

ASN LEADING THE FIGHT AGAINST KIDNEY DISEASE

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EVEN CASUAL WALKING FOR AN EXTRA 2 MINUTES EACH HOUR MAY HELP PROLONG LIFE

Replacing sedentary activity with light activity linked with improved survival

Highlight

In an observational study that followed participants for an average of just under 3 years, a "trade-off" of sedentary activity with low-intensity activity was not beneficial, but a trade-off of 2 minutes/hour of sedentary activity with an equal amount of light-intensity activity was associated with 33% lower risk of dying in the general population and a 41% lower risk of dying in the individuals with chronic kidney disease.

Previous research suggests that sitting for long periods of time may increase the risk of disease and early death.

Washington, DC (April 30, 2015) — Casual walking for as little as an extra 2 minutes per hour throughout the day, rather than sitting, may have a significant benefit on longevity. The findings come from a study appearing in an upcoming issue of the *Clinical Journal of the American Society of Nephrology* (CJASN).

The Physical Activity Guidelines for Americans recommend at least 150 minutes of moderate intensity activity per week or 75 minutes of vigorous-intensity activity per week. Assuming 16 awake hours per day, achieving the currently recommended duration of moderate/vigorous activities would account for only 2% of the total awake time. This leaves considerable time for low-intensity activities—such as standing—or light-intensity activities—such as casual walking—that might provide additional benefits.

Srinivasan Beddhu, MD (University of Utah) and his colleagues analyzed information on 3626 participants in the 2003-2004 National Health & Nutrition Examination Survey to examine the relative importance of low- and light-intensity activities in the general population and in patients with chronic kidney disease (CKD). The average follow-up of participants was just under 3 years. "We hoped to understand whether lower duration of sedentary activities with higher duration of low- or light-intensity activities is associated with survival benefit," explained Dr. Beddhu.

Using sophisticated statistical techniques, the researchers found that a "trade-off" of sedentary activity with low-intensity activity was not beneficial, but a trade-off of 2 minutes/hour of sedentary activity with an equal amount of light-intensity activity was associated with 33% lower risk of death in the general population and a 41% lower risk of death in the CKD population. The investigators noted that participants spent more than half the time in sedentary activities. Those with CKD were even more sedentary and spent more than two-thirds of the time in sedentary activities.

"Sitting for a long time strongly increases the risk of death. Our findings suggest that replacing sedentary duration with an increase in light activity might confer a survival benefit," said Dr. Beddhu.

Study co-authors include Guo Wei, MS, Robin Marcus, PT, PhD, Michel Chonchol, MD, and Tom Greene, PhD.

Disclosures: The authors reported no financial disclosures.

The article, entitled "Light Intensity Physical Activities and Mortality in the US General Population and CKD Subpopulation," will appear online at http://cjasn.asnjournals.org/ on April 30. 2015.

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