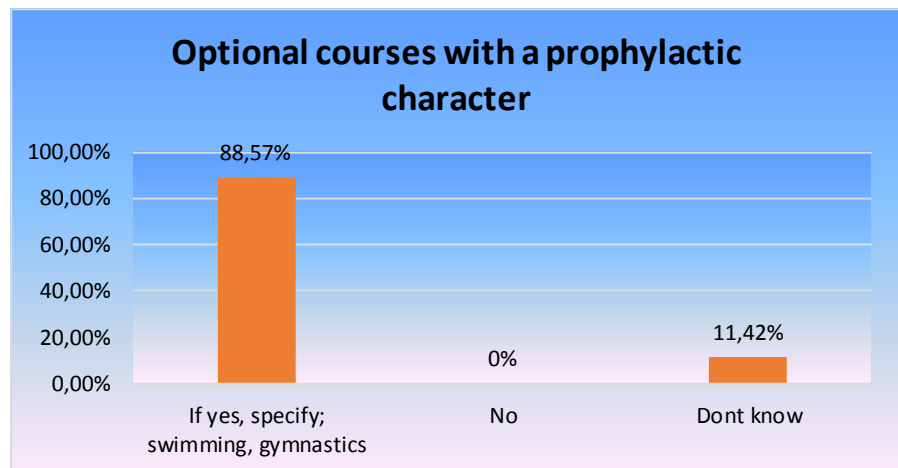


Fig.2 Graphic representation of the prophylactic character of sports

Swimming along with gymnastics is required to be implemented in existing programs to optimize the growth and development process and, implicitly, to prevent functional physical deficits. The percentage of 88.57% for question no.14 figure.2.23 and 85.71% for question 15 figure 2, where swimming is the main means required is a solid argument in support of the on-going study.

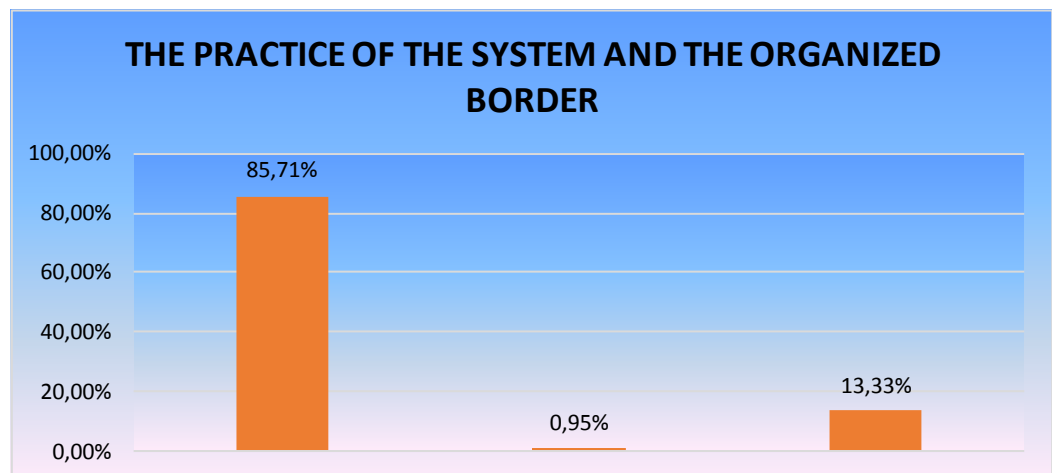


Fig.3 Graphic representation of swimming practice

It is highlighted in Fig. 3 that swimming is accepted by most specialists as the main method of preventing the establishment of functional deficiency in the spine in prepubertal children.

For swimming to be used as a prophylactic method in maintaining a correct body posture, all aspects that may disrupt postural stability and also the specific technical features of swimming can help to optimize the maintenance of a correct body posture.

The implementation of the somatoscopic observation method on an extended sample of 500 prepubertal pupils (11-13 years), 6th and 7th grade, girls and boys, was one of the important points of our experiment, alongside by questioning those involved in managing their growth and development process.

The data on postural deficiencies found in the scientific study demonstrated that, out of the total of subjects observed (500), 115 develop vicious postural attitudes in the spine, which is 23% - practically one in five children develops vicious postural attitude.

For an objective reasoning of the established scientific approach, namely the use of swimming as a prophylactic form for the management of vicious postural attitudes in the spine in prepubertal children (11-13 years), I started an investigation based on questioning and observing a sample of subjects who practice occasional swimming as a form of recreation or relaxation, as well as those who practice sports performance swimming.

Tabel nr.1. Centralizator cu deficiențele constatate la copiii 11-13 ani care practică înotul (n=100)

Centralized table with results of somatoscopic observations made to children who practice swimming and were found with poor postural attitudes.			
Age 11-13 y.o	Since when practicing swimming / media	how many hours of swimming are taking place per week / average	Postural attitude deficient body
practice occasionally swimming	74 children / average 2 years of practice	1.5 hours a week	8 cases
performance swimmer	26 children / average 3.4 years of practice	12 hours per week	3 cases

Results and Discussions:

It can be seen that the percentage difference of the cases of children with postural deficiency of the spine in children who practice swimming is much lower 11% compared to a percentage of 23% that was found in children who do not practice swimming. Of the 11 cases of children with a postural deficit, 6 cases were scoliotic attitudes, which confirms once again that scoliosis tends to become the main deficient postural attitude that needs to be followed up and managed.

It should be noted that the deficiencies observed in children who practice swimming did not have their debut during swimming practice, they were developed before swimming. Swimming was recommended as a form of treatment and recovery of body posture.

Conclusions:

- The incidence of physical deficiencies of the spine that starts and develops in prepubertal children is 1 to 5 (23%).
- For children who practice swimming, the percentage is 11% of the sample examined;
- The therapeutic swimming is required as a means of recovery in the postural deficiency of the spine by more than 80% of those interviewed.

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ÎNOTUL SANOGEN ȘI POSTURA CORPORALĂ

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Cuvinte cheie: înot, sănătate, exercițiu, postura

Abstract: Acest articol prezintă unele aspecte generale ce au la bază, un studiu aflat în derulare, cu privire la alegerea înotului terapeutic ca mijloc principal în vederea recuperării sau reabilitării unor deficiențe fizice posturale la copii în perioada de creștere și dezvoltare.