PHYSICAL ACTIVITY AMONG NEPHROLOGISTS, RESIDENTS AND NURSES

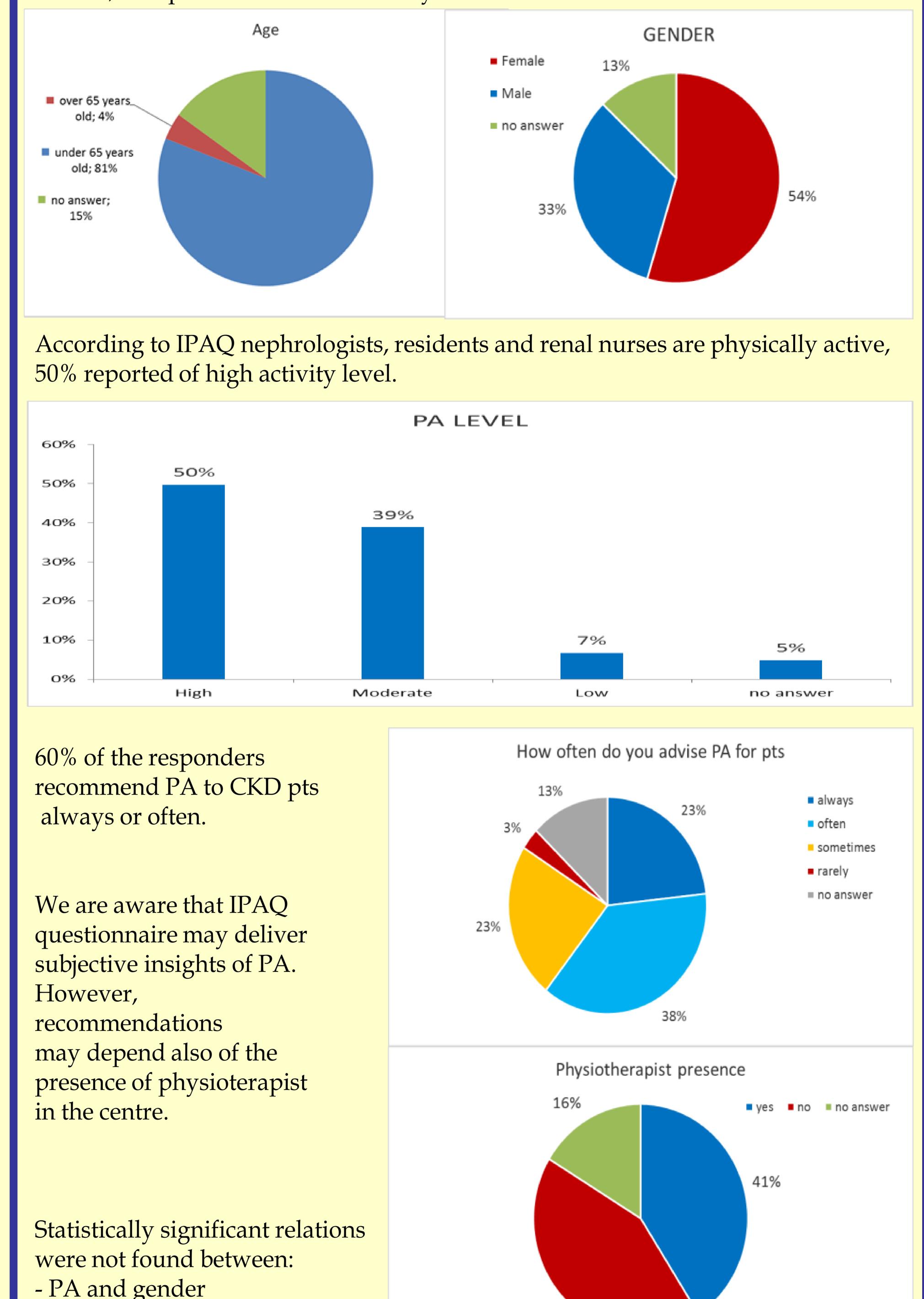
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Background and Aim

Patients with chronic kidney disease (CKD) have elevated cardiovascular disease (CVD) risk. Physical activity (PA) is known as an independent CVD risk factor, and despite the fact that current clinical practice guidelines recommend PA for CKD patients, PA is obviously rarely addressed by renal care teams. The aim of this observational cross-sectional survey was to assess physicians and renal nurses' opinion about the importance of PA counselling among other determinants of healthy life-style. Our hypothesis was that nephrologists and renal nurses who are physically active ask patients about PA more often and advise them to be physically active.

In total, 374 questionnaires were analysed.

Results



Methods

The level of physical activity in metabolic units per week (MET, min/week) was calculated on the basis of the IPAQ (International Physical Activity Questionnaire). The International Physical Activity Questionnaire (IPAQ) short form was opted to assess physical activity because of its relatively good reliability and validity. The IPAQ short version estimates how much health enhancing PA, including daily life activities and exercise, the person has undertaken over the previous 7 days, divided into three intensities (vigorous PA, moderate PA, and walking). The individual had to estimate how many days (frequency) he/she was physically active and the average time (duration) that he/she spent being physically active on these days. We calculated the total PA (MET min/week), as suggested in the Guidelines for Data Processing and Analysis of the IPAQ for the sum of walking, and moderate, and vigorous PA. Voluntary, anonymous survey consisted of the information about physicians or nurses age, gender, body weight and PA counselling

- PA and gender

activity. Questions about lifestyle counselling consisted of the regular PA, smoking cessation, alcohol restriction, healthy diet.

Conclusion

Among nephrologists, residents and renal nurses physical activity level is high and they counsel CKD patients often. PA consulting depends significantly of physician or nurse age, physical activity and the presence of physioterapeutist in the centre.

- PA and country - PA and BMI

43%

PA counselling had significant relations between (ANOVA):

- PA counselling and PA (*p*=0.00696)
- PA counselling and age (*p*<0.0001)
- PA counselling and physioterapeutist presence in center (*p*=0.00032)
- PA councelling and big center (*p*=0.00995)

IPAQ References:

Craig CL, Marshall AL, Sjostrom M, Bauman AE, Booth ML, Ainsworth BE, Pratt M, Ekelund U, Yngve A, Sallis JF *et al*: International physical activity questionnaire: 12-country reliability and validity. *Med Sci Sports Exerc* 2003, 35(8):1381-1395. Painter P, Marcus RL: Assessing physical function and physical activity in patients with CKD. *Clin J Am Soc Nephrol* 2013, 8(5):861-872.



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