

group of subjects having trained 3 times per week and who will receive VNS.

**Discussion–conclusion** Expected conclusion brisk walking training could enhance the ANS tone and could improve the parasympathetic/sympathetic balance in nursing home elderly. This effect would be potentialized by VNS.

**Disclosure of interest** The authors have not supplied their declaration of competing interest.

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### PO0103

## Motor, cognitive and psychosocial impacts of an adapted dance program among children with Charcot-Marie-Tooth disease: An exploratory study

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**Objective** Charcot-Marie-Tooth disease (CMT) is a hereditary peripheral neuropathy and belongs to neuromuscular diseases. CMT affects motor function of children, but its clinical expressions are heterogeneous and it could also influence cognitive and psychosocial dimensions of patients. Physical activity is recommended for adults with CMT, but any study has been conducted with children. It is important to propose to children with CMT an adapted physical activity that enables a global approach of the patient. Dance has beneficial motor, cognitive and psychosocial effects. The goal of the present exploratory study is to evaluate motor, cognitive and psychosocial impacts of an adapted dance program among children with CMT.

**Material/patients and methods** Five children with CMT followed a ten weeks dance program in addition to regular care, while four others received only the regular care. Motor (CMT clinical characteristics, muscular strength and power, postural control, pain), cognitive (rhythm task, sustained attention, short term memory) and psychosocial (behavior, self concept and quality of life) parameters were evaluated before and after the ten weeks program for all participants.

**Results** Significant benefits were shown for both motor (CMT clinical characteristics, strength of leg muscle groups, pain during physical activity) and cognitive (rhythm task performance, sustained attention) functions for the dance group. No other significant change was noticed for other parameters.

**Discussion–conclusion** These results suggest that a specific dance program added to regular care can have beneficial effects on motor and cognitive functions of the child that can be affected by CMT.



Dance appears as a new approach particularly adapted for children with CMT, and further research is needed to confirm the results of the present study. A new study is being made based on the results of the present one, to evaluate more precisely the impact of a new adapted dance program on balance among children with CMT.

**Keywords** Charcot-Marie-Tooth; Adapted dance; Motor function; Cognitive function; Psychosocial; Children

**Disclosure of interest** The authors have not supplied their declaration of competing interest.

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### PO0104

## Physical activity for older adults: Even a little is good!

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**Objective** The proportion of healthy years lost due to disease rapidly increased with age. It is well established that regular physical activity is an efficient strategy for successful aging. However, less than 50% are able to achieve the 150 min of moderate and vigorous physical activity (MVPA) per week. The prescription of physical activity for older adults needs to be clarified.

**Material/patients and methods** A French cohort of 1011 subjects aged 65 and an international cohort of 122,417 subjects aged 60 (meta-analysis) were followed over a period of 12 and 10 years. Risk ratios of death were established into four doses based on weekly MET-minutes, defined as inactive (reference), low (1–499), medium (500–999) or high ( $\geq 1000$ ).

**Results** Based on the dose–response relationship between physical activity and mortality, these two studies demonstrated that a dose two times lower than current recommendations, brought further benefits in older adults (RR=0.78 [95% CI: 0.71 to 0.87],  $P < 0.0001$  for the low dose, RR=0.72 [95% CI: 0.65 to 0.80],  $P < 0.0001$  for the medium dose and RR=0.65 [95% CI: 0.61 to 0.70],  $P < 0.0001$  for the high dose).

**Discussion–conclusion** Fifteen min per day (or 75 min a week) of MVPA could be a reasonable target dose in older adults. If more may be better, “Even a little is already good”.

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