

It's Not Exercise, It's Increasing Activity

Steve Freed, R. Ph., Publisher

The New Year is upon us and many of our patients and us will make a new years resolution to lose wt or begin exercising. But from past experience most will not live up to their resolutions.

By the way, do not use the word EXERCISE, you will scare people away, the term is increasing physical activity.

Last year we did a study called the 10,000 Step Study and it was a huge success, we had patients increase their steps to 10,000 a day using a pedometer and even though only 83% were able to reach that goal, we had great success in helping people change their life styles to include more walking into their daily life's. It was unbelievable that a little device that costs less then a dinner or a cab ride could help to reduce blood pressure, lower blood glucose, relieve stress, lower cholesterol, reduce body fat and even enabled some to get off or reduce their medications.

The response was so great; we had medical professionals contact us from all over the world, who wanted to duplicate what we had done for their patients.

In order to provide them an accurate and inexpensive pedometer we had to do some testing and searching. After finding a good pedometer, we realized that we also needed the software to go with the pedometer. What I mean by software is that we need some kind of program that would teach people what to do with it. Why do you need software?

Let me give you an example, every year at AADE there are exhibitors who give away sample pedometers and I have not found anyone who can tell me where there pedometer is. Without the education on how and why to use it, it is just another gadget that winds up in a junk drawer and gets sold at a garage sale.

Imagine what you could sell it for on Ebay if you could say you had the magic pill that could cure or treat type 2 diabetes, hypertension, hyperlipdemia, osteoporosis, arthritis, depression, anxiety, heart disease, prevent diabetes, strokes, cancer, improve memory and wound healing and improve your sex life. Who will start the bidding?

So, in order to put together the software, the hows and whys, we began to research all the walking programs that we could find. We found programs that had 150 page manuals; we found programs that had you measuring your steps, weighing yourself, some which took 4 chapters on how to calculate your miles. Most of the programs had you buying an expensive pedometer that measured, time, distance, calories burned, steps, etc.

Most of the programs we had found were based on people doing 10,000 steps, just like our study we had done and was successful. You have to realize that for our 10,000 step study, patients could not participate unless they agreed to do the 10,000 steps/day.

We found the 10,000 step study that most programs were based on. The study was published in 1996 comparing 2 groups of obese and sedentary men with type 2

diabetes ⁽¹⁾. Both groups lived in a hospital and were given a special diet. Only one group was told to take at least 10,000 steps/day using a pedometer. The pedometer-program group averaged 19,200 steps/day and at the end of the 6-8 week study lost an average of 17 pounds. (Almost 8lbs more than the second group that dieted only and averaged 4,500 steps/day) So, why are we recommending 10,000 steps/day? The study it was based on the participants did almost 20,000 steps/day.

From our research and talking to educators we came to the conclusion that to have a program that focused on 10,000 steps/day was not such a great idea. We found that when people did their baseline of steps/day and it came out less than 5000 steps/day, people would drop out of the program or not even start. They complained they didn't have the time to increase their physical activity by 100%.

But, while we were researching the different software that was available, we came across some research that was done in Canada. It was a program that was different than anything we had seen. It was not based on the 10,000-step philosophy and it was different because it was using science to develop the program. Everything else we had found was just a program that was done and had no real science behind it.

The program had 7 years of science behind it, had gone through clinical studies, was written up in over 10 journals and had evolved and changed over time to make it even more effective. But the concept was completely different than anything we had seen, it was called *The First Step Program*.[®]

The FSP was not only based on science, it had gone through clinical studies to prove its effectiveness. It was not a program that handed a patient some instructions and a pedometer and left alone to figure it out. This was a program that had been based on educating the patient on the why's and the patients through education and interaction determined their own goals and how they would achieve those goals and fit it into their lifestyle. The program is also based on using only steps to measure physical activity. Patients didn't have to measure their strides, weigh themselves, and figure out how many miles they walked. It is very simple, by measuring steps only; you were measuring an increase in physical activity. The calories will get burnt, the miles will get done, there is no reason to measure anything else and besides, studies have shown that pedometers cannot measure distance and calories accurately⁽²⁾. Keeping it simple by measuring steps only has made this program successful

But what really set this program apart from any other program is that not only did the patient become educated on the why's and how's, but there was a whole program for the educator to also become educated on the why's and how's. It teaches the educator on how to educate and motivate the patient.

This is a program that will not only motivate the patients to increase their physical activity, but will motivate you, the doctors, and the whole office staff to improve their health.

So when people ask me why this program?
I have a simple answer for them, IT WORKS!

For more information on the First Step Program[®] just go to www.firststepprogram.com

The First Step Program™ was created by Dr. Catrine Tudor-Locke
For more information On Dr Catrine Tudor-Locke's book "Manpo-kei" (The Art and Science of Step Counting) go to www.rx4betterhealth.com

Reference:

1. Yamanouchi K, Takashi T, Chikada K, Nishikawa T, Ito K, Shimizu S, et al. Daily walking combined with diet therapy a useful means for obese NIDDM patients not only to reduce body weight but also to improve insulin sensitivity. *Diabetes Care* 1995; 18(6): 775-778.
2. Crouter SE, Schneider PL, Karabulut M, Bassett DR Jr. Validity of electronic pedometers for measuring steps, distance, and energy cost. *Med Sci Sports Exerc.* 2003 Aug; 35(8): 1455-60.