Active Women over 50 trial

Presented by
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Background

Physical activity- time to take it seriously and regularly, Lancet 2016

- Physical activity not improving worldwide
- Evidence of effective interventions is growing but an overall failure to scale
- Regular activity can diminish the increased mortality risks associated with prolonged sitting
- INT $67.5 billion economic cost of physical inactivity worldwide to the health-care system through health-care expenditure and productivity (Ding et al)
- WHO target to achieve a reduction by 10% in physical inactivity by 2025
Protective effect of cardiorespiratory fitness on all-cause mortality. Data from 25,341 men in the Aerobic Center Longitudinal Study. Height of bars show adjusted all-cause death rates. Numbers in bars are number of deaths. Fitness categories are least fit 20%, middle 40% and most fit 40%. Stratified by number of risk factors (smoking, total cholesterol > 6.2mmol/L and systolic blood pressure > 140mmHg).
Fig. 4. Decline in physical functioning with age, by baseline level of physical activity

How can the uptake of PA be improved in the 50+ age group?
Active Women over 50 trial

Aim

To test the impact of an intervention designed to enhance ongoing physical activity participation in women aged 50 years and over

Method

Study design
Participants
Intervention

Active Women Over 50

- Alternatives to the face-to-face sessions
  Video-conferencing
  Pre-recorded link of the workshop
Outcomes

Baseline and 3 month follow-up

Primary outcome:

Proportion of people achieving $\geq 10,000$ daily steps
## Secondary outcomes

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Measure</th>
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<tbody>
<tr>
<td>Proportion of people achieving adequate PA levels</td>
<td>Actigraph accelerometer</td>
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<tr>
<td>Average total number of hours of PA per week</td>
<td>International Physical Activity Questionnaire (IPAQ)</td>
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<tr>
<td>Change in perceived benefits of and barriers to exercise participation</td>
<td>Exercise Benefits and Barriers Scale</td>
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<tr>
<td>Physical functioning</td>
<td>Function component of the Late Life Function and Disability Instrument (LLFDI)</td>
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<tr>
<td>Mood</td>
<td>Positive and negative subscales of the Positive and Negative Affect Schedule (PANAS)</td>
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# Progress to date and preliminary results

Recruitment May 2017 - May 2018

Completed follow-up, n=70

<table>
<thead>
<tr>
<th></th>
<th>Intervention (n=33)</th>
<th>Control (n=37)</th>
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<tbody>
<tr>
<td><strong>Mean age (SD)</strong></td>
<td>56.6 (4.5)</td>
<td>56.6 (4.9)</td>
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<tr>
<td><strong>Age range (years)</strong></td>
<td>50 - 68</td>
<td>50 - 73</td>
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<tr>
<td><strong>No carer responsibilities, n</strong></td>
<td>22 (67%)</td>
<td>25 (68%)</td>
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<tr>
<td><strong>Part time, n</strong></td>
<td>22 (67%)</td>
<td>23 (62%)</td>
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<tr>
<td><strong>Background:</strong></td>
<td></td>
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<tr>
<td>Administration, n</td>
<td>4 (12%)</td>
<td>5 (13%)</td>
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<tr>
<td>Health, n</td>
<td>6 (18%)</td>
<td>8 (22%)</td>
</tr>
<tr>
<td>Professional, n</td>
<td>23 (70%)</td>
<td>24 (65%)</td>
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“Have you fallen in the past 12 months?”

Baseline:

Yes, ≥1 fall: 16 people (23%)

“Have you fallen in the past 3 months?”

3 month follow-up:

Yes, ≥1 fall: 5 people (7%)
Intervention group (n=33)

- Website resources
- Apps
- Yammer
- Healthy Sydney Uni website
- SUSF / Fitness passport
- Global challenge
- Park run
- Local council facilities
- Local council maps
- Local fitness centre
- Fortnightly workshop emails
- Fitbit / pedometer
- Exercise with others

- 100% investigated and participated in 1 or more PA option
- 23/24 partially or fully achieved set goals
- 100% plan to increase PA in next 6 months
Summary

– Falls are a problem for female University and Health care employees aged 50+

– The education programme was well-received by this study group

– This group is motivated to improve their PA

– Scope to translate these findings to the broader community
Acknowledgements

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