





REVIEW

Adaptations in limb muscle function following pulmonary rehabilitation in patients with COPD - a review



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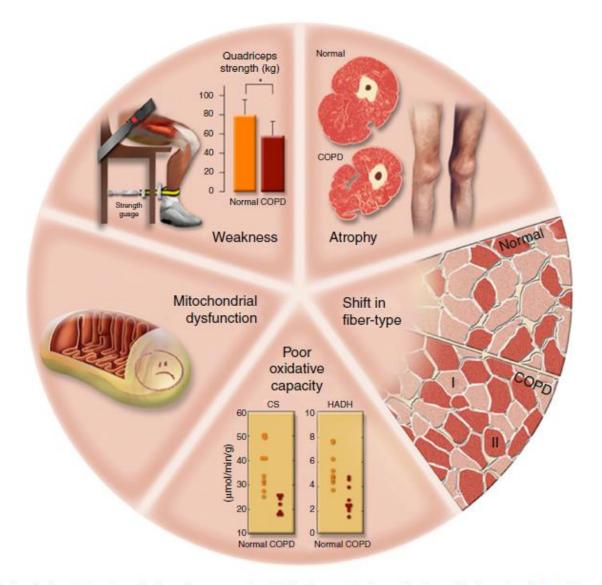


Figure 1 Morphological and structural alterations reported in limb muscles in patients with chronic obstructive pulmonary disease (COPD). CS, citrate synthase; HADH, 3-hydroxyacyl CoA dehydrogenase. Reprinted with permission of the American Thoracic Society. Copyright © 2016 American Thoracic Society.

	Limb muscle strength	Limb muscle endurance
Muscle actions Intensity	Concentric, isometric and eccentric 60-70% of 1 RM or fatigue after 8-12	Concentric, isometric and eccentric 15-25 repetitions or more,
(loading)	repetitions	approximately 45–65% of 1 RM
Volume	1–3 sets	1–3 sets
Exercise	Unilateral and bilateral single- and	Unilateral and bilateral single- and
selection	multiple-joint exercises.	multiple-joint exercises.
Exercise order	Perform large muscle group exercises	Exercise order is not as important as
	before small muscle group exercises,	during limb muscle strength training
	multiple-joint exercises before	
	single-joint exercises,	
	higher-intensity exercises before	
	lower-intensity exercises, or rotation	
	of upper and lower body exercises or	
	performing one exercise for a specific	
	muscle group followed by an exercise	
	for the opposing muscle group (agonist-antagonist)	
Velocity of	Slow and moderate velocities (1–2 s	Moderate to fast velocities for high
muscle	or higher in concentric and eccentric	repetitive (15–20 repetitions or
action	phase of the movement)	more)
Rest periods	2–3 min between sets	1–2 min between sets
Frequency	2-3 days per week	2-3 days per week
Progression	Increase with up to 10% when current	Increase with up to 10% when current
	workload could be performed for 1-2	workload could be performed for 1-2
	repetitions over targeted for two	repetitions over targeted for two
	consecutive sessions	consecutive sessions

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