Exercise: what? How much?

An editorial in the BJGP has focused on the role of general practice in promoting physical activity (BJGP 2016 DOI:10.3399/bjgp16X686689). The RCGP has chosen physical activity and lifestyle as one of its priorities for the next 3y. There is evidence for health benefits of physical activity totalling 2.5h/week of moderate intensity or 75mins/week of vigorous intensity. Currently, only 60% of adults are sufficiently active to gain health benefits. General practice can play a role in increasing physical activity by providing brief physical activity advice during consultations. There is evidence that this is more effective than smoking cessation advice, with a NNT of only 12 to lead to sustained physical activity at 12m (compared with NNT 35–120 for brief smoking cessation advice).

NICE on exercise

In 2013, NICE offered guidance on what it means by ‘physical activity’ (NICE 2013, PH44).

NICE suggests we should seek information about people’s activity levels both opportunistically and in the context of chronic disease management.

- All adults should aim to be active daily.
- Over a week, this should add up to at least 2.5h of activity in bouts of at least 10min (anything that makes you breathe faster, increase your heart rate and feel warmer) OR 75min of vigorous intensity exercise (resulting in hard breathing, rapid heart rate and inability to maintain a conversation).
- On 2 days a week, they should do activities that increase muscle strength.
- Those over 65y who are at risk of falls should do balance and coordination exercises at least 2x a week.
- BUT it also reminds us that any activity is better than none!
- We should offer brief tailored advice to individuals to increase physical activity levels if they are insufficiently active.

Benefits of exercise

Small changes: measurable benefits on cardiovascular events

We nag our patients about exercise, but here is some quantifiable data on the benefits of exercise from the NAVIGATOR study (Lancet 2014:383:1059). The trial is an RCT of valsartan, nateglinide or both, but the physical activity element of it is a cohort study of 9000 individuals in 40 countries, followed for around 6y. All those in the trial had CVD or at least one risk factor for CVD. Many things were measured, but this paper relates to activity levels and cardiovascular events.

- For every 2000 extra steps/day or about 20min of moderately paced walking, there was a reduction of 10% in cardiovascular events.

The take home message? Even small changes in activity levels, doing simple things like walking 20min a day, can reduce cardiovascular events by 10%. You don’t have to go to the gym, you don’t have to wear lycra, it doesn’t need to cost you anything...

Reduction in the risk of certain cancers

The DTB looked at an analysis of the effect of moderate-to-vigorous leisure-time physical activity on risk of cancer. It concludes that the findings provide further support for the important role physical activity has in health (DTB 2016;8:89). The analysis pooled results from 12 European and USA cohort studies including 1.44million participants with a median follow-up of 11y. The results showed that higher levels of physical activity were associated with lower risks of 13 cancers:

- > 20% RRR for oesophageal adenocarcinoma, cancer of the liver, lung, kidney, gastric cardia, endometrium and myeloid leukaemia.
- 10–20% RRR for myeloma, cancer of the colon, head and neck, rectum, bladder and breast.

There was an increased risk of malignant melanoma and non-advanced prostate cancer. Subgroup analysis suggested that exposure to UV radiation when exercising outdoors may play a role in the increased risk of malignant melanoma. The DTB reports that the authors of the analysis suggested that screening bias may explain the increased risk of prostate cancer, as active men are more likely to have prostate cancer screening.

Reduction in mortality associated with prolonged sitting

The DTB looked at results from a meta-analysis of observational studies that examined whether physical activity attenuates the detrimental effects that prolonged sitting has on mortality. The results suggest that increased physical activity may help to offset the detrimental effects of prolonged sitting (DTB 2016;10:113). The DTB reports that the meta-analysis found a 59% increased mortality in the least active compared with the most active quartile. In all but the most active quartile, watching TV for >3h/d was associated with increased mortality, regardless of physical activity.
Would an app or wearable technology help get people exercising?

Many ways have been tried to help people do more exercise. Evidence on the use of apps or wearable technology is currently not conclusive.

This study got smart phone users to download an app that counted their steps and worked out how many calories they had burned. After 8 weeks, those using the app step/calorie counter walked on average 1000 steps more a day (range 200–1800 extra per day) compared with the controls who were given the same exercise advice but without the app (BJGP 2014;64:335) (10 000 steps a day are recommended). The trial was small (data from 78 people in the end) and we can’t replicate the trial completely. But in those who are interested, simple apps or cheap pedometers are available to help set step targets, and may be something some of our patients would like.

The IDEA RCT in America randomised overweight or obese young adults to a behavioural weight loss intervention alone, or with the addition of wearable technology to monitor physical activity and diet (JAMA 2016;316:1161). At 24m follow-up, it found that:

- Participants in the wearable technology group lost significantly LESS weight (3.5 kg) than those in the behavioural weight loss alone group (5.9 kg, p =0.002).
- There was no significant difference between groups in fat mass, lean mass, percent body fat, bone mineral content, bone mineral density, physical activity or cardiorespiratory fitness.

The primary outcome of the study was to assess weight loss rather than physical activity, but the results suggest that the addition of wearable technology did not increase physical activity compared with the behavioural programme alone. The authors recognise some limitations in the study, including the wearable technology being fitted to the upper arm, whereas more modern devices tend to be worn on the wrist. The wearable technology was also not introduced until 6m into the behavioural weight loss programme, which could have influenced how much the technology was used.

<table>
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<tr>
<th>Exercise</th>
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<td>- To paraphrase the NICE guidance: exercise is anything that makes you slightly short of breath or brings on a light sweat, and you should do 2.5h a week of this in bouts of at least 10min, OR you can do 75min of significant physical exertion/week (hard breathing, rapid heart rate) instead. BUT remember, ANY activity is better than none!</td>
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<tr>
<td>- Physical activity reduces the risk of cardiovascular events and several cancers. It may also reduce the risk of mortality associated with prolonged sitting.</td>
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| For professionals: |
| Motivate 2 Move is a fantastic online resource giving health professionals loads of resources to help get patients on the move! [http://tinyurl.com/GPU-M2M](http://tinyurl.com/GPU-M2M) |

We make every effort to ensure the information in these pages is accurate and correct at the date of publication, but it is of necessity of a brief and general nature, and this should not replace your own good clinical judgement, or be regarded as a substitute for taking professional advice in appropriate circumstances. In particular check drug doses, side effects and interactions with the British National Formulary. Save insofar as any such liability cannot be excluded at law, we do not accept any liability for loss of any type caused by reliance on the information in these pages.

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November 2017
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Our comprehensive one-day update courses for GPs, GP STs, and General Practice Nurses. We do all the legwork to bring you up to speed on the latest issues and guidance.

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Our courses contain NO theorists, NO gurus, NO sponsors, NO reps on the day! Just real-life GPs who will be back at the coal face as soon as the course has finished.

www.gp-update.co.uk
The GP Update Course – our flagship course!

With the amount of evidence and literature inundating us, it can be hard to know which bits should change our practice, and how. The GP Update Course is designed to be very relevant to clinical practice and help you meet the requirements for revalidation. We collate and synthesise the evidence for you so you don’t have to! Using a lecture based format, with plenty of time for interaction, the GP presenters discuss the results of the most important evidence and guidance, placing them in the context of what is already known about this topic. The presenters also concentrate on what it means to you and your patients in the consulting room tomorrow.

London Fri 9 Mar 2018
London Sat 10 Mar 2018
Leeds Thur 15 Mar 2018
Oxford Fri 16 Mar 2018
Birmingham Sat 17 Mar 2018
Exeter Wed 16 May 2018
Bristol Thur 17 May 2018
London Fri 18 May 2018
London Sat 19 May 2018

Newcastle Wed 6 Jun 2018
Sheffield Thur 7 Jun 2018
Manchester Fri 8 Jun 2018
Birmingham Sat 9 Jun 2018
Norwich Wed 13 Jun 2018
London Thur 14 Jun 2018
Reading NEW LOCATION Fri 15 Jun 2018
Brighton Red Whale SEE BACK PAGE Fri 23 Nov 2018

The MSK and Chronic Pain Update Course - New

MSK problems are the most common reason for seeing a GP and represent 30% of repeat GP visits. We want to help build your confidence. On the course we will tackle:

• The evidence-base for common MSK conditions including osteoarthritis, spondyloarthritis, polymyalgia, fibromyalgia and much more.
• Diagnosis: why waddling like a duck might help; and what to do when there is no diagnosis!
• Why chronic pain is ‘in the brain’ – and more importantly, what we and our patients can do about it.

We will provide you with a new narrative and a tool box of strategies you can take back to the surgery and start using the next day.

London Thur 17 May 2018
Manchester Wed 6 Jun 2018
Leeds Thur 11 Oct 2018
Birmingham Fri 12 Oct 2018

London Thur 18 Oct 2018
Brighton Red Whale SEE BACK PAGE Wed 21 Nov 2018

Lead. Manage. Thrive! – The management skills course for GPs

If you’ve been waiting for a job as a leader to develop your leadership and management skills then you’re missing out! Leadership starts with identifying and taking control over what is in your hands right now! Lead. Manage. Thrive! will give you the confidence to skillfully negotiate, deal with difficult conversations, influence colleagues and bosses, delegate and be proactive about managing your workload.

The course is for anyone who wants to step up, find a better way of working and gain a toolkit of strategies to become a successful and resilient practitioner!

London Fri 18 May 2018
Manchester Thur 7 Jun 2018

Brighton Red Whale SEE BACK PAGE Sat 24 Nov 2018

The Women’s Health Update Course

From the pill to pelvic pain, periods and prolapses, the one day Women’s Health Update course is a comprehensive guide to understanding and managing common gynaecological problems in general practice. Using a case-based approach will give you the skills to manage your female patients in a real surgery. We aim to make the day fun, interactive as well as educational. You will leave the course feeling more confident, knowledgeable and with a much stronger pelvic floor!!!

The day is designed for all GPs and GP STs – not just those with a special interest!

London Thur 24 May 2018
Manchester Fri 8 Jun 2018

Brighton Red Whale SEE BACK PAGE Thur 22 Nov 2018
The Cancer Update Course

Within the next 15 years the need for cancer care will double and you will look after as many cancer survivors as diabetics. Shared care follow up will become the norm, and secondary care will pass responsibility to us.

A key 2015 Lancet Oncology commission paper warned that: “GPs are inadequately trained and resourced to manage the growing demand for cancer care in high income countries”.

Education for GPs was one of their five key recommendations – we can help you get ahead of the curve! Established GPs and GP STs can use this course to bridge the gap in traditional GP cancer education which has focussed heavily on referral and end of life care missing out the whole journey in between.

This course is able to look in much more detail at the big picture behind the disease perhaps most feared by our patients and, let’s face it, that 1 in 2 of us will be diagnosed with over our lifetime.

London Wed 23 May 2018
Manchester Thur 7 June 2018
Brighton SEE BACK PAGE Sat 24 Nov 2018

Our Consultation Skills Courses

One day small group courses designed for GPs, GP STs and General Practice Nurses. The courses have a practical focus and lots of engaging exercises allowing delegates to rehearse the most effective consultation behaviours.

But don’t worry, there won’t be any role playing in front of everybody!

For more information on each course, please visit www.gp-update.co.uk/courses

The Telephone Consultation Course

London Thur 17 May 2018
Birmingham Fri 8 Jun 2018
Leeds Fri 15 Jun 2018
London Thur 28 Jun 2018

The Effective Consultation Course

London Fri 18 May 2018
Manchester Thur 15 Nov 2018

The Medically Unexplained Symptoms Course

Manchester Thur 7 Jun 2018

Prices

GP Update Course:
GP £195 | GP Registrar £150 | Nurse £150

All other courses:
£225 or £210 for members of www.gpcpd.com

(GPCPD members, please log in and then click on the relevant button within the ‘Member information’ box on the right of the home screen to get your discount code)

Join the Red Whale pod

Plan ahead! Save £60 when you attend three courses in 2018. Use discount code 3BUNDLE2018 when booking via www.gp-update.co.uk or by phone 03330 093 090 (Charged at the same rate as standard landline numbers that start with 01 or 02).*

* All courses to be taken by the same delegate in the 2018 calendar year. Only one promotion code to be used per booking.
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For more information about the courses available and to book your place visit: www.gp-update.co.uk/courses and search for Brighton, or call us on 03330 093 090

* Use discount code 4BRIGHTON2018 if booking online or over the phone 03330 093 090. Only available for Brighton Roadshow dates. All courses to be taken by the same delegate and booked at the same time.

Only one promotion code to be used per booking.

To book: online at www.gp-update.co.uk or call us on 03330 093 090 or use the form below.

I would like to come on the following course(s) (please write legibly!):

- The GP Update Course (location) (date)
- The MSK and Chronic Pain Update Course (location) (date)
- Lead. Manage. Thrive! Course (location) (date)
- The Cancer Update Course (location) (date)
- The Women’s Health Update Course (location) (date)
- The Telephone Consultation Course (location) (date)
- The Effective Consultation Course (location) (date)
- The Medically Unexplained Symptoms Course (location) (date)

I can’t attend a course, but would like to order your Handbook or DVD:

- GP Update Handbook and 12 months’ access to GPCPD £150
- GP Update Handbook, DVD and 12 months’ access to GPCPD £225
- Lead. Manage. Thrive! Handbook £70
- Women’s Health Update Handbook £70
- Cancer Update Handbook £70

Name

Address

Email

(Please write your email address clearly as we’ll use it to send your confirmation letter and receipt.)

Mobile Number (We can’t complete your course booking without this, but it will only be used if we need to contact you urgently about the course.)

Price as stated in the flyer for each course. If applicable, please provide your discount code here.

Please send this form with your cheque payable to GP Update Limited to: Red Whale, University of Reading, Reading Enterprise Centre, Earley Gate Entrance, Whiteknights Road, Reading, Berkshire RG6 6BU

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