

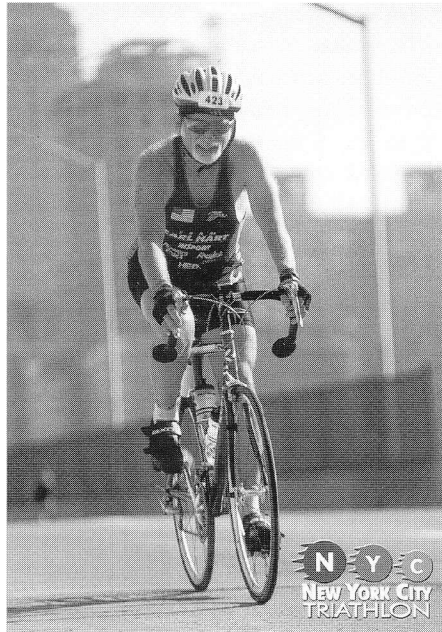
Lifestyle Exercise for the Exercise Prescription

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In the *AMA*J Spring 2008 issue, I presented a brief overview of the American College of Sports Medicine's program *Exercise is Medicine*™ in "Message from the Editor." In the last issue (Spring/Summer 2009), I described the textbook for the program that Dr. Edward Phillips, Director of the Institute for Lifestyle Medicine at Harvard, and I published earlier this year (1). The primary focus of the program is to help clinicians effectively provide the prescription for regular exercise to their patients and clients.

The program has two different approaches to help individuals become regular exercisers and engage in regular physical activity. Quoting from the book (2), "Physical activity is 'any body movement produced by skeletal muscles that results in a substantive increase over the resting energy expenditure.' *Leisure-time physical activity* is 'an activity undertaken in the individual's discretionary time that leads to any substantial increase in the total daily energy expenditure.' [Scheduled] exercise is 'a form of leisure-time physical activity that is usually performed on a repeated basis over an extended period of time (exercise training) with a specific external objective such as the improvement of fitness, physical performance, or health.' Fitness is defined as the ability to do physical work over time, using the musculo-skeletal and cardiovascular systems. Regular exercise can also be engaged in as part of daily living with various activities like brisk walking and stair-climbing built into one's regular routine. . . . [T]his is known as *lifestyle exercise*."

The first of these is called "Leisure-Time Scheduled Exercise" (LTSE), which is familiar to most *AMA*J readers. The less familiar term is "Lifestyle Exercise" (LE). It is important to note that "regularity," exercising on a repeated basis over an extended period of time, is a regular part of the standard



definition of "exercise." Therefore, if LTSE or LE is to be effective in producing the desired results for the person doing it, the physical activity undertaken must be done regularly.

As described in Melissa and Doug Aukerman's article on page 5, the USDHHS *Physical Activity Guidelines for Americans* were published in October 2008 (3). There are several sets of guidelines for different age groups and states of health. For example, for adults aged 18-64, the recommended minimums are: moderate intensity aerobic activity for a minimum of 30 minutes on five days each week; or vigorous intensity aerobic activity for a minimum of 20 minutes for three days each week, or a combination of the two to meet the recommended minimum. It is also recommended that muscle-strengthening activities that are of moderate or high intensity and involve all major muscle groups be done on two or more days a week, as these activities provide additional health benefits.

Both "moderate intensity" and "vigorous intensity" exercise can be defined in such terms as Mets or VO₂reserve;

however, it is likely to be better understood by patients when moderate intensity exercise is defined in such terms as walking briskly, doing water aerobics, bicycling slower than 10 miles per hour, playing doubles tennis, or performing ballroom dancing. Vigorous intensity exercise can be defined as racewalking, jogging/running, swimming laps, playing singles tennis, bicycling 10 miles per hour or faster, jumping rope, or hiking uphill. A more subjective way to put this is that a person doing moderate intensity aerobic activity can talk, but not sing, while a person doing vigorous intensity activity cannot say more than a few words without pausing for a breath.

For most of us it is fairly easy to provide training programs for LTSE. It is more challenging to come up with a series of "lifestyle" activities for patients who cannot find the time to engage in LTSE. The LE approach may seem easier to many patients but it is essential to point out several features of the LE approach that may not be so simple. As noted above, "regularity must be at the center of the physical activity if it is to be effective in producing the desired results for the person doing it." Thus, careful planning is essential if success is to be achieved but once one gets into the habit, the LE approach can work very well.

What are some of the recommended activities one can do regularly with the LE approach? Always walk briskly and when traveling between floors in a building, use the stairs. If the distance is not too great, walk to work. If driving to work is a necessity, park as far from the building entrance as possible. Park far from the entrances of shopping malls and supermarkets, as well (if safety is not a factor). If public transport is used to get to work, get off a stop or two early and walk the rest of the way.

There are also certain household activities that "count." Some are done on a regular basis, while others are

continued on page 22

It does take planning, dedication, and concentration every day to reach the recommended 150 minutes per week of "Lifestyle Exercise."

continued from page 17

done only intermittently but can be counted when they are: heavy house cleaning such as vacuuming, sweeping, and mopping; washing the car; washing house windows; cutting grass with a push mower; shoveling snow (with caution unless one is already in shape); and leaf-raking (ditto).

Activities can also be worked into the morning routine such as doing straight leg raises for two minutes while brushing teeth, performing a short (5-minute) bout of an exercise video, doing the "wall sit" (back against the wall, slowly sliding up and down to just above the 90 degree angle for the knees) while flossing teeth, and straight-leg raising while using the blow dryer. When combining exercise with other elements, however, safety may become a factor.

There are exercises that one can do while at work such as walking to a colleague's office to deliver a message rather than using the phone or sending e-mail. If a meeting is planned with one to three people, why not talk while walking? Or take a "walking" coffee break instead of sipping it at one's desk. A set of resistance bands can be kept in the office (and at home) to use at various times. Instead of driving to get lunch or having it delivered, walk to and from the lunch destination.

Dog-walking is another excellent way to add LE to the daily schedule (that is walking and not allowing the dog to stop at every scent). If dog-ownership is out of the question but you still enjoy canine companionship, ask to walk the neighbor's dog. They may appreciate the break!

These are just a few examples of how regular exercise can be built into the course of one's daily life. But as noted at the outset, it does take planning, dedication, and concentration every day to reach the recommended 150 minutes per week. One approach to solving this

problem is to mix and match. Assuming that one works five days a week, doing a 30- to 45-minute exercise walk on each weekend day will leave only 60 to 90 minutes of LE for the five remaining weekdays.

The most important points to stress with patients are that goal-setting is central to the whole enterprise (see "The Ordinary Mortals[®] Pathway to Mobilizing Motivation," *AMAAJ* Spring/Summer 2009) and that they should focus on the regular first, then the exercise. It is the *regular* part of exercise that is always the hardest.

Ed note: Comments on this subject are welcome, and may be published.

REFERENCES

1. Jonas S, Phillips EM. *ACSM's Exercise is Medicine™: A Clinician's Guide to Exercise Prescription*. Baltimore, MD: Lippincott, Williams, & Wilkins; 2009. (This book is available at a 20% discount at www.ordinarymortals.info.)
2. Ibid, Chapter 2 (77-78); Bouchard C, Shephard RJ, Stephens T, et al, ed. *Physical Activity, Fitness, and Health: International Proceedings and Consensus Statement*. Champaign, IL: Human Kinetics; 1994.
3. United States Department of Health and Human Services. *2008 Physical Activity Guidelines for Americans*, <http://www.health.gov/paguidelines/guidelines/default.aspx>.

ADDITIONAL RESOURCES

1. Woods R, Jordan C. *Energy Every Day*. Champaign, IL: Human Kinetics; 2009.
2. Whyte G. *Fit in 5*. Champaign, IL: Human Kinetics; 2008.