

A how-to guide to prescribing exercise for chronic health conditions

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Exercise helps to alleviate the symptoms of many chronic health conditions such as knee osteoarthritis, low back pain, chronic obstructive pulmonary disease (COPD), diabetes, heart disease and more, yet it is often overlooked as a treatment. A review in *CMAJ (Canadian Medical Association Journal)* aims to provide an easy-to-use how-to guide for health care professionals to prescribe exercise for specific chronic diseases.

"Many doctors and their patients aren't aware that exercise is a treatment for these chronic conditions and can provide as much benefit as drugs or surgery, and typically with fewer harms," states lead author Dr. Tammy Hoffmann, Centre for Research in Evidence-Based Practice, Bond University, Robina, Australia.

According to the authors of the review, exercise is often underprescribed in favour of pharmaceutical or surgical solutions, despite exercise having similar efficacy. Lack of awareness among physicians and patients about the effectiveness of the different types of exercise, poor descriptions of exercises in studies and lack of training for [health care](#) practitioners are factors affecting underprescription.

"Unless clinicians can access sufficient details about exercise interventions to prescribe them, they either guess at how to use them or do not use them at all," writes Dr. Hoffman with coauthors. "Even when a family physician may not be involved in delivering the exercise intervention, they should know the main elements of an evidence-based

exercise intervention so they can discuss with patients and refer appropriately."

The review, based on recent evidence, presents exercise by disease type in easy-to-read boxes, listing the type of health care provider to administer the exercise, materials needed, benefits and other information such as contraindications. Some exercises can be prescribed by family physicians, while others need referrals to [health care professionals](#) who have specific expertise in [exercise therapy](#).

Some examples:

- Osteoarthritis of the knee and hip: muscle strengthening, aerobic and range-of-motion exercises to help alleviate pain and improve function in people of all ages
- Low back pain: individually supervised exercise sessions by a physiotherapist over 8-12 weeks with both a supervised component and home-based exercises
- Prevention of falls: supervised group or individual exercises by a physiotherapist or trained health professional with home exercises to improve balance, strength and coordination.

Exercises for COPD, diabetes, [chronic fatigue syndrome](#), heart disease and heart failure are also included in the how-to guide.

"Exercise is an effective but neglected treatment for many [chronic conditions](#)," write the authors. "However, similar to surgery, exercise is not a single entity but must be tailored to the condition. If [exercise](#) interventions are not implemented in a manner that is consistent with how they were used in trials (e.g., at a lower intensity, shorter duration or with different components), the fidelity of the intervention is compromised, and clinicians and patients cannot expect to realize outcomes similar to those achieved in the trials."

More information: *Canadian Medical Association Journal*,
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