

2008 Physical Activity Guidelines for Americans

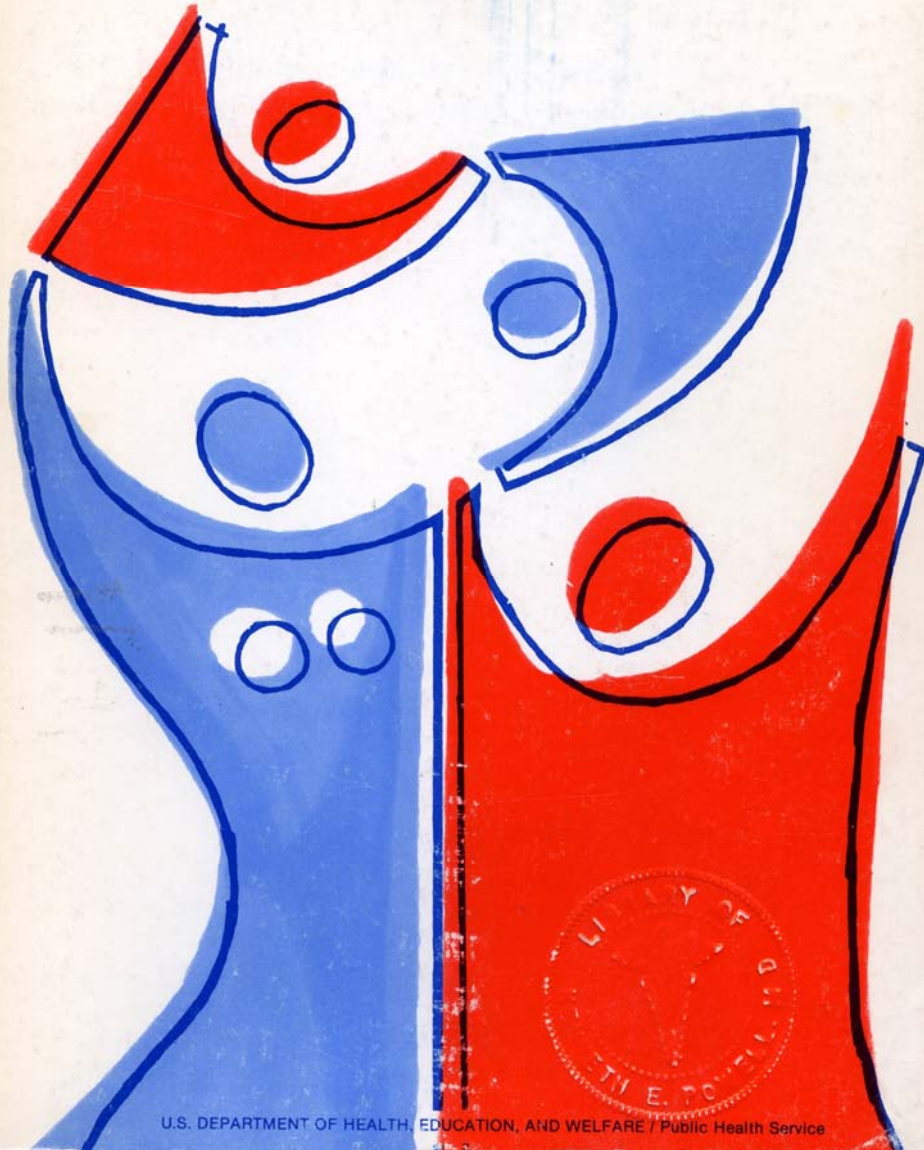
Scientific Background and Overview

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*A special thanks to Kenneth E. Powell, MD, MPH for some good ideas and slides

HEALTHY PEOPLE

The Surgeon General's Report On
Health Promotion And Disease Prevention



U.S. DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE / Public Health Service

1979 Surgeon General's Report:

“No evidence that
indolence...
is beneficial to the
cardiovascular
system.”

When did we know it?

1985
Ischemic Heart Disease
(IHD)



PUBLIC HEALTH REPORTS
Journal of the U.S. Public Health Service
VOLUME 100 NO. 2 • March-April 1985 • PUBLISHED SINCE 1878

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1960-69

1970-79

1980-89

1990-99

2000-09

2010-19

When did we know it?

1988
All-cause mortality

IHD



1950-59

1960-69

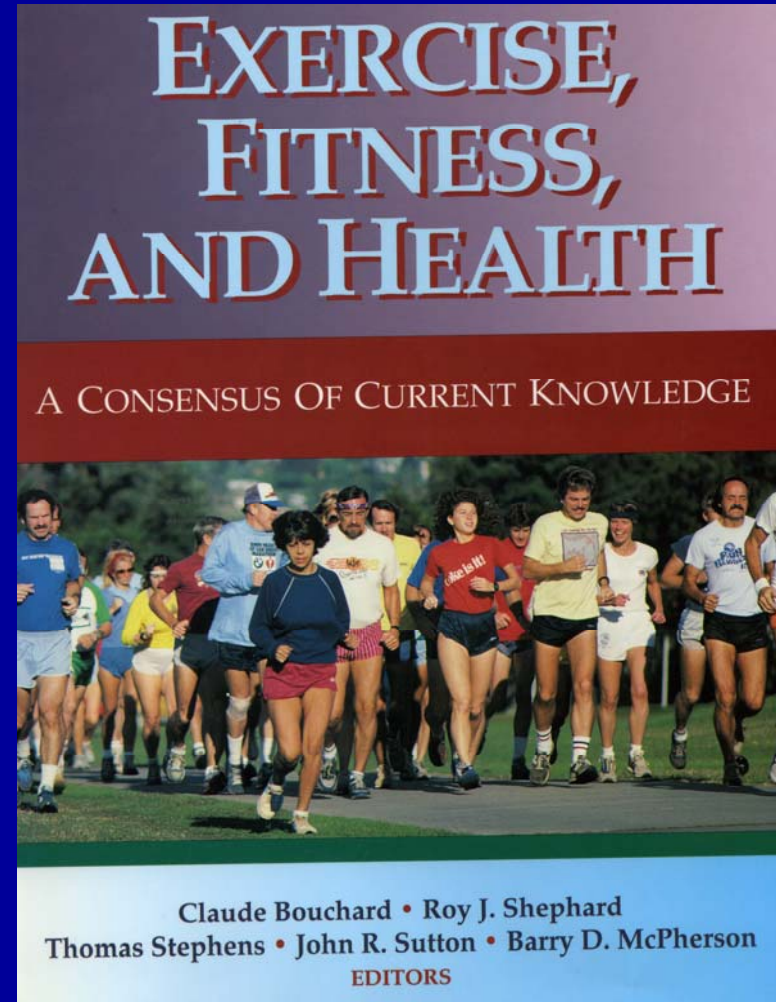
1970-79

1980-89

1990-99

2000-09

2010-19



When did we know it?



1992

Colon cancer, hypertension, anxiety

All-cause mortality
IHD



When did we know it?

1995

Diabetes, osteoporosis, depression

Colon cancer, hypertension, anxiety

All-cause mortality

IHD



Physical activity and public health. A recommendation from the Centers for Disease Control and Prevention and the American College of Sports Medicine-1995

- Pate RR, Pratt M, Blair SN, et al. JAMA 1995;273:402-7.

Physical Activity and Health: A Report of the Surgeon General, 1996

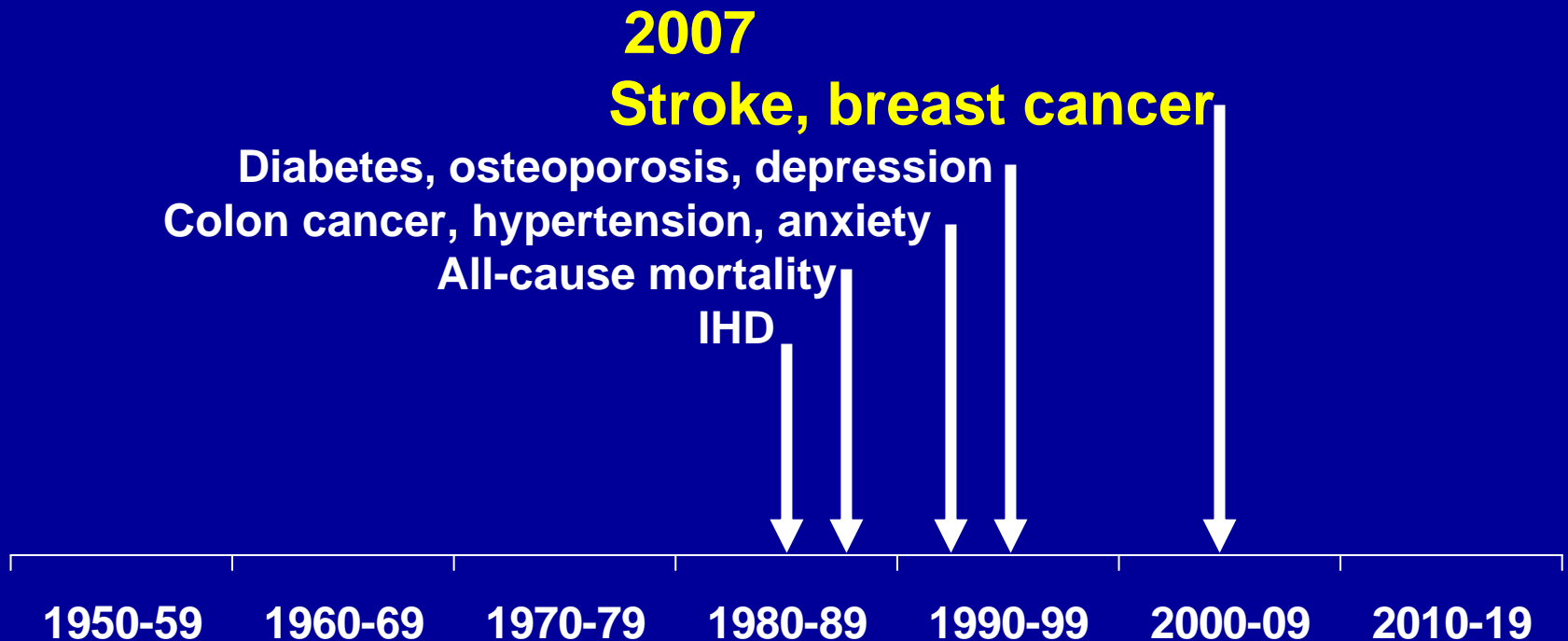
- Systematic review of the existing evidence
- Epidemiologic, clinical, and experimental studies
- Multiple health outcomes
- Methods of physical activity promotion
- Emphasized the health-related benefits of moderate-intensity physical activities.

Energy Balance and Physical Activity in U.S. Dietary Guidelines Process

2005 – To prevent weight gain and promote additional health benefits of physical activity, adults and children should accumulate

60 minutes of daily moderate-intensity physical activity in addition to activities required to maintain a sedentary lifestyle.

When did we know it?



Physical Activity and Public Health: Updated Recommendation for Adults from the American College of Sports Medicine and the American Heart Association- 2007

- Haskell, W. L., I.-M. Lee, R. R. Pate, K. E. Powell, S. N. Blair, B. A. Franklin, C. A. Macera, G. W. Heath, P. D. Thompson, and A. Bauman.. *Circulation*. 2007;116:01-13.

Institute of Medicine Workshop on the Adequacy of Evidence for Physical Activity Guidelines Development

William L. Haskell, PhD - moderator

October 23 & 24, 2006

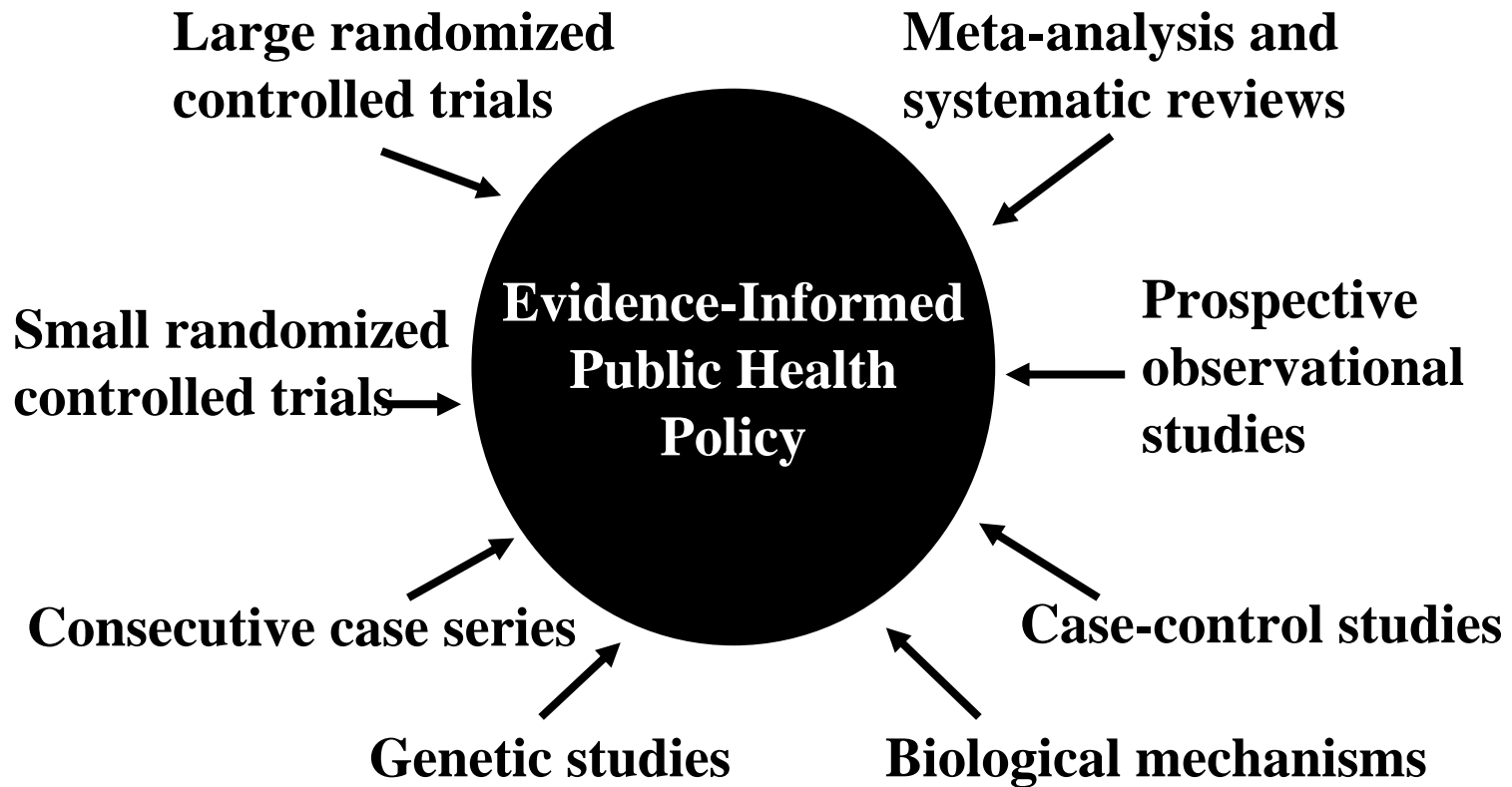
Conclusions

1. Scientific data collected over the past 50+ years strongly support numerous health benefits of a physically active lifestyle throughout the life span.
2. As the “daily activity required for living” continues to decline in an increasing proportion of the USA population, physical inactivity has become a major public health problem.
3. Generally, rates of long-term participation in programs of physical activity are low

Conclusions (cont)

4. Physical activity that contributes to good health can be delivered at the community level.
5. The USA currently lacks up-to-date, comprehensive physical activity guidelines for promoting health. Lack of such guidelines is a significant deterrent to the implementation of an effective national physical activity plan.

Research to Support Evidence-Informed Public Health Policy





“Well, then – two apples a day.”

***Physical
Activity Guidelines Advisory Committee
Report, 2008***

Physical Activity Guidelines Advisory Committee.

Chair: William L. Haskell, PhD

Vice Chair: Miriam E. Nelson, PhD

Washington, DC: U.S. Department of Health and
Human Services, 2008.

Aims of the Physical Activity Guidelines for Americans

- Stem the tide toward inactivity and its consequences
- Move toward a prevention oriented society



What Is New About the Guidelines?

- First major science review in more than a decade.
- Include a range of activity: “The more you do, the more benefits you gain.”
- Specify a total amount of activity per week. People can design their own way to meet the Guidelines.
- Address Americans over the age of 6 and specific subgroups.



Major Research Findings

- Regular activity reduces risk of many adverse health outcomes
- Some activity is better than none
- Added health benefits generally occur as amount of activity increases
- Most health benefits require at least 2 hours and 30 minutes (150 minutes) a week of moderate-intensity physical activity



Major Research Findings (cont.)

- Aerobic & muscle-strengthening activity are beneficial
- Health benefits apply to people of all types, sizes, and ages
- Health benefits occur for people with disabilities
- Physical activity can be done safely. Benefits far outweigh possible risks.



Benefits of Physical Activity

- Adults who participate in any amount of physical activity gain some health benefits.
- A total of 2 hours and 30 minutes (150 minutes) a week of moderate-intensity aerobic activity *substantially* reduces the risk of many chronic diseases and other adverse health outcomes.
- As a person moves from 2 hours and 30 minutes (150 minutes) a week toward 5 hours (300 minutes) a week, he or she gains *additional* health benefits.



Key Guidelines – Children and Adolescents (ages 6–17)

- 1 hour (60 minutes) or more of daily physical activity that is at least moderate:
 - Most of the 1 or more hours a day should be either moderate- or vigorous-intensity aerobic physical activity.
 - Do vigorous-intensity physical activity at least 3 days a week.



Key Guidelines – Children and Adolescents (ages 6–17) (cont.)

- As part of 1 or more hours of daily physical activity, include muscle-strengthening activities at least 3 days a week.
- As part of 1 or more hours of daily physical activity, include bone-strengthening activities at least 3 days a week.
- It is important to encourage young people to participate in physical activities that are age appropriate, enjoyable, and offer variety.

Key Guidelines – Adults (ages 18–64)

- Minimum levels a week
 - 2 hours and 30 minutes (150 minutes) moderate-intensity aerobic activity; or
 - 1 hour and 15 minutes (75 minutes) vigorous-intensity aerobic activity; or
 - An equal combination
- Muscle-strengthening activities that involve all major muscle groups should be performed on 2 or more days of the week.



Key Guidelines – Adults (ages 18–64) (cont.)

- For additional health benefits
 - 5 hours (300 minutes) moderate-intensity aerobic activity a week; or
 - 2 hours and 30 minutes (150 minutes) vigorous-intensity aerobic activity a week; or
 - An equivalent combination



Key Guidelines – Older Adults (ages 65 years and older)

- Follow adult guidelines. When not possible, be as physically active as abilities and conditions allow.
- Do exercises that maintain or improve balance if at risk for falling.
- Those without chronic conditions and symptoms (e.g., chest pain or pressure, dizziness, or joint pain) do not need to consult a health care provider about physical activity.



Additional Considerations

Other subgroups of the population in the Physical Activity Guidelines for Americans include:

- Persons with disabilities
- Women during pregnancy and the postpartum period
- Adults with selected chronic conditions



Physical Activity Guidelines

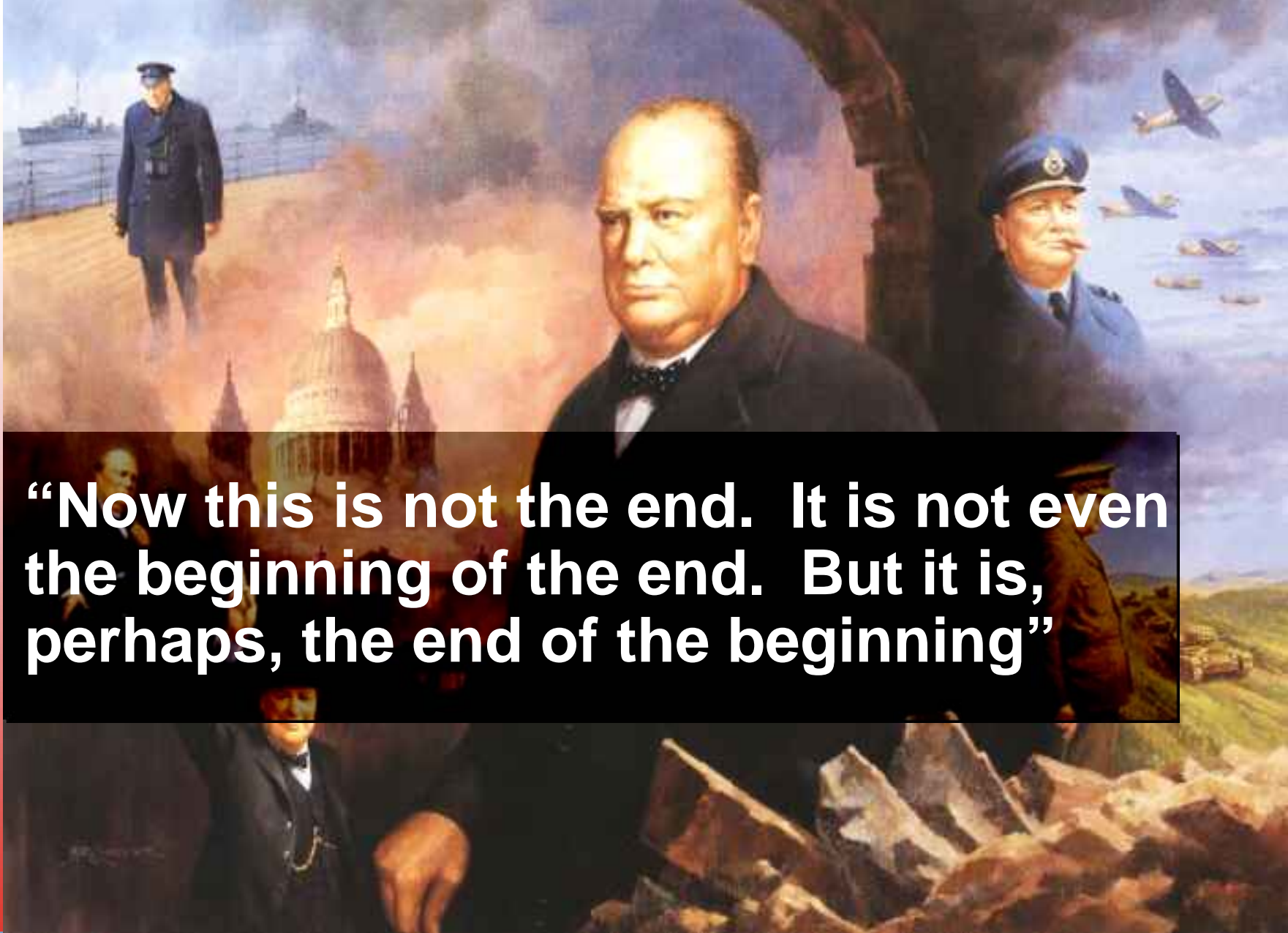
- For all individuals, some activity is better than none. More is better.
- For fitness benefits, aerobic activity should be episodes of at least 10 minutes.
- Physical activity is safe for almost everyone. The health benefits of physical activity far outweigh the risks.



What About Using Daily Activity Instead of Weekly for Adults?

- The current Guidelines recommend a total amount of aerobic activity time per week.
- The recommendation of doing 30 minutes of moderate physical activity on 5 days a week is one way to meet the minimum amount recommended.





“Now this is not the end. It is not even the beginning of the end. But it is, perhaps, the end of the beginning”

Winston Churchill, November 10, 1942