

Interrupting prolonged sitting beneficial in type 2 diabetes

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and C-peptide compared with SIT. For triglycerides, the iAUC was significantly attenuated for SRA but not LW.

"Interrupting prolonged sitting with brief bouts of LW or SRA attenuates acute postprandial glucose, insulin, C-peptide, and triglyceride responses in adults with T2D," the authors write. "With poor adherence to structured exercise, this approach is potentially beneficial and practical."

More information: <u>Abstract</u> Full Text (subscription or payment may be required)

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(HealthDay)—For patients with type 2 diabetes (T2D), interrupting prolonged sitting with three-minute bouts of light-intensity walking (LW) or simple resistance activities (SRA) every 30 minutes improves postprandial cardiometabolic risk markers compared with uninterrupted sitting (SIT), according to a study published online April 13 in *Diabetes Care*.

Paddy C. Dempsey, M.Ph.Ed., from the Baker IDI Heart and Diabetes Institute in Melbourne, Australia, and colleagues conducted a randomized crossover trial involving 24 inactive overweight/obese adults with T2D. Participants underwent eight-hour conditions of SIT (control), sitting plus three-minute bouts of LW every 30 minutes, and sitting plus three-minute bouts of SRA every 30 minutes on three separate days (with six to 14 days of washout).

The researchers found that both activity-break conditions significantly reduced the incremental areas under the curve (iAUC) for glucose, insulin,



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