

Once-yearly counseling tied to more physical activity in T2DM

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A1c (HbA1c). There was an association for an increase in LPA >0.92 hours/day and in MVPA >7.33 min/day, and a decrease in SED time >1.05 hours/day, with an average decrease of about 1 percent in HbA1c and with significant improvements in fasting glucose, body weight, waist circumference, and high sensitivity C-reactive protein. PA and SED time changes independently predicted improvement in HbA1c.

"Significant improvements in cardiometabolic risk profiles were observed in subjects experiencing the most pronounced changes in PA and SED time, even if below the recommended level," the authors write.

Several authors disclosed financial ties to the pharmaceutical industry.

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

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(HealthDay)—Theoretical and practical once-yearly counseling for three years is associated with increased physical activity (PA) and reduced sedentary (SED) time in patients with type 2 diabetes, according to a study published online Aug. 18 in *Diabetes Care*.

Stefano Balducci, M.D., from La Sapienza University in Rome, and colleagues randomized 300 physically inactive and sedentary patients with type 2 diabetes to receive theoretical and practical counseling once yearly for three years (intervention group [INT]) or standard care (control group). The authors reported the four-month effects on objectively measured daily light-intensity PA (LPA), moderate-to-vigorous PA (MVPA), and SED time, as well as <u>cardiovascular risk factors</u>.

The researchers observed increases in LPA and MVPA in both groups, and decreases in SED time, although the changes were significantly more marked in INT participants. In INT participants only there was a significant reduction in hemoglobin



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