

New study suggests using sedentary behavior counseling in primary care

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(Medical Xpress)—Although primary care physicians take care of many aspects of health and disease, little is known about how they can change sedentary behavior through counseling, according to researchers at The University of Texas Health Science Center at Houston (UTHealth). Results from a new study suggest encouraging patients to decrease the time they spend sitting each day may be feasible in the primary care setting.

"Reducing sedentary time can be done by virtually everyone and requires smaller changes in [energy expenditure](#) than meeting physical activity guidelines, which usually entails a complex behavior change particularly for inactive patients," said Kerem Shuval, Ph.D., principal investigator and assistant professor of epidemiology at The University of Texas School of Public Health Dallas Regional Campus, part of UTHealth.

"Reducing sedentary time helps promote health and [primary care physicians](#) can play a major role in modifying their patients' [sedentary behavior](#), particularly because adults spend many of their waking hours each day sitting or in passive leisure activities."

Results were recently published online in the [British Journal of Sports Medicine](#).

Unlike physical activity counseling, which has been investigated over the years, sedentary behavior counseling is a new term used in this study to describe a dialogue with a patient about the harmful effects of prolonged uninterrupted sitting. The average amount of time spent sitting or

reclining during [waking hours](#) in the United States is almost 8 hours per day, according to data from the National Health and [Nutrition Examination Survey](#).

In this study, Shuval and his colleagues asked adult primary care patients whether their providers asked, advised and encouraged them to modify their physical activity and sedentary behavior in the past year. The "5A" (ask, advise, agree, assist and arrange) framework was used to examine these questions.

Study results indicated that within the last year, only 10 percent of patients received sedentary behavior counseling compared to 53 percent who received physical activity counseling. No patients received a plan pertaining to decreasing sedentary behavior; however, 14 percent were provided with a written plan for increasing physical activity. More social support and specific strategies for [behavior change](#) were provided as it relates to increasing [physical activity](#) than decreasing sedentary behavior. Obese patients were more likely to receive counseling to decrease their sitting time.

"Accumulating evidence has found prolonged sitting to be associated with increased risk for chronic diseases such as obesity and type 2 diabetes as well as premature death," said Shuval, who is also an adjunct professor at The University of Texas Southwestern Medical Center (UT Southwestern) and a member of the Harold C. Simmons Cancer Center at UT Southwestern.

Sedentary behavior has emerged as a new field of scientific investigation due to the detrimental health effects of prolonged sitting, according to Shuval. A number of studies have begun to explore the impact of interventions specifically focused on reducing and breaking up sedentary time.

"Our study provides initial insight into sedentary behavior counseling practices in the [primary care](#) setting," said Shuval. "Additional research is needed prior to developing programs to change patients' sedentary behavior." Several countries have already begun to provide general recommendations to decrease sedentary time.

Provided by University of Texas Health Science Center at Houston

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