

## News & Comments **Prolong Sitting Confers an Increased Risk of Mortality & Cardiovascular Disease**

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Trends in

Medical

Research

According to the PURE cohort study, sitting for more than 8 hours per day increases the risk for death and major CV events compared with sitting for less than 4 hours per day.

According to the researchers published in JAMA Cardiology, the association between longer sitting time and higher mortality/CVD risk was present at all socioeconomic levels but pronounced in low- and lower-middle-income countries.

Researchers in this new study found that people in poorer parts of the world experience even worse effects of long days spent sitting, despite sitting being associated with an increased risk of death and cardiovascular disease across all populations studied. the relationship was more pronounced in low-income nations like Bangladesh, India, and Zimbabwe.

The study author explained the reason that, in the high-income countries (HICs), The activity pattern is predominantly one where f people sit most of the day and then do some recreational activity like walking, gardening, running or outdoor sport, whereas, in the lower-income countries (LICs) recreational activities are uncommon and is largely for the privileged.

Sitting for 6 to 8 hours/day increases the relative risk of heart disease and premature death by 12% to 13%, compared to people who sit less than four hours per day. If you extend that time to eight hours or more, the relative risk rises to a staggering 20%.

"This is an important risk factor to talk to patients about, just as it would be with smoking. It's a low-cost intervention. You just have to talk to patients about it." Scott Lear, PhD the study said.

It is bad to be sitting over 6 hours per day and even worse for more than 8 hours per day. Other studies show even more [risks] over 9.5 hours per day. It makes sense that the more sitting, the worse outcomes.

## **KEYWORDS**

sedentary behaviour, sitting position, Income, lifestyle intervention, clinical cardiology, prevention, diabetes, clinical pharma, Hypertension, Lipids, Obesity, policy & practice, public health

