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[FITT-CORRECT: Updated dynamic and evidence-based principle of exercise prescription](#)

Objective: The FITT (Frequency, Intensity, Time, and Type) principle is an effective foundation in EP. However, the CORRECT components; C–Combination of interventions, O–Order of the Interventions, R–Repetitions, R–Rest period between sets and between sessions, E–Exercise at home, C–Cognitive domain, T–Total dose and re-evaluation plans, should be considered. The purpose of this paper was to describe the updated dynamic and evidence based FITT-CORRECT principle of EP and demonstrates its application using a case study.

Results: Literatures, related to EP, clinical reasoning and clinical decision-making, were critically reviewed. Established evidence is summarized to describe an updated dynamic and evidence-based principle of EP. The gaps within the FITT and other related principles of EP are addressed. The FITT-CORRECT principle was introduced and an effective outcome of the updated principle was demonstrated using a case study. The FITT-CORRECT principle integrates many components that are missing in the FITT and other related EP principles. Based on the reported case study, the FITT-CORRECT principle of EP should optimize patients' intervention outcomes. Physiotherapists can potentially improve their EP by utilizing the FITT-CORRECT in clinical practice.

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[Prospective study of pain and psychological symptoms of first-year university students](#)

Background: Even if pain and psychological symptoms experienced by university students are common, the prognosis of these symptoms is unknown.

Objective: To examine the incidence and the outcome of frequent musculoskeletal and psychological symptoms in a 4-year follow-up of first-year university students.

Methods: In 2008, a national random sample (N=2750) of Finnish university students completed a questionnaire concerning pain and psychological symptoms. Of the 416 first-year students, 123 responded to the same questionnaire also in their fourth study year in 2012.

Results: Of the first-year university students with frequent pain or psychological symptoms, one half (47% - 65%) reported frequent symptoms also four years later. Almost all (78% – 95%) of the symptom-free first-year students were symptom-free also in their fourth study year.

Conclusion: Our findings indicate that pain and psychological symptoms in university students are rather persistent during the first four study years. On the other hand, as half of those with frequent symptoms become symptomless and as the prognosis of symptom-free students is favourable, there is still need for further cohort studies on this issue.
