

Regular physical activity is associated with better lung function among smokers

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Vigorous physical activity is associated with better lung function among current smokers. This is the main conclusion of a new study published in *Thorax* and led by researchers from the Barcelona Institute of Global Health (ISGlobal).

Over a 10-year period, 3,912 adults (aged 27-57 years at the start of the study) were considered as being active if they exercised with a frequency of two or more times a week and a duration of one hour a week or more. Associations between physical activity and <u>lung function</u> were only apparent among current smokers, suggesting the existence of an inflammation-related biological mechanism. Elaine Fuertes, first author of the paper and ISGlobal researcher, says, "This result highlights the importance of physical activity among current smokers specifically, which are a group at higher risk of poor lung function."

The researchers also found that participants who were active at the end of the study, either by becoming active or remaining active throughout, had significantly higher lung function than those consistently inactive. According to Fuertes, "one possible explanation for this result may be that physical activity improves respiratory muscle endurance and strength via a short- or moderateterm effect that requires sustained physical effort to maintain it."

"The results of this study strengthen the epidemiological evidence supporting an association between physical activity and <u>respiratory health</u>," concludes Judith Garcia-Aymerich, senior author and head of the Non-Communicable Diseases and Environment Programme at ISGlobal. This evidence should be used to "inform and support public health messages that promote increasing and maintaining physical activity as a way of preserving respiratory health in middle-age adults," she adds.

More information: Elaine Fuertes et al, Leisure-

time vigorous physical activity is associated with better lung function: the prospective ECRHS study, *Thorax* (2018). <u>DOI:</u> 10.1136/thoraxjnl-2017-210947

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