



| 67-year old Sedentary Female Using a High Frequency BFR Walking Home-Based Program

| Weisner et al. (2013)

| Timed up and go test



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- | Six minute walk test
- | Gait speed
- | Predictive value for future risk of falls<sup>1</sup>

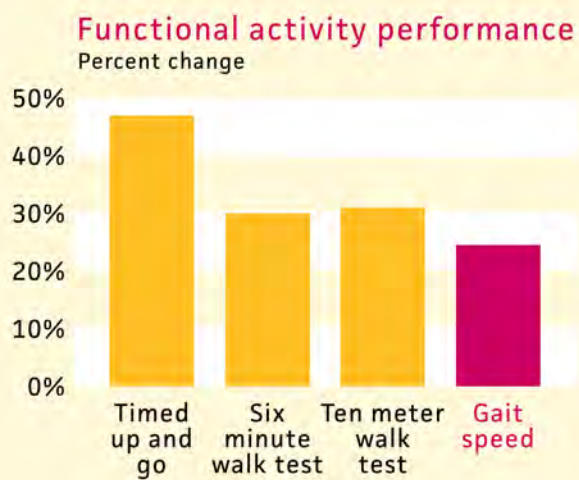


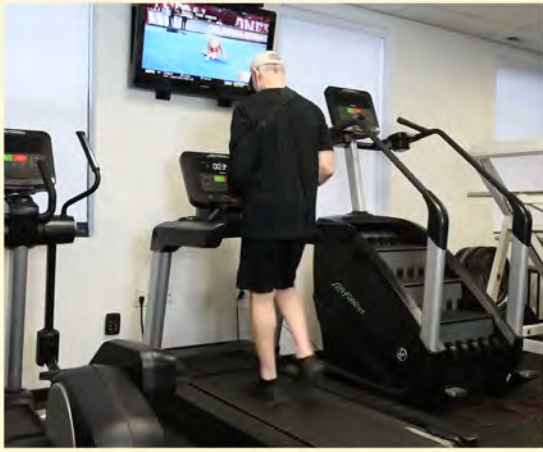
- | Strength tends to decline by 15% per decade<sup>2</sup>
- | 50 years old

| Pause the video

- Improve Muscle Strength
- Improve Functional Performance
- Improve Cardiovascular Health/Capacity

- BFR interval walking at approximately 1.9 mph or 0.85 m/s<sup>3</sup>
- Abe study performed twice per day, 6 days per week for 3 weeks
- BFR was applied bilaterally
- Pressures between 160-230 mm Hg
- Total time under occlusion was 17 minutes





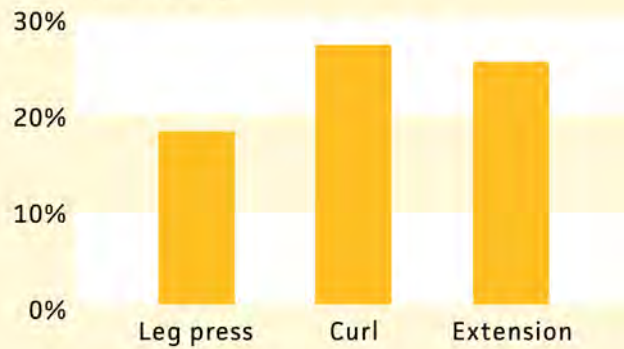
| 10 meter walk test

| 7.692 seconds<sup>4</sup>

| MCID of 0.1 m/s<sup>5</sup>

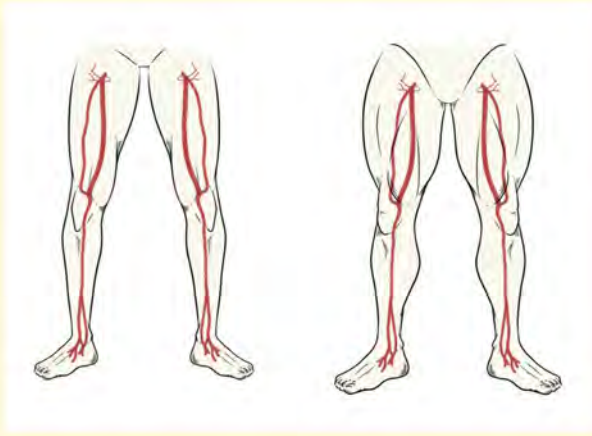
### Body impairment: strength

Percent change



| Lack of personalized pressures

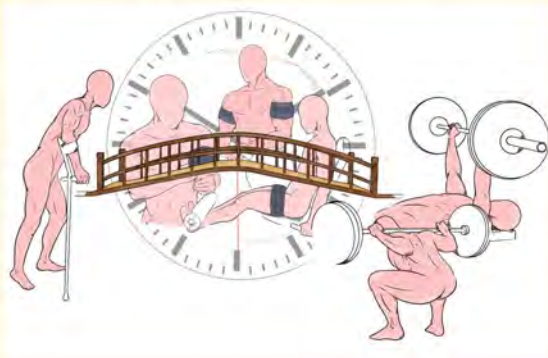
| Repeated assessments for  
the main outcome measures



- | Repeated assessments every two weeks
- | Contributed to the significant changes
- | Discussion on the learning effect of periodic exposures to heavy strength training<sup>6</sup>
- | Improving 1RM strength



BFR may be best used as a “bridge therapy” to get clients and patients superior results in muscle mass and strength, simply by adding cuffs to the limbs!



The quitter



Increase muscle mass and strength in older adults<sup>8</sup>

Changes in maximal aerobic capacity<sup>9</sup>