



Prevention in children and adolescents AEPap/PAPPS

Physical Activity promotion

Authors: Javier Sánchez Ruiz-Cabello and PreInfad group.

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RECOMMENDATIONS

The World Health Organization (WHO) estimates that 1.9 million deaths in the whole world are attributable to physical inactivity and at least 2.6 million deaths are the result of overweight and obesity. Besides, WHO estimates that physical inactivity causes 10% to 16% of breast, colon and rectum cancer cases as well as an increase in the number of type 2 diabetes and coronary heart disease.

In 2016 WHO underlined that prevention through physical activity (PA) promotion and a healthy diet should be an essential competence of primary care (PC) and set out what changes are needed in the health systems to implement these services in PC.

The proven benefits of PA refer to improvement of health parameters, and morbidity and mortality results in adults and children.

Although there are some inherent risks of PA, except for muscle and bone injuries, the rest are rare. Moreover, people that do not exercise are more prone to more serious injuries when they do exercise. The totality of international guidelines admits that the benefits of PA, in adults as well as in children, are very superior to the possible risks. Accordingly, in the absence of a contraindication to do exercise, it should be recommended.

The level of evidence of the recommendations related to the intensity of the PA is based on observational studies (PA intensity and benefits for health) and experimental studies (exercise and improvement of health parameters) but the quantities and specific times are only expert opinions.

The interventions implemented to increase the level of PA have been of high quality in general, but they have had weakly consistent results and with limited success.

Although there is lack of evidence, many of these interventions (specially prolonged interventions) have had a positive impact in increasing the levels of PA as well as in improving health parameters and results.

The interventions implemented in PC to increase levels of PA or reduce sedentary behaviour have been scarce, of moderate to low quality, with weakly consistent results and limited benefit.

Considering the proven benefits in health of PA and the absence of adverse events of interventions in children and adolescents, and despite the problems of its applicability and the limited information on PC counselling results, we can consider globally that PA promotion in PC can have favourable effects.

PrevInfad recommendations

- We suggest implementing interventions at school and at the community directed to physical activity promotion and reducing sedentarism (weak in favor).
- We suggest counselling in Primary Care directed to physical activity promotion and reducing sedentarism (weak in favor).