

Review Article

Using Essentrics to Improve the Health of Older Adults

Emilia Patricia T Zarco^{1*}, Amy McGorry², Michele Aquino¹ and John Petrizzo¹

¹Health and Sport Sciences, Adelphi University, Garden City, NY, USA

²Health Sciences, Long Island University, Brookville, NY, USA

Abstract

Essentrics, like Tai Chi, is a low to moderate impact exercise activity that is suitable for older adults. The exercise may offer the benefits of increased strength, flexibility, functional mobility, enhanced balance and relief for chronic pain. It may improve the health of older adults including those dealing with chronic diseases, decreased mobility and aerobic capacity. The benefits of Essentrics and the ease and ability to perform the routine at home promotes exercise participation and increased physical activity levels. The purpose of this article is to describe the techniques associated with Essentrics and explain the potential health benefits for older adults.

Keywords: Active life/Physical activity; Aging; Quality of life; Prevention

Introduction

Regular physical activity is vital for healthy aging. The US Centers for Disease Control and Prevention states that it helps delay, prevent, or manage many costly, chronic diseases and may reduce the risk of premature death [1]. Despite these benefits, the America's Health Rankings Analysis of the 2019 CDC Behavioral Risk Factor Surveillance System (2022) reports that only 23.1% of Americans 65 years and older met the federal physical activity guidelines which is 150 minutes of moderate or 75 minutes of vigorous aerobic activity and two days of muscle strengthening per week in the past 30 days. Furthermore, physical inactivity, defined as participating in no activity beyond baseline activities of daily living, [1] increases with age. The CDC [2,3] reports inactivity is prevalent among 25.4% of adults aged 50-64 years, 26.9% in those aged 65-74 years, and 35.3% among those aged ≥ 75 years.

***Corresponding author:** Emilia Patricia T Zarco, Health and Sport Sciences, Adelphi University, Garden City, NY 11530, USA, Tel: +1 5168773346; E-mail: zarco@adelphi.edu

Citation: Zarco EPT, McGorry A, Aquino M, Petrizzo J (2022) Using Essentrics to Improve the Health of Older Adults. J Gerontol Geriatr Med 8: 122.

Received: February 09, 2022; **Accepted:** February 15, 2022; **Published:** February 22, 2022

Copyright: © 2022 Zarco EPT, et al. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

The American College of Sports Medicine (ACSM), the American Heart Association (AHA) and the US Health and Human Services (HHS) provide the most widely recognized guidelines for health-related physical activity and exercise programs for older adults. The recommendations between these organizations are similar and include participation in the following: 1. Cardiorespiratory endurance or aerobic exercise, 2. Muscular strength and endurance or resistive exercise, 3. Flexibility or stretching exercise and 4. Balance exercise [4]. The recommendations also suggest low intensity and short duration exercises, taking into account that some, if not most, older adults may be highly deconditioned and/or have functional limitations [4].

There are few exercise programs that are suitable for older adults and meet professional recommendations for physical activity. Tai Chi is a low impact exercise program that is suitable for older adults [5]. Like Tai Chi, Essentrics is a low impact mode of exercise and incorporates several movement and position sequences used in Tai Chi [6]. The purpose of this article is to describe the techniques associated with Essentrics and explain the potential health benefits for older adults.

History of Essentrics

Essentrics is a type of guided exercise program created in the 1990s by Miranda Esmonde-White, retired ballerina and bestselling author of two books: *Aging Backwards* and *Forever Painless*. The exercise program draws on the slow and flowing movements of Tai Chi, the strengthening techniques of ballet and the healing principles of physiotherapy [7]. After years of experimentation, scientific research and fine tuning of the movement sequences, Essentrics was introduced as a full body work-out that uses a dynamic combination of strengthening and stretching aimed to rebalance the body [8]. It was popularized by the Public Broadcasting Service (PBS) introducing it as *Classical Stretch* in 1999. The authors adopted the name Essentrics, after associating their techniques with eccentric muscular contraction. Essentrics relies on bodyweight as the source of resistance, which contrasts with traditional strength training or resistance training programs that use external weights. Essentrics movement sequences encompass low impact full body stretches emphasizing alignment to loosen and decompress the joints and relax the muscles [9]. Currently, there are over 3000 certified Essentrics instructors teaching the program worldwide which easily translates to thousands of practitioners since its inception [10].

Essentrics and cardiovascular health

There is evidence that low to moderate Levels of Physical Activity (LMPA) can reduce risk of cardiovascular disease [11,12]. These lower intensity activities demonstrate cardiometabolic and health benefits in an aging population [12]. A systematic review [13] found that 2.5 hour/week (equivalent to 30 min daily of moderate intensity activity on 5 days a week) compared with no activity was associated with a reduction in mortality risk of 19%, while 7 hour/week of moderate activity compared with no activity reduced the mortality risk by 24%. Esmonde-White [8] aimed to provide an alternative way of becoming fit from the physically demanding workouts common in the fitness

industry and created a safer, gentler and less aggressive workout in Essentrics. Like Tai Chi, Essentrics is a low to moderate-intensity exercise program depending on movement sequences, posture and duration of exercise. Lan et al., [14] identified studies where Tai Chi enhances aerobic capacity, muscular strength, balance and psychological well-being. In addition, Tai Chi has significant benefits for common cardiovascular risk factors like hypertension, diabetes mellitus, dyslipidemia, poor exercise capacity, endothelial dysfunction and depression [14]. Although not formally investigated, it could be hypothesized that Essentrics may provide similar benefits. Essentrics' techniques without external resistance makes it a suitable exercise modality for older adults who may be hesitant to participate in a traditional resistance training program [10] and may offer positive changes in flexibility, strength and cardiovascular health.

Essentrics and strength

Aging is associated with functional declines, specifically reduction in muscle mass and strength [15]. It is documented that a 30-50% reduction of strength generally occurs between 30 and 80 years of age and continues to weaken as an individual ages [16]. The authors adopted the name Essentrics, after associating their techniques with eccentric muscular contraction. Eccentric muscular contractions are an important component of most movements performed during daily or sport activities [17]. The reduction in strength among older adults affects activities of daily living like walking, reaching and lifting [16]. Essentrics authors describe eccentric contractions as a way for a muscle (the agonist) to "reign in" its opposing (the antagonist) muscle to perform a controlled movement such as slowly lowering your body weight into a chair or descending steps in a controlled movement. Some studies have identified eccentric exercises as potentially being more effective than concentric exercises at improving muscle force production, which may result in stronger muscles and less muscular atrophy [17,18]. It should be noted that exercise activities require a combination of all types of contraction (i.e., Isometric, Concentric, and Eccentric).

The founder of Essentrics, believes that the program incorporates eccentric muscular contractions in its sequences that involve pulling away, pulling up or pulling out movements [7]. It emphasizes "pulling away" from the center of the body to lengthen the muscles from their habitually shortened ranges and/or "pulling up or pulling out" of a joint to relieve compression [10]. Because Essentrics does not use external weights for resistance, use of imagery like "lifting a brick or a bucket of water" are added to the movement sequence to promote the desired muscular contraction [7]. Research reveals that eccentric contraction exercises may promote greater force production [18] than concentric contraction exercises which involve the active shortening of the muscle. It is hypothesized that Essentrics may improve leg strength through slow, repetitive and alternating movement of the legs with knees slightly flexed, shifting the weight from one leg to another to support upper body movement sequences, similar to Tai Chi. In a qualitative study by Zarco et al., [10], Essentrics increased participants' perceived lower body strength. In another study by Zarco et al., [6], 12 weeks of twice weekly Essentrics intervention demonstrated an increase in upper and lower body strength. These findings were consistent with previous research conducted on Pilates: 12 weeks of 2-one-hour sessions, Yoga: 8 weeks of 3-one-hour sessions and Tai Chi: 16 weeks of 2-one-hour sessions.

Essentrics and functional mobility

Functional mobility, in this paper, refers to the ability to actively achieve a range of motion that requires both flexibility and strength. For the joint to reach its full range of motion, it requires the extensibility of skeletal muscles and connective tissues and adequate strength to move through the range of motion [19]. Functional mobility is fundamental to healthy aging [20], allowing older adults to continue to lead dynamic and independent lives. Impaired mobility is an early predictor of physical disability, and is associated with falls, loss of independence and institutionalization [21]. The founder of Essentrics purports that the program equally emphasizes strength and flexibility training [10]. Its slow, flowing, and rotational movements are aimed to progressively increase the joint's full range of motion [7]. The movement sequences incorporate a variety of stretching techniques: static stretching, dynamic stretching and proprioceptive neuromuscular facilitation [7]. This combination of a variety of stretching techniques potentially makes Essentrics a more effective program for increasing functional mobility [10]. Participants in a qualitative research study [10] reported perceived improvement with Activities of Daily Living (ADL) like getting out of bed, reaching for objects, getting onto knees while cleaning, bending to tie shoes and lifting legs to change clothes. Essentrics is a form of functional training because it facilitates the use of the entire body while approximating the way activities of daily living are performed. Studies have shown that functional training is more effective in reducing ADL disability in older adults than weight training alone [22].

Essentrics and balance

Balance is the ability to maintain the body in a stationary or upright position or moving stance [4]. It involves sensory detection of body motions, integration of sensorimotor information within the central nervous system, and execution of appropriate musculoskeletal responses [23] to retain the body's center of gravity over the base of support. Older adults need to preserve balance to maintain functional independence and quality of life [24]. Balance training is critical considering that falls continue to be the leading cause of injury and death among adults 65 and over costing millions of dollars in hospitalization [25]. Recommendations for balance training among older adults include strengthening that involves mostly lower body exercises and stability exercises [4]. Research shows that effective balance intervention consists of exercise programs that are structured, progressive and incorporate center of mass, narrow base of support and minimal upper extremity assistance [26]. Furthermore, Sherrington et al., [27] found that activities performed while standing with minimal upper extremity support designed to be progressively more challenging are most effective. Studies have shown that Tai Chi improves balance because of increased joint stability and postural control associated with slow, purposeful exercise emphasizing body alignment with lower center of gravity and attention to foot placement [5]. Essentrics, like Tai Chi, consists of slow-moving sequences that flow from one plane to another emphasizing body alignment and attention to foot placement. Essentrics' standing exercises include functional dynamic activities that involve slow controlled motions of the upper extremities and torso while stepping and weight shifting designed to challenge balance. Progression in the movement sequence is applied by cueing participants to start small and end in bigger movements. Zarco et al., [10] found that older adults participated in the Essentrics program because they would like to improve their balance and was the second most common perceived benefit that participants experienced after

flexibility. Essentrics includes exercises that challenge the center of mass while the feet remain fixed in a narrow base of support. Furthermore, Essentrics apply the principles of repetition and progression in its movement sequences, key elements of effective balance interventions.

Essentrics and pain

Costello et al., [28] reported that fear of pain or exacerbation of existing pain is often reported as the most common barrier among older adults to exercise participation. Tai Chi reduces pain through strengthening joints, improving their stability, promoting relaxation and enhancing their nourishment by increasing blood flow through movement [29]. Essentrics' movement sequences and foot positions are similar to Tai Chi, hence potentially offering similar benefits. In her book *Forever Painless* [8], Esmonde-White states that she believes that the body has a built-in pain relief system that is triggered by movement. This is supported by Langevin's work [30] on the role of fascia in myofascial pain. Myofascial pain, though poorly characterized, is estimated in approximately 30% of patients with chronic musculoskeletal pain [31]. Langevin [30] found dynamic cellular responses in the connective tissue, specifically in the fascia, after passive and active tissue stretching and proposed that fascial mobility, proprioception and myofascial pain are related. Stretching is a key component of exercise programs, physical therapy, and many complementary and alternative modalities used for chronic pain. Furthermore, Wilke and his research team found evidence supporting the existence of myofascial chains [32] proposed by Myers [33] based on anatomic dissection studies. Essentrics exercises are targeted to stretch these myofascial chains emphasizing alignment during movement sequences [9]. In a qualitative study by Zarco et al., [10], participants who indicated having chronic pain before the study reported a noticeable improvement in their pain: back and knee pain was reduced, arthritic pains in the shoulders, wrists, knees and ankles dramatically decreased.

Conclusion

Essentrics is a low-impact, full-body workout that provides an alternative form of exercise for older adults to improve their health and prevent disability. Because of its lower demands on the cardiovascular system while potentially providing the health benefits of improved strength, functional mobility, and balance, it may be suitable for adults who are not active and those dealing with chronic diseases, musculoskeletal weakness, decreased mobility and aerobic capacity. Essentrics has been shown to decrease pain which may help to improve exercise adherence. It does not require special facilities and equipment and can be practiced at home. As a guided exercise program, it is best done in a group setting in a classroom, or community spaces to maximize its benefits and address other barriers to exercise participation such as lack of social support and isolation.

References

1. US Department of Health and Human Services (2020) 2008 Physical Activity Guidelines for Americans. US Department of Health and Human Services, Washington, D.C., USA.
2. Centers for Disease Control and Prevention (2016) Adults Need More Physical Activity. CDC, Atlanta, Georgia, USA.
3. Centers for Disease Control and Prevention (2016) Physical Inactivity Among Adults Aged 50 years and older - United States, 2014. CDC, Atlanta, Georgia, USA.
4. Rivera-Torres S, Fahey T, Rivera MA (2019) Adherence to Exercise Programs in Older Adults: Informative Report. *Gerontology and Geriatric Medicine*.
5. Adler PA, Roberts BL (2006) The use of Tai Chi to improve health in older adults. *Orthopedic nursing* 25: 122-126.
6. Zarco EPT, Aquino M, Petrizzo J, Wygand J (2022) The impact of a ten-week Essentrics program on strength, flexibility and body composition. *Alternative and Complementary Therapies* (in press).
7. Esmonde-White M (2015) Principles of the Essentrics Program: Instructor's Manual. Essentrics Company.
8. Esmonde-White M (2016) *Forever Painless*. Essentrics Company.
9. Esmonde-White M (2019) *Fast Track to Aging Backwards: 6 Ways and 30 Days to Look and Feel Younger*. Random House of Canada, Toronto, Canada.
10. Zarco EPT, Aquino M, Petrizzo J, Wygand J, McGorry A (2021) Perceived Benefits of a Guided Exercise Program Among Older Adults. *Gerontology and Geriatric Medicine*.
11. Sallis JF, Haskell WL, Fortmann SP, Wood PD, Vranizan KM (1986) Moderate-intensity physical activity and cardiovascular risk factors: The Stanford five-city project. *Prev Med* 15: 561-568.
12. LaMonte MJ, Lewis CE, Buchner DM, Evenson KR, Rillamas-Sun E, et al. (2017) Both Light Intensity and Moderate-to-Vigorous Physical Activity Measured by Accelerometry Are Favorably Associated With Cardiometabolic Risk Factors in Older Women: The Objective Physical Activity and Cardiovascular Health (OPACH) Study. *J Am Heart Assoc* 6: 007064.
13. Woodcock J, Franco OH, Orsini N, Roberts I (2011) Non-vigorous physical activity and all-cause mortality: systematic review and meta-analysis of cohort studies. *Int J Epidemiol* 40: 121-138.
14. Lan C, Chen SY, Wong M-K, Lai JS (2013) Tai chi chuan exercise for patients with cardiovascular disease. *Evidence-based complementary and alternative medicine* 2013: 983208.
15. American College of Sports Medicine Position Stand. Exercise and physical activity for older adults. (1998). *Med Sci Sports Exerc* 30: 992-1008.
16. Milanović Z, Pantelić S, Trajković N, Sporiš G, Kostić R, et al. (2013) Age-related decrease in physical activity and functional fitness among elderly men and women. *Clin Interv Aging* 8: 549-556.
17. Hody S, Croisier JL, Bury T, Rogister B, Leprince P (2019) Eccentric Muscle Contractions: Risks and Benefits. *Front Physiol* 10: 536.
18. Hortobágyi T, Katch FI (1990) Eccentric and concentric torque-velocity relationships during arm flexion and extension. Influence of strength level. *Eur J Appl Physiol Occup Physiol* 60: 395-401.
19. Zsolt R (2018) *The Physiology of Physical Training* (Istedn). Elsevier/Academic Press, London, UK.
20. World Health Organization (2015) *World Report on Aging and Health*. WHO, Geneva, Switzerland.
21. Hirvensalo M, Rantanen T, Heikkinen E (2000) Mobility difficulties and physical activity as predictors of mortality and loss of independence in the community-living older population. *J Am Geriatr Soc* 48: 493-498.
22. Liu CJ, Shirov DM, Jones LY, Clark D (2014) Systematic review of functional training on muscle strength, physical functioning, and activities of daily living in older adults. *Eur Rev Aging* 11: 95-106.
23. Bok SK, Lee TH, Lee SS (2013) The effects of changes of ankle strength and range of motion according to aging on balance. *Ann Rehabil Med* 37: 10-16.
24. Aslan UB, Cavlak U, Yagci N, Akdag B (2008) Balance performance, aging and falling: A comparative study based on a Turkish sample. *Arch Gerontol Geriatr* 46: 283-292.

25. Centers for Disease Control and Prevention (2019) Older Adult Fall Prevention. CDC, Atlanta, Georgia, USA.
26. Shubert TE (2011) Evidence-based exercise prescription for balance and falls prevention: a current review of the literature. *J Geriatr Phys Ther* 34: 100-108.
27. Sherrington C, Whitney JC, Lord SR, Herbert RD, Cumming RG, et al. (2008) Effective exercise for the prevention of falls: A systematic review and meta-analysis. *J Am Geriatr Soc* 56: 2234-2243.
28. Costello E, Kafchinski M, Vrazel J, Sullivan P (2011) Motivators, barriers, and beliefs regarding physical activity in an older adult population. *J Geriatr Phys Ther* 34: 138-147.
29. Lee MS, Pittler MH, Ernst E (2007) Tai Chi for rheumatoid arthritis: Systematic review. *Rheumatology (Oxford)* 46: 1648-1651.
30. Langevin HM (2021) Fascia Mobility, Proprioception, and Myofascial Pain. *Life (Basel)* 11: 668.
31. Fricton J (2016) Myofascial Pain: Mechanisms to Management. *Oral Maxillofac Surg Clin North Am* 28: 289-311.
32. Wilke J, Niederer D, Vogt L, Banzer W (2016) Remote effects of lower limb stretching: preliminary evidence for myofascial connectivity? *J Sports Sci* 34: 2145-2148.
33. Myers TW (2014) *Anatomy trains: Myofascial meridians for manual and movement therapists* (3rd edn). Churchill Livingstone/Elsevier, New York, USA.



- Advances In Industrial Biotechnology | ISSN: 2639-5665
- Advances In Microbiology Research | ISSN: 2689-694X
- Archives Of Surgery And Surgical Education | ISSN: 2689-3126
- Archives Of Urology
- Archives Of Zoological Studies | ISSN: 2640-7779
- Current Trends Medical And Biological Engineering
- International Journal Of Case Reports And Therapeutic Studies | ISSN: 2689-310X
- Journal Of Addiction & Addictive Disorders | ISSN: 2578-7276
- Journal Of Agronomy & Agricultural Science | ISSN: 2689-8292
- Journal Of AIDS Clinical Research & STDs | ISSN: 2572-7370
- Journal Of Alcoholism Drug Abuse & Substance Dependence | ISSN: 2572-9594
- Journal Of Allergy Disorders & Therapy | ISSN: 2470-749X
- Journal Of Alternative Complementary & Integrative Medicine | ISSN: 2470-7562
- Journal Of Alzheimers & Neurodegenerative Diseases | ISSN: 2572-9608
- Journal Of Anesthesia & Clinical Care | ISSN: 2378-8879
- Journal Of Angiology & Vascular Surgery | ISSN: 2572-7397
- Journal Of Animal Research & Veterinary Science | ISSN: 2639-3751
- Journal Of Aquaculture & Fisheries | ISSN: 2576-5523
- Journal Of Atmospheric & Earth Sciences | ISSN: 2689-8780
- Journal Of Biotech Research & Biochemistry
- Journal Of Brain & Neuroscience Research
- Journal Of Cancer Biology & Treatment | ISSN: 2470-7546
- Journal Of Cardiology Study & Research | ISSN: 2640-768X
- Journal Of Cell Biology & Cell Metabolism | ISSN: 2381-1943
- Journal Of Clinical Dermatology & Therapy | ISSN: 2378-8771
- Journal Of Clinical Immunology & Immunotherapy | ISSN: 2378-8844
- Journal Of Clinical Studies & Medical Case Reports | ISSN: 2378-8801
- Journal Of Community Medicine & Public Health Care | ISSN: 2381-1978
- Journal Of Cytology & Tissue Biology | ISSN: 2378-9107
- Journal Of Dairy Research & Technology | ISSN: 2688-9315
- Journal Of Dentistry Oral Health & Cosmesis | ISSN: 2473-6783
- Journal Of Diabetes & Metabolic Disorders | ISSN: 2381-201X
- Journal Of Emergency Medicine Trauma & Surgical Care | ISSN: 2378-8798
- Journal Of Environmental Science Current Research | ISSN: 2643-5020
- Journal Of Food Science & Nutrition | ISSN: 2470-1076
- Journal Of Forensic Legal & Investigative Sciences | ISSN: 2473-733X
- Journal Of Gastroenterology & Hepatology Research | ISSN: 2574-2566
- Journal Of Genetics & Genomic Sciences | ISSN: 2574-2485
- Journal Of Gerontology & Geriatric Medicine | ISSN: 2381-8662
- Journal Of Hematology Blood Transfusion & Disorders | ISSN: 2572-2999
- Journal Of Hospice & Palliative Medical Care
- Journal Of Human Endocrinology | ISSN: 2572-9640
- Journal Of Infectious & Non Infectious Diseases | ISSN: 2381-8654
- Journal Of Internal Medicine & Primary Healthcare | ISSN: 2574-2493
- Journal Of Light & Laser Current Trends
- Journal Of Medicine Study & Research | ISSN: 2639-5657
- Journal Of Modern Chemical Sciences
- Journal Of Nanotechnology Nanomedicine & Nanobiotechnology | ISSN: 2381-2044
- Journal Of Neonatology & Clinical Pediatrics | ISSN: 2378-878X
- Journal Of Nephrology & Renal Therapy | ISSN: 2473-7313
- Journal Of Non Invasive Vascular Investigation | ISSN: 2572-7400
- Journal Of Nuclear Medicine Radiology & Radiation Therapy | ISSN: 2572-7419
- Journal Of Obesity & Weight Loss | ISSN: 2473-7372
- Journal Of Ophthalmology & Clinical Research | ISSN: 2378-8887
- Journal Of Orthopedic Research & Physiotherapy | ISSN: 2381-2052
- Journal Of Otolaryngology Head & Neck Surgery | ISSN: 2573-010X
- Journal Of Pathology Clinical & Medical Research
- Journal Of Pharmacology Pharmaceutics & Pharmacovigilance | ISSN: 2639-5649
- Journal Of Physical Medicine Rehabilitation & Disabilities | ISSN: 2381-8670
- Journal Of Plant Science Current Research | ISSN: 2639-3743
- Journal Of Practical & Professional Nursing | ISSN: 2639-5681
- Journal Of Protein Research & Bioinformatics
- Journal Of Psychiatry Depression & Anxiety | ISSN: 2573-0150
- Journal Of Pulmonary Medicine & Respiratory Research | ISSN: 2573-0177
- Journal Of Reproductive Medicine Gynaecology & Obstetrics | ISSN: 2574-2574
- Journal Of Stem Cells Research Development & Therapy | ISSN: 2381-2060
- Journal Of Surgery Current Trends & Innovations | ISSN: 2578-7284
- Journal Of Toxicology Current Research | ISSN: 2639-3735
- Journal Of Translational Science And Research
- Journal Of Vaccines Research & Vaccination | ISSN: 2573-0193
- Journal Of Virology & Antivirals
- Sports Medicine And Injury Care Journal | ISSN: 2689-8829
- Trends In Anatomy & Physiology | ISSN: 2640-7752

Submit Your Manuscript: <https://www.heraldopenaccess.us/submit-manuscript>