

Rx: Get Active

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By Sally Squires
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"Walk two miles and call me in the morning."

That's the kind of prescription doctors could soon write if the new leaders of two major medical groups get their way.

"We're trying to get every physician to prescribe exercise at every visit," says Robert Sallis, a [California](#) physician who recently became president of the [American College of Sports Medicine](#). Physicians "have a moral responsibility to inform patients of the danger of inactivity and the health benefits of being more active," Sallis says.

The new head of the [American Medical Association](#) plans to deliver the same message today at his inaugural address before the AMA House of Delegates in [Chicago](#).

"We are in lock step with them on that concept," says incoming AMA president Ronald M. Davis, who is also the director of the Henry Ford Health System's Center for Disease Prevention and Health Promotion in [Detroit](#). "We need to get doctors to prescribe exercise more, and we need to get patients to follow that advice."

More than half of Americans fail to get the 30 minutes of physical activity recommended daily to provide health benefits, according to the federal [Centers for Disease Control and Prevention](#). Cars, elevators, remote controls and other modern devices all help to engineer physical activity out of daily life. Extended work days and long commutes add to the problem.

So many people are inactive that some experts have coined a new term for the epidemic: sedentary death syndrome. The condition helps cut short an estimated 250,000 lives in the United States annually, according to Frank Booth, professor of physiology at the [University of Missouri](#). Research suggests that people who are sedentary spend on average about \$1,500 more annually on medical bills than do their more-active counterparts.

"There are also studies to show that they miss more work and are not as productive," Sallis notes.

Research also shows that regular physical activity improves health by cutting the risk of heart disease, stroke, colon cancer, diabetes and high blood pressure. Even bouts of activity as short as 10 minutes at a time can help control weight and relieve arthritis, anxiety and depression.

"Exercise is medicine," Sallis says. "We know that it works very well. We just don't have the proper way to administer it."

That's where the doctors come in. Sallis is leading the charge to get doctors and other health professionals to ask every patient about his or her exercise habits at every office visit.

"We know all the benefits of exercise and that it has very few side effects," he says. "We know that even the sickest patients in the hospital get out quicker if they get out of bed and walk during their hospital stay."

There's no doubt that with any disease, exercise benefits it."

In California, the Governor's Council on Physical Fitness and Sports recently launched an initiative to give doctors forms that resemble a standard pad of prescriptions; instead of specifying medication, they recommend activity.

"Fitness is the greatest drug in the world," says Jake Steinfeld, chairman of the California council. "It's addictive. . . . Why wouldn't doctors want to do this? There's no extra work and, as a matter of fact, it's another service that the doctor is providing for their patients. A doctor has the ability and power to help make that change."

It isn't just activity that doctors are being asked to encourage. [Harvard Medical School](#) and the [Culinary Institute of America](#) recently teamed together to teach physicians to cook more healthfully, too. The Healthy Kitchens, Healthy Lives conference drew about 200 health professionals to California's [Napa Valley](#) to learn how to cook whole grains, salads and healthier desserts.

"Unless doctors, nurses and other health providers live this way, it's hard for them to get patients to make needed changes," says David Eisenberg, the conference organizer.

But do patients follow through when doctors advise them to exercise and eat right?


"That's the million-dollar question," Sallis says. The studies that have been done show mixed results.

Enlisting physicians to coach patients to exercise and eat right "is an important ingredient" in the effort to improve behavior, says the AMA's Davis, "but there are other things to keep in mind, too."

Unless they have a place to go where they can be active, it's difficult "to get people to walk more, ride bikes and play recreational sports," he says. "This goes part and parcel with healthy eating as well. It's all connected as a way to prevent or turn around our obesity epidemic."

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