

# Exercise's Health Benefits in Overweight and Obese Patients

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## Editorial

Regular physical exercise is recommended as part of a successful weight loss and weight control lifestyle intervention. However, more than 40% of adults do not get enough exercise to reap the benefits of increased physical activity on body weight. Exercise has many physical and mental health and well-being benefits that extend far beyond weight loss, which is why it is especially important for overweight and obese people.

Exercise should be prescribed to avoid cardiovascular and other chronic diseases and disorders, as well as to improve physical health and function. There is no question that people who are overweight or obese reap significant and irrefutable benefits from regular physical exercise, and that adults who are overweight or obese reap equal benefits from physical activity as those who are of normal weight. Regular exercise and physical activity reduces the risk of developing cardiovascular disease (CVD), type 2 diabetes mellitus, some cancers (e.g., breast, colon, colorectal, prostate), depression, anxiety, and other diseases, and, in some cases, physical activity may be as effective as or more effective than traditional pharmacological treatments.

Physicians may have a big impact on getting their patients to exercise; adults who are told to exercise by their doctor are more likely to do so. Only about a third of all patients are recommended by their doctor to start or continue a physical exercise programme, despite the fact that people who are obese or diabetic are about two times more likely to receive such advice. Lack of experience or ability, time limitations, confusion about the efficacy of interventions, and lack of trust to participate in therapy with patients are all perceived obstacles to counselling patients about physical activity.

Muscle strengthening (resistance) exercise, alone or in conjunction with aerobic exercise, has many health benefits, including the prevention of death; these benefits are independent of aerobic exercise participation.

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Cardiorespiratory fitness (CRF) is a better predictor of mortality than conventional cardiovascular risk factors like smoking, dyslipidemia, hypertension, and diabetes, and this relationship is independent of physical activity and overweight or obesity. Better CRF lowers the risk of coronary heart disease, heart failure, and diabetes mellitus, and it can also reduce the effects of rising blood pressure. Weight gain, increased body fat, visceral adiposity, inflammation, and loss of muscle mass and bone density are all linked to a sedentary lifestyle and inadequate involvement in daily physical activity. These physiological adaptations to sedentary behavior lead to a loss of muscle strength and CRF, which can worsen physical disabilities, impairment, and the risk of developing diabetes.

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