The process of the aging wants free from pathology or pathological influence deeply the amount of sleep and the temporary tuning of the sleep within 24 hours of the day. Advanced age is associated with a decrease of the capacity of reaching sleep long periods, uninterrupted and an incapacity of reaching the deep sleep phases. The more prevalent and more reversible consequences of the aging regarding the structure of the sleep are an increase in the number of you wake up during the period of main sleep and a loss of the sleep of slow wave. As a result of the fragmentation of the sleep and of the loss of the deep sleep with the age happens a manifestation of the sleep need: no satisfied with increased prevalence of naps in the seniors. It is very probable that the effects of the age and sex about the capacity to sleep have deep implications for the maintenance of the humor of the attention and of the cognitive efficiency of the sleep. The women more frequently than the insomnia men complain with the progress of the age. The women seem to be more sensitive to the effects about the humour of the loss of the sleep and they tell alterations in the sleep more frequently.

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The two complaints more common of vigil/sleep they are insomnia and sleepiness of the day excessive. Insomnia is the patient's subjective complaint whose sleep is agitated, disturbed, short or in another way no reparative. The complaint of sleepiness of the day excessive refers to the patient's incapacity to maintain alerts during the day, falling asleep involuntarily and in inadequate hours. To develop an including understanding of the complaint of the patient's sleep/vigil, they should be appraised his duration and evolution in relation to events of his life, environmental and social factors, such as: safety, nutrition, physical exercise and recreation, sexuality, economic situation, hospitalar internments, use measurement, medical and psychiatric disturbances concomitant.

An upset of the sleep seemingly can begin or to exacerbate other upset physical or mental. The fundamental characteristic of the insomnia is a predominant complaint of the difficulty in to begin either to maintain the sleep or sleep complaint no reparative. For the diagnosis of an insomnia upset, the insomnia complaint should happen at least three times a week for at least one month and it should be associated with fatigue of the day significant or operation social or professional prejudiced. Physiological and psychology insomnia persistent refers the difficulty in to begin or to maintain the sleep that is not related to another mental upset or to a physical condition. The fundamental characteristic of the upset of excessive sleepiness is the sleepiness or sleep attacks of the day sufficiently severe to the point of to result in damages in the social and professional operation. Environmental impacts, social, economical and occupational they can grow due to the excessive concern with sleep of a larger irritability of the day and weak concentration. Most of the cases of primary insomnia beginning relatively sudden in a moment of stress psychological, social or illness. The disturbance of the sleep or it fatigues of the day associated it causes suffering clinically significant or damage in the social and occupational operation or in other important areas of the individual's life.

Sleepiness can take to a significant suffering and dysfunction in the professional and social relationships. The lingering night sleep and the difficulty of waking up can cause difficulties in the execution of morning obligations.

The episodes of involuntary sleep during the day can be embarrassing and even dangerous if for instance the individual is driving or operating machines when they happen. The low alert level that happens while an individual combats the sleep can take to a reduction and efficiency of the concentration and of the memory during activities of the day. The sleepiness, in general it is attributed erroneously to the boredom or the laziness, it can also social disturb and family relationships.

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Disease and incapacity accompany the man from his emergence in the earth planet and the inclusion of the physical activity and recreation, such as music, dances, games and sport in the lifestyle of the people are found to in prehistoric tracks. The more remote historical documents also relate those same activities to the treatment of people with several illnesses and incapacities. In the end of the century XVIII the first studies were accomplished under the formal inclusion of the recreation and physical activity in the rehabilitation process, particularly in psychiatric institutions. The decades of 60 and 70 were the mark of the implantation of institutions and specialized services in psychiatric, physical activity and recreation to serve to the emotionally sick and mentally retarded, happening significant progresses in the development of including rehabilitation programs and the incorporation of programs of physical activity and therapeutic recreation as part of the process treatment of several illnesses. In the decade of 60 public community service, private and volunteers began to recognize the responsibility of serving to the needs of optional time of those disabled and excluded. The expansion of the human services during the decade of 70 includes the recognition every time larger of the needs of the physical activity, leisure and recreation of the disabled populations and excluded. The professionals that render services to the human beings need to assume a holistic orientation and to recognize that the environmental impacts, social, economical and politicians causes disturbances in human physiology body, determining the appearance of several pathologies, the emotional unbalances, stress and psychiatric disease. The historical evolution of the physical activity and therapeutic recreation provides the base for his definition as a twin service of the rehabilitation process, initially denominated of hospital recreation. The physical activity and the therapeutic recreation had largest acceptance in the psychiatric hospitals, later his use in institutions for retarded, centers of physical rehabilitation, institutions for seniors, penal establishments and community centers.

As part of the protocol of the patients' treatment the physical activity and the recreation were nicknamed of medical gymnastics and medical recreation and starting from 1966 it appeared a international nomenclature THERAPEUTIC GYMNASTIC AND THERAPEUTIC RECREATION. Starting from the 80 many specialists of the human subjects decade they questioned the medical model as an appropriate guide for the therapeutic gymnastics and therapeutic recreation or the human services as a whole in the measure in that we approached the century XXI. The significant growth of the programs of physical activity and therapeutic recreation in the communities as well as the emergence of a spectrum of community services for sick individuals and with incapacities it reflects growing social emphasis in the well-being, intact potentialities, prevention instead of treatment or hospitalization and the economy of the costs of the attendance of the health. Health, as OMS, is a state of complete well-being physical, mental, social and spiritual and not merely the absence of disease or illness.

That definition reflects the emphasis social crescent of the present time clearly in the well-being in the holistic health and in the prevention. The psychology ecological or environmental assists as much the human components as no humans of the atmospheres, places where feel the behaviors, us which the people work, and it is an element significant, however usually unknown in the rehabilitation process. The attention to the impact that the exercises atmosphere about the behavior is an including task. The perceptive vision of the behavior affirms that the nature of the answer of an individual to the possible
involvement in any type of experience will depend on their perceptions individualized on that nature that involvement seems to be. Behind the perceptive vision of behavior he is the primary presupposition that to look for the well-being it belongs a behavioral objective common to all to the people. The reluctant participant or no participant, to who we classified of unfounded, is actually highly motivated to keep his current level of advantageous, since in the involvement in the experience of the activity found in the moment is noticed as something more egodystonic that egosyntonic. The common denominator of the leadership of the activity is that we are leaders using the activity group as vehicle through which we hoped to reach being beneficial experiences as a result of the voluntary participation. The experience of the activity in itself is neutral. The involvement in an activity experience keeps the potential so much of being harmful for the participant as the one of being beneficial. The potential benefit for the participant grows out of the interactions with the human components and no humans of the total atmosphere in which the activity group works. The individual with more involvement need in the physical activity and recreation is the individual less capable of participating voluntarily. The perceptive vision of behavior totally invalidates the idea that any leader, independently of the degree of experience familiarity to all to the educator that the individual decide which experience of physical activity and recreation will be good for a certain individual. The involvement process in the physical activity and recreation is an expectation built only after the communication verbal as nonverbal to have established the objective for materialization of this expectation. Somebody only participates in a physical activity and recreation if the same satisfies their objectives. An approach through the individual's objectives could involve a subtle effort and no forced to develop a personal relationship with the individual before making an effort in exposing the person directly to the atmosphere of physical activity and recreation. Independent of the functional level or the individual's age he can be characterized by being: willing participant, observer or expectant and isolated or fugitive. The power of maintenance of the group leans on essentially in the degree in that the experience of the group is going to the encounter of the needs of reach of goals of each member. The individual will usually join to a group because the group in that the group will give to them a better opportunity to reach their personal goals than if they made individual efforts. The elaboration of the atmosphere activity or that links with whole the process of lifestyle of the person needs to base in the concept of inclusion versus exclusion. The individual's functional analysis involves an identification of their potentialities and limitations for the acting in the three identified behavioral domains: psychomotor performance, cognitive and interactive of a specific activity.

Little or no attention has been given to the affectionate and interactive demands social of the involvement in the physical activity and recreation.

Factors that need to be considered in a holistic analysis:
1. abilities levels
2. age, sex, race, religion, disposition level of the group
3. cognitive level, physiologic demands, garments
4. architectonic barriers, facilities, outlines of the programs of physical activity
5. financial factors, cultural norms, factors of safety.

The professionals of the related human services the health and well-being no they can refrain of the reductionist philosophy to develop an appropriate conceptual orientation so that human services appear and of health in agreement with the patterns that satisfy the personal needs of the members of the society. The leisure and the health share the property of they be solemnity-generated in several and significant degrees.

A larger proportion of the insomnia exists to be reduced through prevention programs than through progresses in the biomedical technology and in the pharmacology. The treatment no pharmacological of the insomnia it is highly desirable and the ideal is that the main part of the therapy is holistic. An essential part of the therapy involves the patient's education to consider what can be really expected of the treatment. The patients with complaints of superficial sleep, but that, on the other hand, he has a good energy during the day, they can be oriented on the normal patterns of the sleep in the old age. Patients benefit strongly that the intermittent private or the appearance of dissonant or dangerous thoughts. The habit that promote for the patients the hygiene of the sleep, include schedule adhesion to regulate of sleep, to avoid stimulants and alcohol, limitation of the naps during the day and regular exercises, recreation and leisure. Vitiello and collaborators (1990) showed that a program of training of aerobic adaptation and recreation improves the quality of the sleep. The knowledge of the value of the approach of the insomnia in a holistic way is receiving attention more and more in the society. The treatment of the emotional needs as well as physics during the illness has been protected as a way of helping the individuals to recover some control about their lives. A holistic model of attendance to the health to involve the patient in the process and to unmask the mystery of the attendance to the health for better understanding. The surface of the loss of life life implicates more than the physical health. Implicates that the individual meets mental and emotionally healthy equally, taking into account in what concerns the health other dimensions of the being person. Hipocrates emphasized the person's treatment as a completely. He emphasized the influence of the society and of the atmosphere in the health. A holistic approach for attendance the insomnia considers that multiple factors are operand in the disturbance of the sleep/vigil: traumatism, age, social factors, emotional, environmental, political, economical, psychological and cultural. An individual can use the disease as an opportunity to know personal values and to look for her as a time to grow and to change his lifestyle. According to Von Bertalanffy's theory all of the events of the life are interlinked in ascending chain complexity from the molecules to the organs, until the individuals, until the communities, until the society until the universe and just an alteration in any of those levels affects another element of the chain finally.

For Dubos the paper of the medicine is to help the people to reach a health condition so that they can make their own decisions. As Frijof Capra that is not healthy for the individual either is healthy usually for the society and for the global ecosystem. The systemic conception of health bases on the systemic conception of life. Loss of flexibility means loss of health. The health, therefore, it is a well-being experience resulting from a dynamic balance that it involves the physical and psychological aspects of the organism, as well as their interactions with the natural and social environment. To be in dynamic balance means to pass for temporary phases of disease, in which one can learn and to grow. The natural balance of the alive organisms includes a balance between the tendencies solitude and the tendencies to be healthy, an organism has to preserve his individual autonomy, but at the same time, to be capable to integrate harmoniously in vaster systems. The disease is therefore an unbalance consequence and discord, and it can, with a lot of frequency, to be seen as due to an integration lack.

If he listens a patient one can relieve their needs, the patient could be more motivated to channel the energy working to help it self own. Conine conjectured that a lot of the superficial conversation that it happens during the treatment sessions can be an attempt on the part of the therapist of avoiding that the patient liberates thoughts generated deeply. To hear the patient is particularly important if the therapist wants to understand the patient's needs to formulate treatment programs and to instruct the patient. A paper common to all of the therapists it is of educator. The patients' education is receiving more emphasis, particularly in areas of chronic diseases, such as the insomnia. Rand defends including education model: listen the needs, myths, success criteria, plans and results. The foundation of the physical activity and recreation is to relate the movement and the exercise with pathological conditions the most several and it can produce balance, I diminish of the suffering and sometimes to the cure.

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The physical activity and the recreation is an acquired behavior that requests motivation to begin and the persistence to adhere it a program of physical activity and recreation. The physical activity and recreation, the walk, the meditation, biofeedback and other forms of mental distraction reduce the anxiety and the depression, providing a physical and mental well-being, improving the sleep/vigil level. The regular activity serves as strategy of effective coexistence, an amusement amid the stress of the daily life. She occupies the mind it allows the substitution of bad habits for good habits, negative fixations for positive fixations it is a meditation form supplying benefits of other approaches associated to improvements in the health and in the physical fitness, he gives a control sensation on our own life and the middle in that we lived. Physical fitness change the corporal image, that trust renewed in the body can be an important step towards better personal relationships. The self-esteem and the social contact can be accentuated through the participation in a program of physical activity and recreation. The physical activity and the recreation, relaxation, mental practices and other coexistence activities help the person to work in a rational way with difficult problems, maintaining the emotional balance and overcoming the stress. When settling down a program of exercises and recreations, things should be established: which are the goals and the type of exercises that is important to a program well elaborated and if the exercises proposed space of encounter in a safe and effective way to the wanted goals.

They should be considered the patient's condition, age, previous lesions, deformities or dysfunctions, as well as any potential risk of illness. A daily amount to regulate of physical exercises and recreation liberates tensions and emotions, it reduces the stress and it probably deepens the sleep, reducing the insomnia.

Benefits of the physical activity: reduces the anxiety, reduced level of depression and neurosis, reduces the stress indexes, beneficial emotional effects for all of the ages and both sexes and improvement the sleep/vigil level.

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Rua Luis Afonso, 383 apto. 204. CEP 90050-310 - PortoAlegre/RS/Brazil

BENEFITS OF THE PHYSICAL ACTIVITY AND RECREATION IN THE TREATMENT OF THE INSOMNIA IN AGED PEOPLE

ABSTRACT: from the antiquity the physical activity has been prescribed in the treatment of several illnesses and as form of preventing pathologies in the human body. In modern world academic studies demonstrating the importance of the physical activity in the man's health conditions. We know that lifestyle is one of the factors that causes diseases in the present society, owed mainly to the sedentary life and unhealthy habits of feeding. Physical activity becomes indispensable to avoid several illnesses that cause disability and precocious death. When the people increase their levels of physical conditioning, they move forward towards a better quality of life with full accomplishment social, psychic, spiritual, labor, getting to surpass the stress and the depression. Several ways, the life activates and physical fitness represents economy, reducing futures medical expenses, reducing the need of lingering cares and eliminating deep responsibilities for the family and the society. The physical activity to regulate it serves as a strategy of positive health, as amusement amid the lifestyle disturbed that the people take in the technological world of the present time, where the home, the family and the humanistic values are in an inferiority plan. No pharmacological treatment of the insomnia it is important for senior people, because has as objective the patient's education regarding the cares of the therapy and his involvement with the same. The people with disturbance of the cycle sleep/vigil need to know the normal patterns of the sleep in the old age, in order to develop healthy habits that they promote the sleep, calls of hygiene of the sleep, including the inclusion to a schedule to regulate of sleep, avoiding stimulants and alcohol, limitation of the naps during the day, physical activity and regular recreation.

Key words: physical activity, lifestyle, insomnia.

AVANTAGES DE L’ACTIVITÉ PHYSIQUE ET RÉCRÉATION DANS LE TRAITEMENT DE L’INSOMNIE DANS LES GENS AGÉS

RÉSUMÉ: de l’antiquité l’activité physique a été prescrite dans le traitement de plusieurs maladies et comme forme de prévenir des pathologies dans le corps humain. Dans l’universitaire moderne mondial étude il démontre l’importance de l’activité physique dans les conditions de la santé de l’homme. Nous savons que la manière de vivre est un des facteurs qui causent des maladies dans la société courante, principalement la vie sédentaire et habituellement, la nourriture de nos jours. L’activité physique devient indispensable d’éviter des plusieurs maladies qui causent invalidité et mort précoce. Comme les gens augmentent leurs niveaux de climatisation physique, ils avancent vers une meilleure qualité de vie avec réalisation pleine social, psychique, spirituel, leabeur, commencer à surpasser le stress et la dépression. De plusieurs façons, la vie active et la mise en forme représentent économie, frais médicaux des livraisons à terme réducteurs, réduire le besoin de soins prolongés et éliminant responsabilités profondes pour la famille et la société. L’activité physique le régler sert comme une stratégie de santé positive, comme amusement entre la manière de vivre dérangee que les gens rentrent le monde technologique du temps présent où la maison, la famille et les valeurs humanistes sont dans un plan de l’infériorité. Le traitement non pharmacologique de l’insomnie il important va les gens âgés, parce qu’il a l’objectif l’éducation du malade concernant les soins de la thérapie et sa participation avec le même. Les gens avec trouble du sommeil/vigile du cycle ont besoin de savoir les modèles normaux de sommeil dans les vieux actes, en ordre à ils les habitudes saines développent qu’ils encouragent sommeil, appels d’hygiène de sommeil, y compris

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adhesión au programme régler de sommeil, éviter des stimulants et alcool, limitation des petits somme pendant le jour, activité physique et récréation de l'habitué.

Mots clef: activité physique, manière de vivre, insomnie.

**BENEFICIOS DE LA ACTIVIDAD FÍSICA Y RECREACIÓN EN EL TRATAMIENTO DE LA INSÓNIA EN LAS PERSONAS VIEJAS**

RESUMEN: desde antigüedad la actividad física se ha prescrito en el tratamiento de varias enfermedades y como el formulario de prevenir las patologías en el cuerpo humano. Estudios académicos moderno han demostrado la importancia de la actividad física en las condiciones de la salud del hombre.

Nosotros sabemos que el estilo de vida es uno de los factores que causan las enfermedades en la sociedad actual, debido principalmente a lo sedentarismo y los hábitos insalubres alimentar. La actividad física se pone indispensable para evitar varias enfermedades que causan invalidez y la muerte precoz. Cuando las personas aumentan sus niveles de condicionar físico, ellos avanzan hacia una calidad buena de vida con el logro llendo social, psíquico, espiritual, el laboral, consiguiendo superar la tensión y la depresión. De varias maneras, la vida activa y la salud representan economía, el mientras reduciendo los futuros gastos medicos, reduciendo la necesidad de cuidados prolongados y las responsabilidades profundas por la familia y la sociedad. La actividad física regular sirve como una estrategia de salud positiva, como entretenimiento en medio del estilo de vida perturbado que las personas alojan el mundo tecnológico del tiempo presente donde la casa, la familia y los valores humanistic están en un plan de inferioridad. El tratamiento no farmacológico del insomnio es importante para la mayoría de las personas, porque tienen como el objetivo la educación del paciente con respecto a los cuidados de la terapia y su envolvimiento en el tratamiento. Las personas con perturbación del ciclo sueño/vigilia necesiten saber los modelos normales del sueño en las personas viejas, los hábitos saludables promueve el sueño, llama de higiene del sueño, incluso la adherencia al horario regular de sueño, evitar estimulantes y alcohol, la limitación de las siestas durante el día, actividad física y recreación regular.

Palabras llave: actividad física, estilo de vida, insomnio.

**BENEFICIOS DA ATIVIDADE FÍSICA E RECEAÇÃO NO TRATAMENTO DA INSÔNIA EM PESSOAS IDOSAS**

RESUMO: desde a antiguidade a atividade física tem sido prescrita no tratamento de diversas enfermidades e como forma de prevenir patologias no corpo humano. No mundo moderno estudos acadêmicos tem mostrado a importância da atividade física nas condições de saúde do homem. Sabemos que o estilo de vida é um dos fatores que causa doenças na sociedade atual, devido principalmente ao sedentarismo e hábitos insalubres na alimentação, portanto a atividade física torna-se imprescindível para evitar diversas enfermidades que causam invalidez e morte precoce. A medida que as pessoas aumentam seus níveis de condicionamento físico, elas avançam em direção a uma qualidade de vida melhor com plena realização social, psíquica, espiritual, laboral, sobrepondo o estresse e a depressão. De várias formas, a vida ativa representa economia, reduzindo futuros gastos médicos e dividindo profundos encargos para a família e a sociedade. A atividade física regular serve como uma estratégia de saúde positiva, uma distração em meio ao estilo de vida conturbado que os seres humanos levam no mundo tecnológico da atualidade, onde o lar, a família e os valores pessoais estão num plano de inferioridade. O tratamento não farmacológico da insônia é importante para pessoas idosas, pois tem como objetivo a educação do paciente com relação aos cuidados da terapia e o seu envolvimento com a mesma. As pessoas com distúrbio do ciclo sono/vigília necessita conhecer os padrões normais do sono na velhice, a fim de desenvolver hábitos saudáveis que promovem o sono, chamados de higiene do sono, incluindo a adesão a um horário regular de sono, evitando estimulantes e álcool, limitação dos cochilos durante o dia, atividade física e recreação regulares.

Palavras chave: atividade física, estilo de vida, insônia.