

# What's Your Sport?

## *Exercising With a Gym Ball*

Some people favour using a gym ball to carry out abdominal exercises, but caution is advised because there is an element of instability involved in work with a gym ball. This can be beneficial because all the postural muscles are brought into play, but it could result in a sudden demand on the hip flexors, which in turn can place a heavy load on the *rectus abdominis*. The floor, or a bench, are preferred options for a colostomate, at least in the initial stages.

## *Running*

Running is an excellent cardiovascular exercise, and improves both muscle tone and endurance in the legs, although it won't do much for the *rectus abdominis*. For post-operative exercise, consideration should be given to the running surface, which needs to be reasonably smooth. A very rough surface carries with it the risk of stumbling, which in turn can cause unexpectedly heavy muscular loads.

## *Skipping*

This can be regarded as an essentially safe exercise, provided of course that the subject doesn't trip over the rope! Depending on how skilled the performer is, there will be an alternating pressure on the abdominal wall due to the need to accelerate the abdominal contents, so it would be wise either to have completed, or not to have needed, the introductory stage of abdominal curls. If skipping causes significant discomfort, it is possible that it is due to adhesions following surgery, and medical advice should be sought.

## *Yoga*

This is a difficult topic on which to pronounce, but to the extent that it teaches relaxation, it should be a good thing. The beginner poses should not present any problems, and a gentle stretch should do no harm. The difficulty may come with some of the transitions between the poses, which could prove awkward, and this is where there might be a temptation to overstress the *rectus abdominis*, or to increase pressure in the abdomen by holding the breath. It would be advisable to analyse carefully what is happening in the transitions, and if it appears that there is any danger of overstress or of breaching the Grunt Rule (see Don't Hold Your Breath!), consider finding another way to transition that is physically easier, even if it is less elegant. It would probably be useful to discuss this with the teacher.

## *Riding*

Jumping seems likely to generate either voluntary or involuntary increases in intra-abdominal pressure, and is best avoided by a colostomate until confidence has been built up in the strength of the *rectus abdominis*, but otherwise gentle hacking or basic dressage should pose no problems once the rider has mounted the horse. However, riders who take a pride in mounting from ground level without any aids, should perhaps consider whether, until they can be quite confident in the strength of their abdominal musculature, they might be better advised to make use of a milk crate, or even (perish the thought!) two.

## *Golf*

If your preferred sport is golf, it would be as well for you to check that you have no problems with the rotational movement involved in a golf swing. While doing situps on the floor in the

knees bent position, place your arms straight out sideways on the floor for stability, and swing the knees smoothly alternately from side to side as far as you can. As always, monitor the abdomen carefully for any untoward signs. It would probably be helpful to fit this movement in between your sets of situps. A development of this exercise would be to leave the knees in the raised position for situps, and reach alternately with each hand to the opposite knee.

It would probably be useful also to check whether you are guilty of breath-holding, most likely when driving. If you find that your drive breaks the Grunt Rule, then consider the possibility of breathing out when you drive, equating to the standard practice of weight-lifters to exhale as they exert maximum force.

### *Tennis*

It is difficult to generalise about the involvement of the *rectus abdominis* in tennis, because so much depends on energetic positioning around the court, although from a consideration of the forces which have to be exerted, it is highly probable that serves and overhead shots tend to place the heaviest demands on it. Support for this belief comes from the number of (largely female) tennis professionals who incur the displeasure of their opponents by conspicuously breaking the Grunt Rule! Refer to "Swimming After Abdominal Surgery" for a diagram, albeit in the prone position, and an explanation of similar forces acting. To minimise the pressure build-up in the abdomen, try breathing out as you serve.

### *Badminton and Squash*

Probably the player is the best judge of the extent to which the remarks under Tennis are applicable, although it may well be concluded that the actual stroke loads are less, and the requirement for maximum mobility somewhat more demanding. In this event, the more advanced exercises described in "Minimising the Risk of Parastomal Hernia" would probably be beneficial.

### *Rowing*

Most of the work involved in rowing is carried out with the muscles of the back, in conjunction with the arms and legs, and the principal involvement of the abdominal muscles is in the recovery, which suggests that the recreational oarsman should not encounter any great problem. In competitive rowing, advanced exercises for strengthening the *rectus abdominis* would be desirable, combined with attention to the breathing pattern, and taking heed of the coaches exhortation to "Come forward like a duchess with a cup of tea".