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CHOICE OF MOTOR LOADS IN FITNESS EXERCISES

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Abstract. The popularization of a healthy lifestyle, changes in the economic and social status of city residents have led to fundamental changes in the sphere of health events and services to the population. Mass physical culture has been replaced by modern health (fitness) centers operating in isolation from medical science, without medical supervision and medical care for the people involved.

Keywords: fitness, health, method, technology, science.

INTRODUCTION

Visitors to modern health centers are not only young, healthy, well-trained people, but also middle-aged and older people, often with health problems. For this contingent of people involved, properly selected health and training programs are of particular importance, the basis of which is the correspondence of the nature and magnitude of the loads used to the functional state of the body [1, 4].

MATERIALS AND METHODS

The analysis of the current situation and the forecast for the future regarding the health of the population unite the majority of experts in the opinion about the need to implement measures to counteract the deterioration of the health of the population. They are based on the idea of prevention as a multifactorial process that maintains and improves health [3].

In the studies of a number of authors confirming the health-improving effect of fitness, an increase in the level of physical performance during training was noted [2]. At the same time, there is no doubt about the pathogenic effect on the body of uncontrolled intense loads during fitness classes and the discrepancy between the nature of the loads (types of training) and the functional state of the body [4].

G.L. Apanasenko [2] and K.P. Levchenko [3], without questioning the benefits of fitness classes, repeatedly draw attention to the need for differentiated assignment of the nature and amount of physical activity to increase the effectiveness of classes and eliminate complications, focusing on the adequacy of the proposed health methods to the functional state of the body.

RESULTS AND DISCUSSION

Attention to the diagnosis and treatment of varicose veins of the lower extremities does not weaken. This is dictated by vital necessity. Suffice it to say that among the population of civilized countries, more than 20% suffer from varicose veins of the lower extremities. In Belarus, about 2 million people suffer from this pathology. The number of patients among the working-age population reaches 23.2%. It should be considered that such a high incidence is a social phenomenon in society. Any reasonable implementation of a rational method of prevention has a positive effect on the state budget. Prevention of varicose veins is based on eliminating risk factors (factors that lead to impaired venous outflow): combating excess weight, avoiding prolonged static loads, an active lifestyle, wearing low-heeled shoes, normalizing hormonal status for women (using micro-dosed oral contraceptives or refusing to use them), proper nutrition (the diet should be rich in fiber, vitamins C and P - you should eat more vegetables, fruits and berries), you should also combat factors that increase intra-abdominal pressure (constipation, difficulty urinating, tight clothing and underwear).

Dynamic work of skeletal muscles is one of the essential factors in the regulation of venous blood circulation. Active muscle contraction, emptying deep veins, creates conditions for the blood to move to the surface at the moment of muscle relaxation. On

the contrary, prolonged static tension, squeezing deep veins, impedes the outflow of blood from superficial veins and leads to their overflow. In this regard, even with minor varicose veins of the lower extremities, physical exercises in a standing position and with great tension are contraindicated, since they are accompanied by static effort of the leg muscles and an increase in intra-abdominal pressure. The relevance of this problem served as the basis for a differentiated choice of motor loads during fitness classes, taking into account the development of varicose veins of the lower extremities.

Musculoskeletal disorders (osteochondrosis, scoliosis) were the most common pathology and were observed in 56 people (68% of those examined with diseases).

Varicose veins of the lower extremities were observed in 18 women out of 82 examined with deviations in health, which amounted to 21.9%.

Excess body weight, determined by the body mass index (BMI) in the range of 25-30 kg / m2, was observed in 26 people (24.7% of the total number of those examined), and obesity with a BMI of more than 30 kg / m2 was detected in 17 people (16%). Thus, the problem of body weight control was very relevant. At the same time, the desire to lose weight, calling it the main goal of training, was expressed by about 54% of respondents (57 people out of 105 examined). According to the method of G.L. Apanasenko, the physical development of women was assessed: 43 people had it as "average" - 41% of the subjects, "below average" - 46 people (44%), and only 15% of the subjects (16 people) received the assessment "above average".

In addition, the most significant goals of the upcoming training from the point of view of those involved were determined, among which the most prevalent were weight loss (54%) and muscle mass increase (40%).

For an objective assessment of the effectiveness of the health-improving method in the experimental and control groups, the dynamics of the distribution of the achieved health levels was studied - below average, average and above average according to the results of repeated testing.

In two groups, compared to the initial data, the number of people classified as "above average" significantly (by 35%) increased due to a decrease in the subgroup

with "average" health reserves by 30% and "below average" - by 8%. The results of the repeated medical examination revealed that 15 women who were practicing according to the proposed method and had varicose veins of the lower extremities stopped complaining of fatigue, heaviness, paresthesia and dull pain in the legs, which can be interpreted as a pronounced positive trend and high efficiency of the proposed health-improving training method.

CONCLUSION

Thus, the proposed method of differentiated selection of physical loads is an objective way to increase the effectiveness of training and eliminate complications and a rational method of disease prevention.

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