

South Asian Canadians failing to get exercise message

October 25 2009

Exercise is a wonderful way of boosting heart health, but it's proving to be a tough sell in Ontario South Asian communities, Dr. Milan Gupta told the Canadian Cardiovascular Congress 2009, co-hosted by the Heart and Stroke Foundation and the Canadian Cardiovascular Society.

South Asians recovering from coronary <u>heart disease</u> have less access to opportunities for <u>physical activity</u> than do white Caucasians, says Dr. Gupta, a Stroke Foundation researcher. They also develop coronary artery disease much earlier - in some cases in their 30s or 40s.

How South Asians approach opportunities to exercise, what to do about it, and how to counter the premature onset of coronary disease was the subject of Dr. Gupta's study.

"We know that Canadians of South Asian origin develop premature coronary heart disease, partly due to the early onset of classic risk factors," says Dr. Gupta, a cardiologist at the William Osler Health Centre in Brampton, Ontario. "Sedentary lifestyle may be an important risk factor in this group, as they are susceptible to abdominal obesity and insulin resistance."

South Asians perceived their residential neighbourhood environments as being safer compared to white Caucasians' self perceptions, and they reported significantly lower availability of home exercise equipment and less access to convenient physical activity facilities.



Patients from both groups rated their accessibility to physical activity, including the availability of exercise equipment such as a treadmill in their homes, the availability of sidewalks and enjoyable scenery in their neighbourhoods, and having recreation facilities such as parks, trails, and gyms within a five minute drive.

"The bottom line is that, after we have adjusted for baseline differences, South Asians have less access to home equipment such as exercise bikes or treadmills, and they make less use of formal exercise facilities like gyms and community centres," says Dr. Gupta. It may be that these patients perceive themselves as 'sick' and not able to exercise, or they may not fully appreciate the health benefits of exercise, yet for many, it's key to improving their heart health.

Earlier research from Dr. Gupta's group reveals that South Asians are also less likely to join or complete a cardiac rehab program following heart attack, when compared to white Caucasians. Cardiac rehab, which combines regular exercise with intensive education around lifestyle changes, has been shown to improve outcomes following a heart attack.

Regardless of one's racial background or sex, people living with heart disease and those at risk can benefit from physical activity. It's never too early or late to make a behavioural change.

"People of South Asian descent often have more risk factors for heart disease and stroke," says Heart and Stroke Foundation spokesperson Dr. Beth Abramson, noting that research has shown that they are more likely to have high blood pressure and diabetes and are at greater risk of heart disease and stroke than the general population. Many of these risks can be prevented by lifestyle changes.

How does one get the message out about the power of physical activity to keep hearts healthy?



"It's interesting that while South Asians perceive their neighbourhoods as safe, they aren't using them for physical activity. Why not? We need to increase awareness of simple but powerful effective ways of getting the heart moving," she says. "A walk with a friend around the block — or in your local mall on very hot or cold days - is a great heart-healthy activity." She recommends that patients with heart disease talk to their cardiologists about simple ways to integrate physical activity throughout their day. She suggests all of us can:

- Climb the stairs instead of taking the escalator or elevator
- Get off the bus or subway a stop earlier and walk
- Park the car further away from your destination
- Walk to the corner store, bank and post office
- Stand while talking on the phone

Adults need 30 to 60 minutes of moderate activity most days of the week. Doing 10 minutes at a time that add up to 30 minutes or more during the day works, too. Physical activity can dramatically lower one's risk of heart disease and stroke and helps prevent and control risk factors such as high blood pressure, high blood cholesterol, and obesity. Before starting a physical activity program, people should speak to their healthcare provider to discuss what is right for them.

The Heart and Stroke Foundation has developed heart health information in Tamil, Urdu, Punjabi, and Hindi. "Being aware of the problem is the first step in solving it," says Dr. Abramson. "It's essential we communicate the heart health benefits of physical activity and how to get it to this community while addressing their perceived barriers."



A total of 2,673 patients hospitalized with coronary artery disease participated in Dr. Gupta's study. One hundred and seventy one patients identified themselves as South Asian and 1,301 identified themselves as white Caucasian. The average age of the South Asians was 62; for the white Caucasians it was 65.

These findings may be explained by differences in cultural preferences, socioeconomic status, issues in survey translation, lack of cultural-sensitivity in survey items, recreation centres offering services in Englishonly, or reduced awareness of the health benefits of physical activity.

Source: Heart and **Stroke** Foundation of Canada

Citation: South Asian Canadians failing to get exercise message (2009, October 25) retrieved 17 July 2024 from https://medicalxpress.com/news/2009-10-south-asian-canadians-message.html

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