

A reduction in sitting time could mean a lower body fat percentage for office workers

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An intervention to reduce workplace sitting time has shown potential health benefits, in results published today in the *International Journal of Epidemiology*.

Researchers from the University of Southern Denmark, the National Research Centre for Prevention and Health, and the University of Sydney conducted a multicomponent work-based intervention to reduce sitting time and prolonged sitting periods. The results, which were followed up at one month and three months, showed a reduction of 0.61 percentage points in [body fat percentage](#). This was as a result of 71 minutes shorter sitting time during working hours after one month.

317 office workers in nineteen offices across Denmark and Greenland were randomly put into the intervention or control groups. The [intervention](#) included environmental office changes and a lecture and workshop, where workers were encouraged to use their sit-stand desks. By wearing an accelerometer device, the researchers were able to measure results across a five day working week.

After one month, participants in the [intervention group](#) sat down for 71 minutes less in an 8 hour work day than the control group. This reduced to 48 minutes after three months. The number of steps per workday hour was seven per cent higher at one month and eight per cent higher at three months. Relatively few people complained of any pain as a result of standing more, with less than six per cent of people reporting negative consequences.

Co-author of the paper, Professor Janne Tolstrup, commented: "A reduction in [sitting time](#) by 71 minutes per day and increases in interruptions could have positive effects and, in the long run, could be associated with [reduced risk](#) of heart diseases, diabetes and all-cause mortality, especially among those who are inactive in their leisure time."

More information: Take a Stand!-a multi-component intervention aimed at reducing sitting time among office 5 workers-a cluster randomized trial; I.H. Danquah, S. Kloster, A. Holtermann, M. Aadahl, A. Bauman, A.K. Ersbøll and J.S. Tolstrup; *International Journal of Epidemiology*; DOI: [10.1093/ije/dyw009](https://doi.org/10.1093/ije/dyw009)

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