Physical (in)activity and cognition in older people with mild to severe cognitive impairment

Physical activity is good for muscle strength and body, but it is also good for cognition, especially for executive functions (EF). These are higher cognitive functions such as planning, inhibition and cognitive flexibility which are important for (independent) functioning in daily life. Both muscle strength and cognitive functioning decline with normal aging, but this decline and the risk of dementia can be reduced by physical activity throughout life. On the other hand, (sustained) inactivity has a negative effect on physical functioning and cognition. Older people with an inactive lifestyle, which often occurs in residential care or nursing homes, show a faster cognitive decline than active older people. Once people are diagnosed with mild cognitive impairment or mild dementia, regular walks can still be effective in reducing the decline in EF. Walking is an example of physical activity that many older people still can do, with or without walking aid. Of course there are many other activities, such as chair assisted exercises. These exercises are of comparable intensity as walking and can also be performed in a group which requires less supervision. Because physical activity has a positive effect on inhibition, it may decrease agitation and pain as well. To take care for residents of a nursing home it is not only necessary to give them a good night sleep, drinks and three meals a day, but we should also reduce the level of physical inactivity.