

Prevention still the best medicine

October 5 2010, By Kelly Rankin



Although the debate continues about the screening and treatment of illnesses such as breast cancer, osteoporosis and cardiovascular disease, there is one fundamental piece of advice all physicians agree on: maintain a healthy lifestyle for preventive reasons.

“Diet, exercise and avoidance of toxins, those three things are the cornerstone of a healthy lifestyle,” said Professor Doug Richards of the Faculty of Physical Education and Health and medical director of the David L. MacIntosh Sport Medicine Clinic. However, until recently, there hasn’t been much research to suggest why.

“The whole field of looking at physical activity and its health effects has exploded in the last 15 to 20 years,” said Richards. “The major funding agencies are starting to respond by providing more grants to researchers

investigating the determinants of health through lifestyle.”

In 1996, the U.S. Surgeon General’s office published its first report on physical health and activity. It included evidence that lifestyle factors such as moderate aerobic activity and good nutrition benefited cardiovascular health. However, there were fewer answers on the effects of lifestyle on illnesses such as infectious diseases or cancer.

The focus has since broadened, with more research being done on the effects of lifestyle on a variety of illnesses.

“The only type of cancer that has a direct correlation with physical activity, independent of the other measures of health, is colon cancer,” said Richards. “It is the one type of cancer for which we can tell people if you exercise you will reduce your risk.”

According to the Canadian Breast Cancer Foundation (CBCF) women who are overweight have a higher risk of breast cancer. “With [breast cancer](#) we see a correlation between activity levels and reduced cancer rates but statistically that is linked to the effect of exercise on obesity,” said Richards.

In fact, obesity puts women at risk for numerous health problems.

Obesity is defined by a certain percentage of [body fat](#); for women, having 30 per cent or more body fat is considered obese. Another definition is based on Body Mass Index (BMI) which is calculated using this equation; $BMI = \text{weight(kg)}/\text{height(m)}^2$.

According to the Canadian Guidelines for Body Weight Classification in Adults an adult is overweight and at increased risk for developing health problems if she is 25 to 30 per cent over the suggested BMI ratio.

However, Richards cautions that the BMI on its own doesn't accurately measure health risk and other body characteristics; for example body fat percentage or bone density, should be taken into consideration.

"Being underweight is not healthy either, women in our society face both ends of the problem where BMI is concerned," said Richards.

Fifteen per cent of Canadian women — mostly young women around the age of 16 — have a BMI below 20 per cent. Poor exercise and nutrition at a young age could lead to problems such as poor bone density later in life.

"I don't want to treat [osteoporosis](#). I want more physical education teachers in schools and would like to teach girls they need to eat enough food to build muscle and bone," said Richards.

Richards thinks of health promotion as a large scale social project. If he had his way, the minister of [health](#) promotion and sport would work with all ministerial portfolios to ensure the promotion of a [healthy lifestyle](#) for all Canadians.

"Building healthy lifestyles for Canadians is a joint venture between individual Canadians and all levels of government," added Richards.

Provided by University of Toronto

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