

GUIDE FOR HEALTHCARE PROFESSIONALS EXERCISE TRAINING IN THE MANAGEMENT OF OVERWEIGHT AND OBESITY IN ADULTS

Recommendations of the EASO Physical Activity Working Group



- ✓ Help patients define the primary goal of their daily training
- ✓ Provide evidence-based recommendations for the patient-preferred exercise
- ✓ Identify meaningful benefits to patients
- ✓ Deliver practical information

Our recommendations are evidence-based and range from Very Strong to Expert Opinion

- Strong recommendation
- Moderate recommendation
- Weaker recommendation
- Insufficient evidence for formal recommendation; but expert opinion

PHYSICAL ACTIVITY COUNSELLING

- Recommendations are designed to support incremental progress
- Recommendations should be personalized according to patient physical fitness, corpulence, co-morbidities, stage of change regarding physical activity, barriers to increasing physical activity, and opportunities available in an individuals' environment
- These recommendations focus on exercise training. Advice should also emphasize limiting sedentary time and increasing incidental physical activity
- Behaviour change techniques including demonstrating exercise practices are effective in promoting physical activity in face-to-face programmes

What is a moderate intensity physical activity?

You're breathing hard but can still have a conversation easily.



European Association for the Study of Obesity

GOAL 1. IMPROVE CARDIOMETABOLIC HEALTH

LOSS OF VISCERAL AND INTRAHEPATIC FAT

- Advise preferentially **aerobic exercise** at least at moderate intensity.
- Advise **HIIT** only i) after thorough assessment of cardiovascular risk and ii) ideally with supervision

BLOOD PRESSURE

- Advise preferentially **aerobic exercise** at least at moderate intensity

INSULIN SENSITIVITY

- Advise **any type of exercise**: aerobic exercise at moderate intensity, resistance training or a combination of both, or HIIT (after assessment of cardiovascular risk and with supervision)

Explain to patients that exercise improves cardiometabolic outcomes and helps prevent type 2 diabetes even though limited weight loss may occur.

What is moderate-to-high intensity resistance training?

At moderate intensity, people are usually not able to perform 20 consecutive repetitions. This corresponds to at least 60% of the 1-RM (heaviest weight one can lift in a single repetition).

What is HIIT?

High-intensity interval training. Short periods of high-intensity exercise, alternating with short recovery periods. During the high-intensity periods, your heart rate is > 85% of its maximal value.

GOAL 2. IMPROVE BODY COMPOSITION

WEIGHT LOSS AND REDUCTION IN ADIPOSITY

- Advise preferentially 150 to 200 min/week of **aerobic exercise** at least at moderate intensity
- Advise **HIIT** only after thorough assessment of cardiovascular risk and ideally with supervision
- Inform patients that anticipated weight loss is on average not more than 2 to 3 kg

WEIGHT MAINTENANCE AFTER WEIGHT LOSS

- Advise a **high volume of aerobic exercise** (200-300 minutes per week of moderate-intensity exercise)

PRESERVATION OF LEAN BODY MASS DURING WEIGHT LOSS

- Advise **resistance training** at moderate-to-high intensity

People with overweight or obesity should be encouraged to focus on improving weight management in the long term rather than short-term weight loss when exercising.

GOAL 4. IMPROVE EATING BEHAVIOUR AND QUALITY OF LIFE

EATING BEHAVIOUR

- Inform patients with overweight or obesity that exercise will not have substantial impact on energy intake but rather may improve eating behaviour

APPETITE AND SATIETY

- Inform patients that exercise may increase fasting hunger but can also improve satiety

QUALITY OF LIFE (PHYSICAL COMPONENT)

- Advise **aerobic** or **resistance training** or a combination of both

Exercise has very positive effects on eating behaviour when accompanied by a healthy diet. Quality of life improves with exercise, especially in physical abilities. Positive effects are also seen on vitality and mental health.

GOAL 3. IMPROVE PHYSICAL FITNESS

FOR CARDIORESPIRATORY FITNESS

- Advise **any type of exercise**: aerobic exercise at moderate intensity, resistance training or a combination of both, or HIIT (after assessment of cardiovascular risk and with supervision)

FOR MUSCLE STRENGTH

- Advise **resistance training** alone or combined with **aerobic training**

Low physical fitness is a strong risk factor for morbidity and mortality. Improving physical fitness has direct implication on patient quality of life and ability to perform daily activities; this becomes more important as people get older.

GOAL 5. OPTIMIZE THE BENEFITS OF BARIATRIC SURGERY

ADDITIONAL WEIGHT LOSS AND REDUCTION IN ADIPOSITY

- Advise a combination of **aerobic** and **resistance training**
- Inform that expected additional weight loss is on average not more than 2 to 3 kg

PRESERVATION OF LEAN BODY MASS

- Advise a combination of **aerobic** and **resistance training**

PHYSICAL FITNESS

- Advise a combination of **aerobic** and **resistance training**

Exercise will substantially improve both cardiorespiratory and muscular fitness. Exercise is an integral part of the long-term management strategy following bariatric surgery.



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