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THE SECRET TO KEEPING UP MOBILITY WITH AGE

While some decline is a natural part of ageing, experts believe that early intervention through exercise, disease control, and fall prevention can help older adults remain independent longer

problems and reduced physiological reserve. "Age-related changes such as sarcopenia (loss of muscle mass and strength), degenerative joint changes, and impaired balance contribute to slower walking. Neurological conditions, including stroke, Parkinson's and reduced peripheral sensations (e.g. diabetic neuropathy), can affect gait and balance. Medication-related effects (including antihypertensive medications causing postural blood pressure reduction and sedatives) can further affect mobility and cause an increased risk of falls. Cardiovascular causes such as orthostatic hypotension, arrhythmias, heart failure, valvular heart disease, and coronary artery disease may reduce exercise tolerance and contribute to gait slowing," said Dr Ashish.

He added that a comprehensive geriatric assessment helps to identify reversible causes, enabling targeted interventions, including exercise-based rehabilitation, balance training, and fall prevention strategies.

Scientific evidence and studies suggest that older adults unconsciously modify the way they walk to reduce the risk of falls.

Recently, a study led by Flinders University and the University of Canberra revealed that the body adopts a "safety-first" walking style during ageing that prioritises stability at the cost of speed and energy efficiency. Nearly 107 healthy adults aged 26 to 86 were identified as having subtle but important changes in how the ankle and surrounding muscles control each step. As for interventions, investing in mobility at the earliest can

help in preventing age-related slow walking. Dr Jino says that healthy ageing should be promoted. "If a person is in their 40s and 50s and wants to invest in mobility, what they have to do is routine strengthening exercises, not just aerobic exercises, walking or swimming. We need strengthening exercises, grip exercises for muscles, and physiotherapy, considering the requirements of the patient," he said, adding that once the degeneration happens and nerves are down, the condition won't be reversible.

"Gait was something we tended to overlook in the past. Today, people are much more aware of its importance, especially as they age. Healthy ageing should not begin at 60, ideally, it should start in the 40s or even earlier. Several hospitals have been launching longevity clinics, which focus on preventing disease and optimising long-term health. Conditions such as diabetes, hypertension, and obesity can have significant effects on mobility and overall function later in life. The earlier we address these risk factors, the better our chances of maintaining independence and quality of life in older age," said Dr Jino, adding that healthy lifestyle practices should be followed.

Experts also recommend the timely use of assistive devices such as walking sticks and walkers when required, as they can improve safety and confidence. "Falls should be prevented whenever possible, as they are a major cause of morbidity in older adults. A fall, especially when associated with injury or fracture, can lead to pain, fear of falling, reduced physical activity, loss of confidence, and restriction of mobility. This may result in a cycle of functional decline, muscle deconditioning, increased frailty, and further risk of falls," added Dr Ashish.



PREVENTING A FALL

- Improve lighting at home (especially night lighting)
- Remove or secure loose carpets
- Keep pathways clear
- Use non-slip mats
- Install grab bars and handrails in bathrooms and on stairs
- Providing appropriate chair and bed heights
- Improve accessibility for walking aids
- Correct outdoor hazards such as uneven pathways

ANNA JOSE @ Kochi

OR the last two months, 78-year-old Latha (name changed), has been struggling with progressive slowness of walking and fear of falling. Three weeks prior, she had suffered an accidental slip that caused her to land on the floor, following which she developed increased apprehension while walking and reduced confidence in walking independently without any support or assistance.

When Dr Ashish Rajan, consultant geriatrician at Lisie Hospital, Kochi, examined her, he noticed there was no history of loss of consciousness, head injury, or preceding dizziness. "Her vital signs were stable. Geriatric assessment revealed gait slowing (walking speed), impaired balance, and reduced functional mobility. Examinations showed neither significant deformity or focal tenderness nor evidence of bony fracture or acute injury," said Dr Rajan.

She was then referred to the physical medicine and rehabilitation department, where she underwent a structured gait and balance training programme, including strengthening exercises, balance retraining, transfer training, and fall-prevention strategies.

While some decline in mobility is a natural part of ageing, experts believe that early intervention through exercise, disease control and fall prevention can help older adults remain independent for longer.

Talking about Latha, Dr Ashish said during follow-ups she showed significant improvement in walking speed, confidence, and balance, with reduced fear of falling.

"Usually several functional domains — cognition, food digestion, vision, and walking — will be affected as a person ages. Ageing will alter and diminish the ability to walk straight. Mostly, elderly people walk slowly, and it is normal. A major reason is the degeneration of the muscles and bones, changes in our reflex timings, latency in muscle actions, deficiencies, etc.," said Dr Jino Joy, geriatrician at Medical Trust Hospital, Kochi.

A gradual reduction in walking speed is part of normal ageing, however, in older adults, it may also indicate underlying health

MYTH BUSTERS



Dr Joseph Shibu

On walking speed

Interventional Neurologist, Apollo Adlux Hospital, Angamaly, Kerala

Myth: Walking speed cannot be regained

Fact: Gait speed remains highly plastic into the 80s and 90s, responding directly to progressive power training. Moving loads quickly reverses age-related muscle atrophy and maximises your nervous system's ability to activate muscle fibres, directly increasing stride length and comfortable walking velocity.

Myth: Exercise can guarantee a better gait in old age

Fact: Exercise profoundly optimises aging trajectories, but it cannot absolutely guarantee an uncompromised walking speed due to non-modifiable genetic and pathological factors. Even a perfectly conditioned musculoskeletal system remains vulnerable to age-related neurodegenerative disruptions, like microvascular white matter ischemic disease or Parkinson's disease, which inherently damage motor mechanics.

Myth: Exercise is not healthy for elderly people

Fact: Physical inactivity is a primary accelerator of frailty, whereas tailored exercise functions as standard medical therapy for elderly populations. Senior tissues retain adaptation capacity; progressive overload stimulates muscle protein synthesis, enhances bone mineral density, and counters sarcopenia-driven systemic inflammation.

Myth: Slow walking is only related to bones and muscles

Fact: Slow walking is a whole-body metric regulated by the central nervous system, which is why gerontologists refer to gait speed as the "Sixth Vital Sign." Safely navigating an environment requires complex real-time cognitive integration. A declining gait speed often serves as an early indicator of subclinical cerebrovascular disease or frontal lobe neurodegeneration.

SUPPLEMENTS WORK WELL WITH EXERCISE AND DIET

ANNA JOSE @ KOCHI: Supplements often play a significant role in healthy ageing. However, medical experts suggest supplements work well in managing slow walking only when combined with exercise, physiotherapy and dietary requirements. Supplements for the elderly can broadly be divided into three categories, according to Dr Joseph Shibu, neurologist at Apollo Adlux Hospital, Angamaly. "Maintaining joint health, bone strength and muscle mass is essential for preserving mobility and preventing falls in old age, and supplements can help to a great extent," he said. According to Dr Ashish Rajan, geriatrician at Lisie Hospital, Kochi, vitamin D supplementation should ideally be considered after testing and identifying deficiency. "Elderly individuals generally require 800-1,000 international units (IU) of vitamin D per day and around 1,000-1,200 mg of calcium per day to support bone health. These nutrients are particularly important in adults aged 60 years and above to help reduce the risk of osteoporosis and fractures," he said. Joint-support supplements such as glucosamine, chondroitin sulphate and omega-3 fatty acids are commonly recommended for older adults, as they help reduce inflammation, stiffness and joint tenderness. However, experts also suggest combining exercise with supplements for improved outcomes. Older adults should be assessed for nutritional deficiencies based on risk factors, particularly vitamin B12 and iron deficiency, as these can contribute to anaemia, neuropathy, weakness, and mobility problems. "Elderly patients with sarcopenia can be managed with adequate protein intake and progressive resistance exercises. Moderate-intensity resistance training helps improve muscle strength, physical function, gait, and balance, thereby reducing the risk of falls and functional decline. Ideally, resistance exercises should be initiated as early as the 30s to build and preserve muscle mass and help prevent or delay age-associated sarcopenia in later life. In older adults, before starting resistance training, an assessment of cardiovascular status and other comorbidities is recommended to ensure safe participation in exercise," said Dr Ashish.

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The borrowers, in specific and the public, in general, are hereby notified that public auction of the gold ornaments pledged in the below accounts is proposed to be conducted at the following branches on 16/07/2026 from 10.00 am onwards. The auction is of the gold ornaments of defaulted customers who have failed to make payment of their loan amount despite being notified by registered letters. Unauctioned items shall be auctioned on any other days without any further notice. Reserve price is fixed on the basis of market price of the gold on the date of auction or the 85% of the average 30 days IBA rate whichever is higher. Change in venue or date (if any) will be displayed at the auction centre and on the company website. The details given below are in the order of Branch Name, Loan Number, Customer Name, Total Due Amount (in ₹) & Item Name

- List of pledges:-
- DHARWAD, ALNAVAR, 8954, MANJUNATH REDEKAR, 29404/-, FINGER RINGS 1, 0115580730029105, JUNJAPPA IRAPPA KURAGUND, 42549/-, DROPS & STUD 1, UTTARA KANNADA, ANKOLA, 7993, RAJU THAKU GAONKAR, 27020/-, CHAIN 1, DHARWAD, ANNIGERI, 9259, AMBAVVA UPPAR, 15000/-, BELT 1, 0128680700049383, IMAMASAB ALLISAB DARAVAN, 91000/-, NECKLACE 1, 1642, CHETANA SHRIGIRI KIRSUR, 40026/-, DROPS & STUD 1, 0128680730011703, DAWALSAB ALLISAB DARAVAN, 67894/-, NECKLACE 1, 0128680730011713, NAZIRASAB MOULASAB NADUVINAMANI, 130528/-, NECKLACE 1, 0128680730011714, NAZIRASAB MOULASAB NADUVINAMANI, 66452/-, BRACELET 1, 0128680730011715, NAZIRASAB MOULASAB NADUVINAMANI, 31302/-, FINGER RINGS 1, BELLARY, BANGALORE ROAD BELLARY, 9990, B BASAVARAJ, 29401/-, DROPS 1, BELLARY, BELLARY, 0389, RAGHAVENDRA, 130237/-, NECKLACE 1, 0125380730040390, CHETTEMMA, 31307/-, FINGER RINGS 1, 0125380730040393, LOKANATH K, 29490/-, DROPS & STUD 1, DHARWAD, BETGERI, 9892, THUKARAM KATAVATE, 13600/-, U-DROPS 1, 0835, LASHMI JAYANAVAR, 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No. C-apt/39/2023-M1 (MTL) 29.06.2026
C-apt invites Online bid (2 Cover System) as detailed below:
e-Tender No: 85/26-27/MTL (e-Tender id: 2026 CAPT_845014_2) for the Supply and Installation of a Colour Web Offset Printing Machine.
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Dated: 19-06-2026
The undersigned, on behalf of the President of India, invites E-Tenders Through (IREPS) for the following items:
Description in Brief:- Supply and Testing of Digital VHF 25 Watt Radio with plain MIC Standard Accessories.
(Qty: 160 Nos.)
Last date for submission of bids: Upto 10:30 Hrs. on 20-07-2026
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Dated: 24-06-2026
The undersigned, on behalf of the President of India, invites E-Tenders for the following work:
Item of work Approx. Value
Outsourcing of Rs. 12,64,83,604.69
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