

30 Minutes The Benefits of for Life

30 Minutes or More of Daily Brisk Walking

When

Daily

How Long

30 minutes daily or 15 minutes 2x/day or 10 minutes 3x/day

Intensity

3-6 METs or 150 Kcal/day energy expenditure

Examples: walking 2.5 mph is 3 METS
walking 3.5 mph (brisk) is 4 METS
walking 4.0 mph is 5 METS
walking 4.5 mph is > 6 METS

Benefits

- Reduce the risk of Cardiovascular Disease (CVD) and atherosclerosis. If everyone walked for 30 minutes daily at 3-4 mph it would decrease the number of CVD deaths per year by 30% (284,886 deaths/year).
- Reduce the risk of Diabetes (Type 2) by 58% in persons at high risk.
- Reduce risk of Stroke by 24% walking 2.5 hours per week as compared to non-exercisers. Further reduced the risk of Stroke by 46% walking 5 hours per week as compared to non-exercisers.
- Reduce risk of breast cancer by 20% in White and African-American women who regularly exercise for 7-15 MET/week/year compared to inactive females.
- Reduced risk of mortality with patients who have been diagnosed with breast cancer by 25% compared to sedentary individuals. Further reduced risk by 50% if walked 3-8 hours per week.
- Reduce resting blood pressure.
- Reduce the risk of Pancreatic Cancer among overweight individuals with a BMI of 25kg/m² or greater.
- Reduce risk of Osteoporosis.
- Reduce risk of Cholecystectomy (gall bladder removal) in women by 31%.
- Reduced risk of depression among elderly adults. In elderly adults classified with major depressive disorder, a 50% reduction of the disorder occurred after 4 months of an exercise program.
- Improved overall aerobic fitness and functional capacity.
- Daily walking of 30 minutes for 12 weeks has been shown to lower overall body weight and decrease percent body fat.
- If we just walked briskly 30 minutes each day, healthcare as we know it would radically change in this country.

Of Note:

- ▶ Currently, up to 2/3 of men and 3/4 of women in the UK do not achieve this level of activity.
- ▶ In the United States 32% of Non-Hispanic Blacks, 22% of Mexican-Americans, and 18% of Whites are considered to have a low fitness level.



References

- Pate R, Pratt M, Blair N, Haskell W, Macera C, Bouchard C, Buchner D, Ettinger W, Heath G, King A. Physical Activity and Public Health. A Recommendation from the centers for Disease Control and Prevention and the American College of Sports Medicine. *JAMA*. 1995;273(5):402-407.
- Wei M, Kampert JB, Barlow CE, Nichaman MZ, Gibbons LW, Paffenbarger RS, Blair SN. Relationship between low cardiorespiratory fitness and mortality in normal-weight, overweight, and obese men. *JAMA*. 1999;282(16):1547-53.
- Knowler WC, Barrett-Connor E, Fowler SE, Hamman RF, Lachin JM, Walker EA, Nathan DM. Diabetes Prevention Program Research Group. Reduction in the incidence of type 2 diabetes with lifestyle intervention or metformin. *New England Journal of Medicine*. 2002;346(6):393-403.
- Roberts C, Nosratola D, Vaziri R, Barnard J. Effect of Diet and Exercise Intervention on Blood Pressure, Insulin, Oxidative Stress, and Nitric Oxide Availability. *Circulation*. 2002;106:2530.
- Manson JE, HU F, Rich-Edwards J, Colditz G, Stampfer J, Willett W, Speizer F, Hennekens C. A prospective Study of Walking as Compared With Vigorous Exercise in the Prevention of Coronary Heart Disease in Women. *New England Journal of Medicine*. 1999;341(9):650-658.
- Hu F, Stampfer M, Colditz G, Ascherio A, Rexrode K, Willett W, Manson J. Physical Activity and Risk of Stroke in Women. *JAMA*. 2000;283(22):2961-2967.
- Lee I, Hennekens C, Berger K, Buring J, Manson J. Exercise and Risk of Stroke in Male Physicians. *Stroke*. 1999;30(1):1-6.
- Leitzmann M, Rimm E, Willett W, Spiegelman D, Grodstein F, Stampfer M, Colditz G, Giovannucci E. Recreational Physical Activity and the Risk of Cholecystectomy in Women. *New England Journal of Medicine*. 1999;341(11):777-784.
- Thune I, Brenn T, Lund E, Gaard M. Physical Activity and the Risk of Breast Cancer. *New England Journal of Medicine*. 1997;336(18):1269-1275.
- Strawbridge W, Deleger S, Roberts R. Physical Activity Reduces the Risk of Subsequent Depression for Older Adults. *American Journal of Epidemiology*. 2002;156(4):328-334.
- Tully M, Cupples W, Chan K, McGlade K, Young I. Brisk Walking, Fitness, and Cardiovascular Risk: A Randomized Controlled Trial in Primary Care. *Preventive Medicine*. 2005;41:622-628.
- Louis J, Ignarro, et al. Nutrition, Physical Activity, and Cardiovascular Disease: An Update. *Cardiovascular Research*. 2006;10:1016.
- Babyak M, Blumenthal J, Herman S, Khatri P, Doraiswamy M, Moore K, Craighead E, Baldewicz T, Krishnan K. Exercise Treatment for Major Depression: Maintenance of Therapeutic Benefit at 10 months. *Psychosomatic Medicine*. 2000;62:633-638.
- Bernstein L, Patel A, Ursin G, Sullivan-Halley J, Deapen D, Berlin J, Daling J, McDonald J, Norman S, Malone K, Strom B, Liff J, Folger S, Simon M, Burkman R, Marchbanks P, Weiss L, Spiro R. Lifetime Recreational Exercise Activity and Breast Cancer Risk Among Black Women and White Women. *Journal of National Cancer Institute*. 2005;97(22):1671-1679.
- Bond B, Perry A, Parker L, Robinson A, Burnett K. Dose-Response Effect of Walking Exercise on Weight Loss. How Much is Enough? *International Journal of Obesity and Related Metabolic Disorders*. 2002;26(11):1484-1493.
- Sanders L, Duncan G. Population-Based Reference Standards for Cardiovascular Fitness Among U.S. Adults: JHANES 1999-2000 and 2001-2002. *Journal of the American Medical Association*. 2006;38(4):701-701.