

USPSTF still says individualize decision for diet, exercise counseling

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The U.S Preventive Services Task Force (USPSTF) recommends that

clinicians individualize the decision to offer counseling interventions for healthy diet and physical activity to their patients without cardiovascular disease (CVD) risk factors. These recommendations form the basis of a final recommendation statement published in the July 26 issue of the *Journal of the American Medical Association*.

Carrie D. Patnode, Ph.D., M.P.H., from Kaiser Permanente Evidence-based Practice Center in Portland, Oregon, and colleagues conducted a [systematic review](#) to synthesize the evidence on the benefits and harms of behavioral counseling interventions to promote a healthy diet and physical activity among adults without known CVD risk factors. Data were included from 113 randomized controlled trials (RCTs), with 129,993 participants. Three RCTs reported CVD-related outcomes. In one study, no difference was observed between the groups for any CVD outcome. In a combined analysis of two RCTs with 1,203 participants, there was a significant association of the intervention with nonfatal CVD events and fatal CVD events at four years (hazard ratios, 0.27 and 0.31, respectively). Small, statistically significant reductions were seen in continuous measures of blood pressure, low-density lipoprotein cholesterol level, and other outcomes for diet and physical activity behavioral counseling interventions versus control conditions at six months to 1.5 years of follow up.

Based on these findings, the USPSTF concludes that behavioral counseling interventions have a small net benefit on CVD risk in adults without CVD [risk factors](#) with moderate certainty (C statement). Clinicians should individualize the decision to offer or refer adults to behavioral counseling interventions to promote a [healthy diet](#) and [physical activity](#).

"When determining which patients might benefit from counseling interventions, [health care professionals](#) should consider the patient's goals and motivations, activity, and ability," a task force member said in

a statement.

More information: [Evidence Report](#)
[Final Recommendation Statement](#)
[Editorial 1](#)
[Editorial 2](#)
[Editorial 3](#)

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