

Psychosis associated with low levels of physical activity

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A large international study of more than 200,000 people in nearly 50 countries has revealed that people with psychosis engage in low levels of physical activity, and men with psychosis are over two times more likely to miss global activity targets compared to people without the illness.

The research, led by King's College London and the South London and Maudsley (SLaM) NHS Foundation Trust, also offers important insights into the barriers that prevent people with psychosis from engaging in regular physical activity. This data will inform interventions aimed at helping people with psychosis to be more active and ultimately, to improve their mental and physical health.

People with psychosis die up to 15 years before the general population, largely due to <u>cardiovascular disease</u>. Although pursuing an active lifestyle is thought to be just as effective in preventing cardiovascular disease as medication (e.g. statins), a number of small studies have suggested that people with psychosis tend to engage in low levels of physical activity.

To stay healthy, the World Health Organization (WHO) recommends that adults aged 18-64 should do at least 150 minutes of moderate-intensity physical activity throughout the week, including walking, cycling, household chores or sport. Physical inactivity is the fourth leading cause of avoidable death and is as harmful as smoking, according to the WHO.



The researchers from King's sought to examine whether people with psychosis are meeting the WHO's recommended levels of physical activity.

In their study, published today in *Schizophrenia Bulletin*, the researchers collected data from the World Health Survey, which comprises more than 200,000 people aged 18-64 from nearly 50 low-and-middle-income countries. These individuals, who were living in their local communities at the time of the study, were divided into three groups: people with a diagnosis of psychosis, those with psychotic symptoms but no diagnosis and a control group (of people with no diagnosis of psychosis and no symptoms in the past 12 months). The participants were interviewed to ascertain who had/had not met recommended levels of physical activity.

Overall, people with psychosis were 36 per cent more likely not to meet the recommended <u>physical activity levels</u> compared to controls. When the researchers looked at men only, those with psychosis were over two times more likely not to meet the recommended levels compared to people in the control sample.

When examining potential barriers to physical activity, the researchers found that mobility difficulties, pain, depression and cognitive impairment explained low levels of physical activity in people with psychosis. These insights will be used to guide the 'Walk this Way' study at King's College London, funded and led by the NIHR Collaboration for Leadership in Applied Health Research and Care (CLAHRC) South London.

Dr Brendon Stubbs from King's College London and the South London and Maudsley NHS Foundation Trust (SLaM), said: 'Understanding and overcoming these barriers could be an important strategy to help people with psychosis be more active, and potentially to reduce their risk of cardiovascular disease.



'Our Walk this Way study is the first to specifically target the reduction of a sedentary lifestyle, and an increase in activity levels, in people with psychosis. We will investigate whether health coaching and providing people with pedometers can increase daily activity levels and hope that if successful, this programme will be offered more widely to people with psychosis.'

Dr Fiona Gaughran, also of King's College London and SLaM, said: 'People with psychosis have high levels of cardiovascular risk and die earlier as a result. Since physical activity is a key protective factor for cardiovascular disease, our finding that men with psychosis are particularly inactive means that they may benefit most from interventions to increase physical activity and reduce social isolation.

'It is unclear why men with <u>psychosis</u> showed such low levels of <u>physical</u> activity, although perhaps the earlier onset of illness typically seen in males means that lifestyle habits may have been altered over time by aspects of the illness or its management, such as negative symptoms, sedating medications or hospital admissions. Our data suggests that depression may also be important, which makes sense. Understanding these factors and what we might do about them is an important area for future research.'

More information: *Schizophrenia Bulletin*, DOI: 10.1093/schbul/sbw111

Provided by King's College London

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