PHYSICAL ACTIVITY MAY PLAY an important role in maximizing bone mass during childhood and may have long-lasting benefits on bone health. Because peak bone mass is thought to be attained by the end of the third decade, the early adult years may be the final opportunity for its augmentation (13). Skeletal unloading, such as long bed rest, immobilization, and microgravity environment, lead to bone loss, whereas the positive effects of physical exercise on bone mass is generally acknowledged. It has been shown that dynamic loading is more effective for increasing bone mineral density (BMD) than static loading (15). Furthermore, the strain rate is more important than the number of loading trials (22).

Prepubescent children (7.5–8.2 yr) who have not yet reached their peak bone mass have shown significant development in lumbar spine bone mass by 100 two-footed drop landings off of a 61-cm-high box 3 times/wk compared with a randomized control group (6). Bassey and Ramsdale (1) found a significant increase in femoral BMD after 6 mo of 50 jumps daily among premenopausal