council on health promotion

Increasing physical activity in patients: By asking the questions, we can make a difference

ake a moment and ask yourself, how many days per week do you engage in moderate (or higher intensity) physical activities (like a brisk walk), and then, on those days, how many minutes do you engage in activity at that level? Multiply the numbers and see if you meet the Canadian Physical Activity Guidelines of 150 minutes of moderate-tovigorous physical activity per week.

How long did that take? Did it make you reflect on your physical activity habits?

Both physicians and the public are looking for ways to engage in preventive health measures. Many physicians are appropriately concerned that addressing physical activity will take too long, but it doesn't necessarily have to.

The Canadian Medical Association (CMA) encourages physicians to promote physical activity, as physicians are lifestyle change agents who remain the preferred source of health information for many people.1 Last year, the CMA's General Council passed a resolution supporting the inclusion of physical activity questions in the vital signs section of EMRs. Doctors of BC passed a similar resolution earlier this year.

British Columbians have often led the country in healthy living. Data from the 2017 Canadian Community Health Survey revealed that in Canada, 57.4% of adults self-reported meeting the national guidelines,

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whereas in BC that percentage was significantly higher, 64.9%.²

These data are encouraging for BC, but because they come from a self-reported survey questionnaire, they likely overrepresent the number

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of people who are adequately physically active. Even if we take the survey responses at face value, it means there are over 1.3 million British Columbian adults who are physically inactive. This costs the BC health care system approximately \$335 million dollars per year.³

BC physicians have an opportunity to continue building on existing strategies that promote lifestyle modification and healthy living. The goal of the Doctors of BC resolution to incorporate exercise history as part of the vitals section of EMRs is to further engage physicians and the public on the importance of physical activity.

The two physical activity questions at the start of this article are an example of a validated exercise history screening tool that is quick and simple to use. When systematically asked in all patient encounters and entered into the patient's EMR it has

also been shown to be effective.4

A large study by Kaiser Permanente involving almost 1.8 million patients found that by promoting the systematic collection of these questions into EMRs they were able to identify physical activity history in the charts of 86% of patients after 18 months of effort.4 A subsequent study involved 696267 eligible patients and 1569324 visits.5 Patients were seen in centres that either were or were not systematically collecting these two simple physical activity questions into patients' EMRs. The centres that were systematically collecting physical activity history showed small but significant changes in weight loss in obese patients and improved HbA1c values in patients with diabetes. Additionally, there was a 12% absolute increase in the number of patients who reported having received exercise counseling from their physician.

By simply asking the questions we can start to have an impact. Physical activity seems to have a doseresponse effect: increasing physical activity even by 10 minutes per day results in a substantial improvement in mortality and morbidity, and this effect is greatest when targeting those who are sedentary.6

No matter how you scored at the beginning of this article, hopefully you are motivated to find an extra 10 minutes in your day for a brisk walk and a minute to discuss the same with your next patient.

> -Tommy Gerschman, MD, FRCPC, MSc

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