



The Faculty of Sport and
Exercise Medicine (UK)



Public Health
England

Moving Medicine



**SPORT
ENGLAND**

LOTTERY FUNDED



@movingmedicine
#movingmedicine



@movingmedicineuk



BAsem
British Association of Sport
& Exercise Medicine

Moving Medicine components

Moving Conversations

- Prescribing Movement resources
- Active Conversations online course

Moving Hospitals

- Active hospital toolkit
- Clinical resources

Get involved

- Ambassador
- Campaign resources

Where does Moving Medicine come from?

An initiative by



The Faculty of Sport and
Exercise Medicine (UK)

In partnership with



Public Health
England



**SPORT
ENGLAND**

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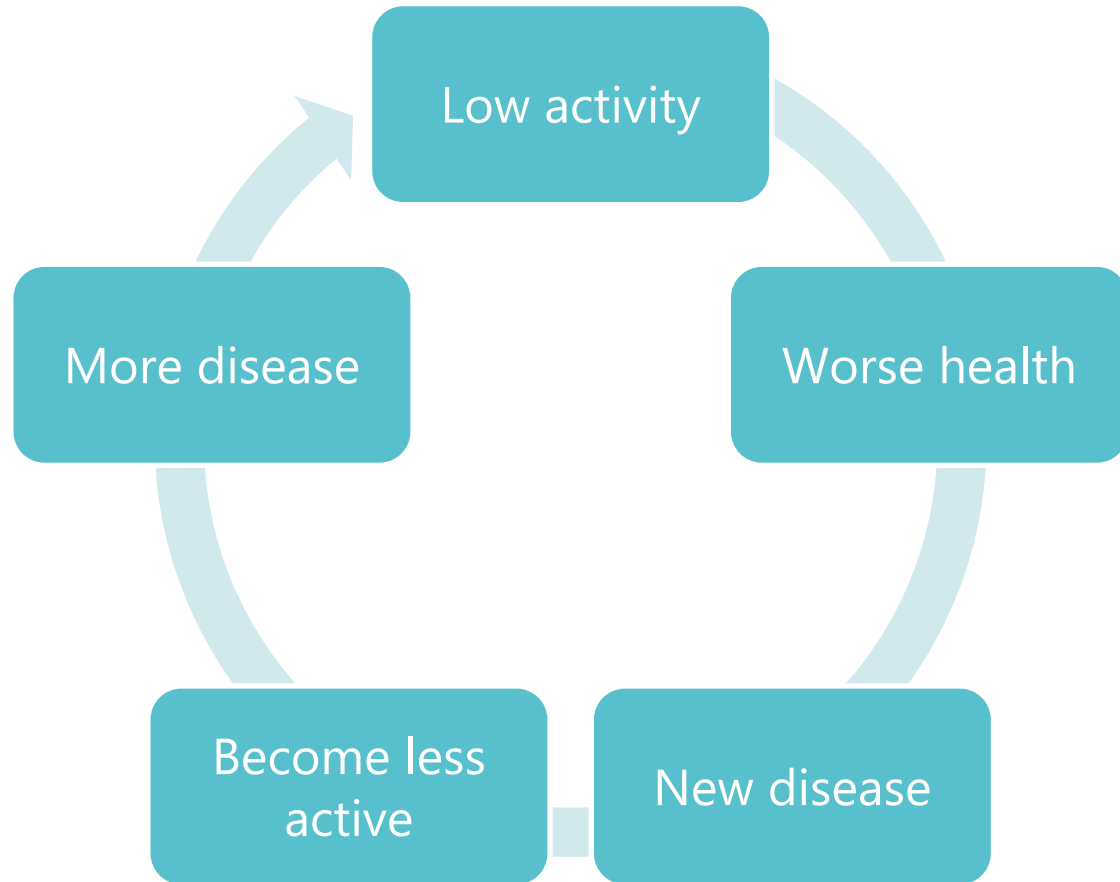
Born from the Moving Healthcare Professionals Programme

Our key ambition

Improving Conversations



Being inactive is bad for your health



- Decreasing activity levels since 1960s:
 - Adults are over 20% less active
 - By 2030 we will be 35% less active
- Estimated £7.4 billion annual cost to the UK

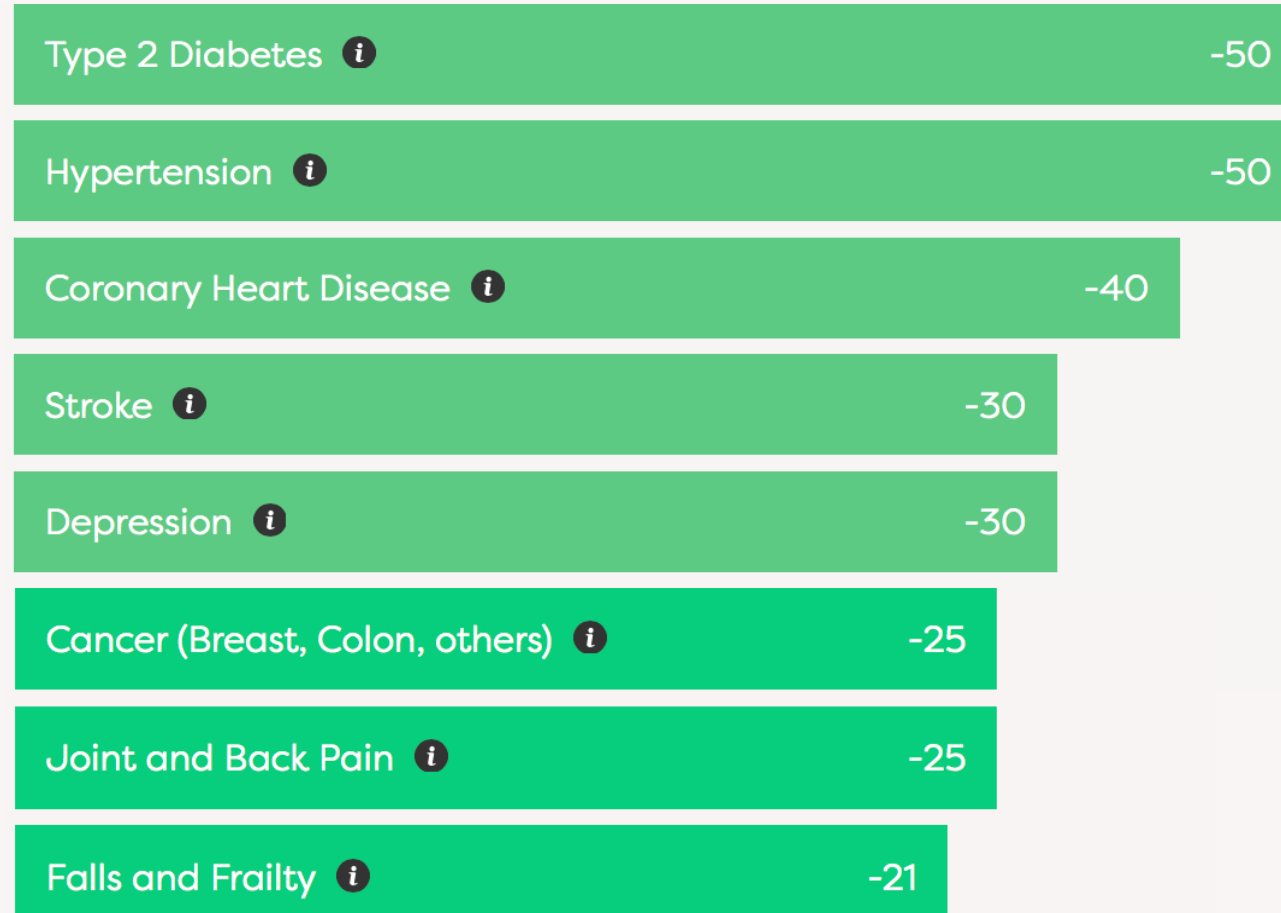
Inactivity carries a heavy burden

**One person dies of
inactivity every 15
minutes in the UK**

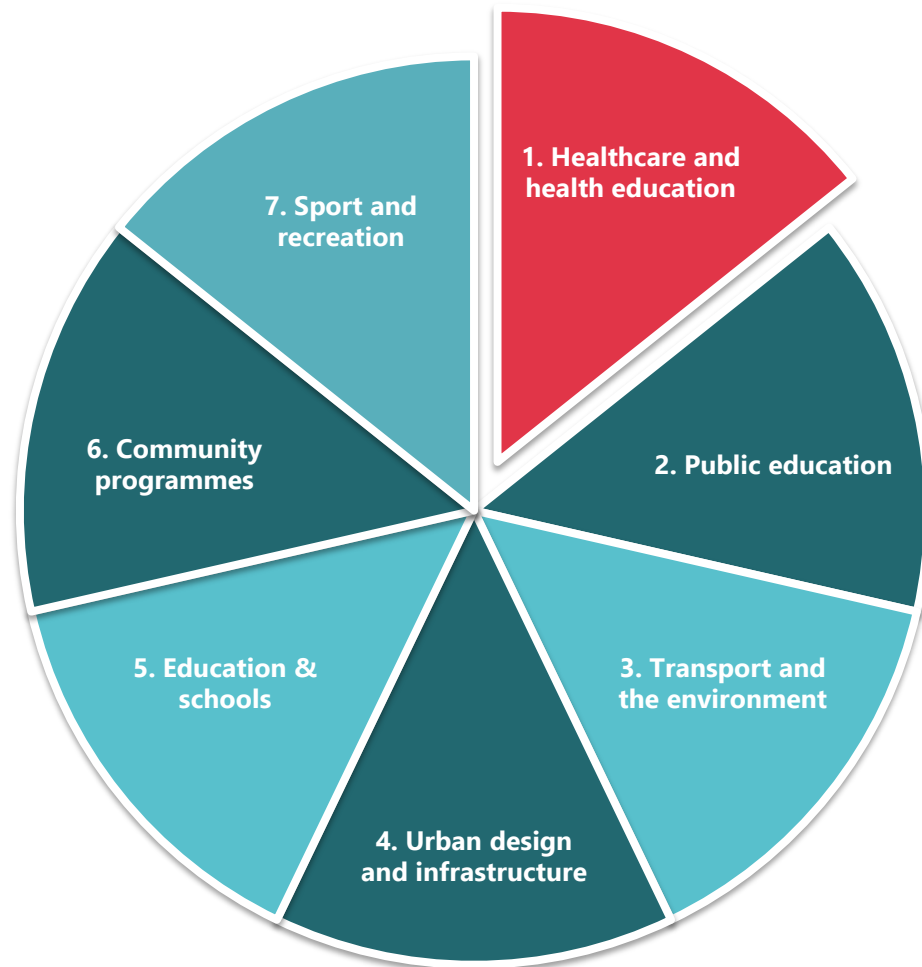
**This is more than
cigarettes**



Regular activity reduces the risk major diseases

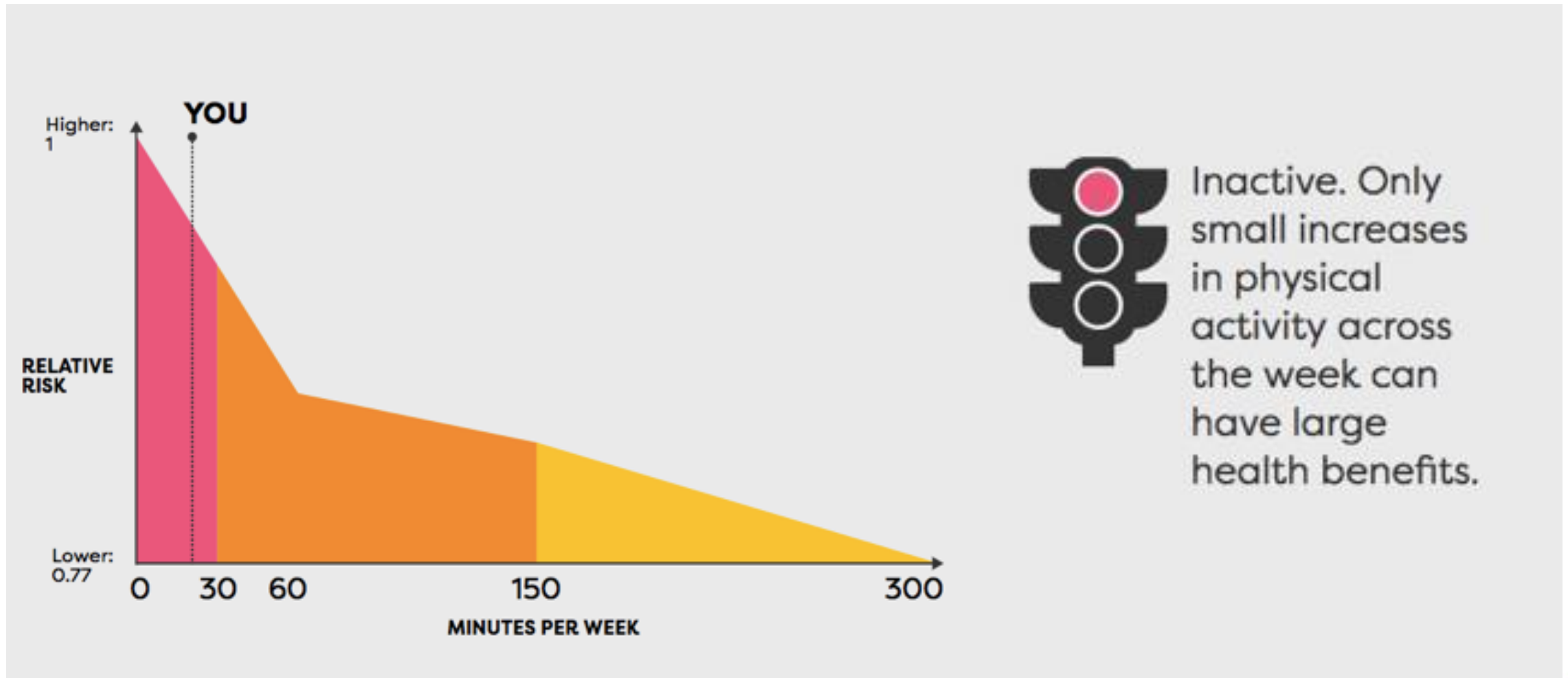


The reason this is important

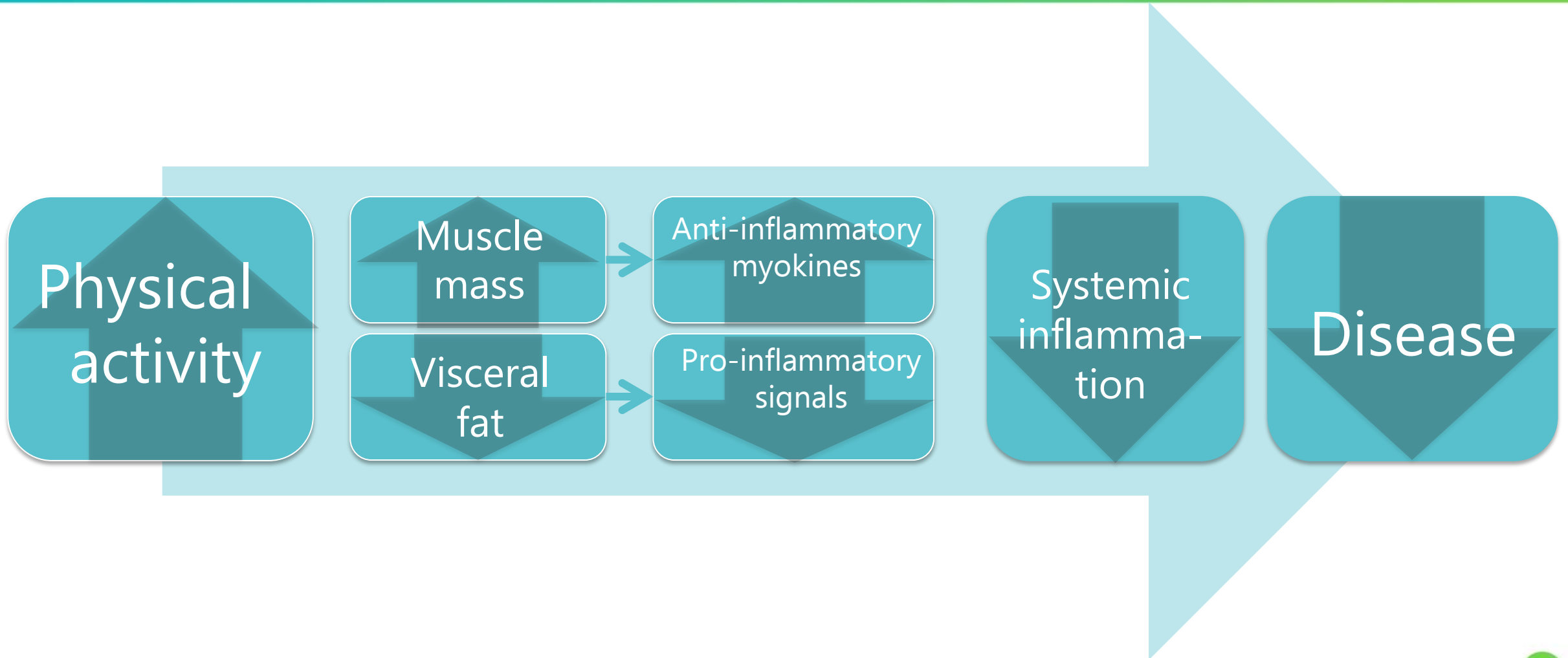


Healthcare is one of the 7 best investments in tackling population inactivity

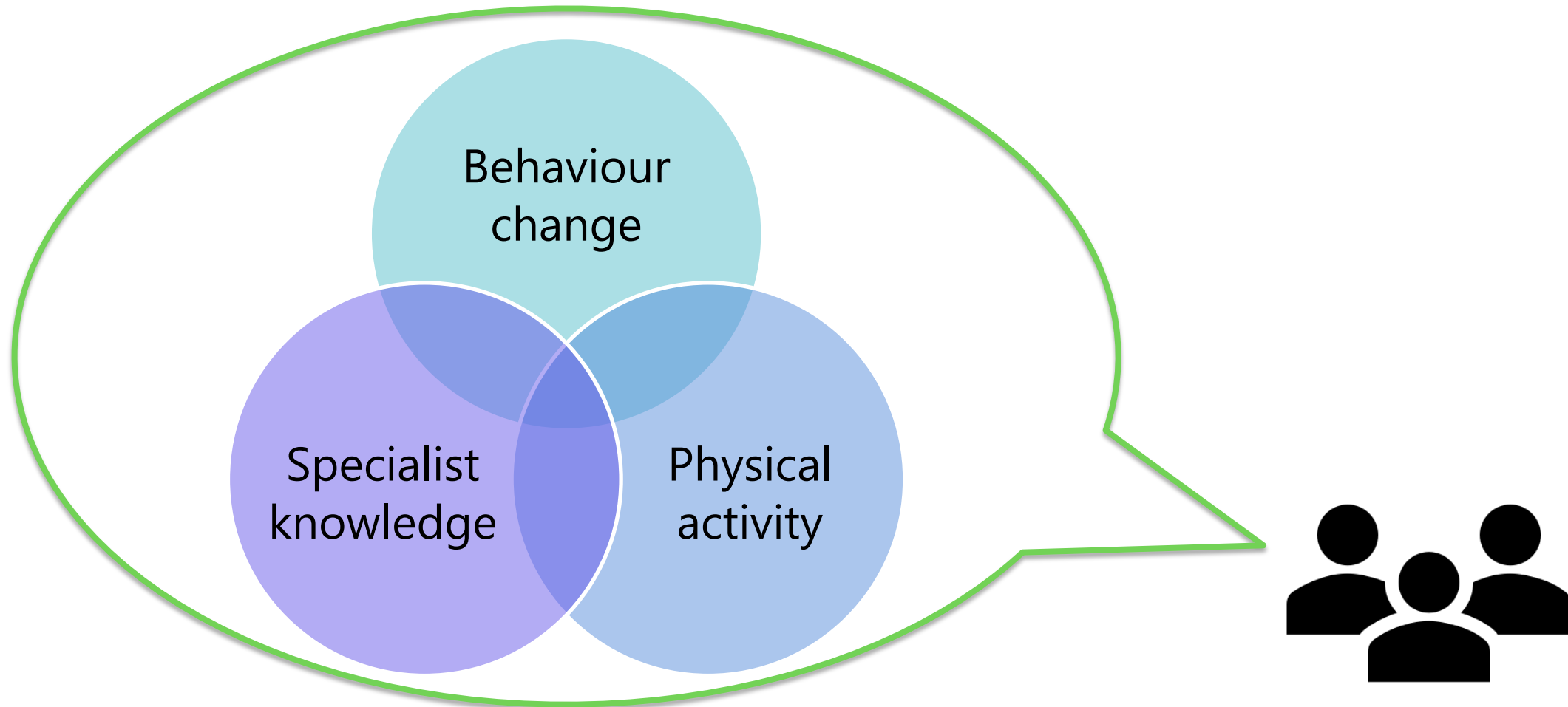
Healthcare has unique to the highest risk groups



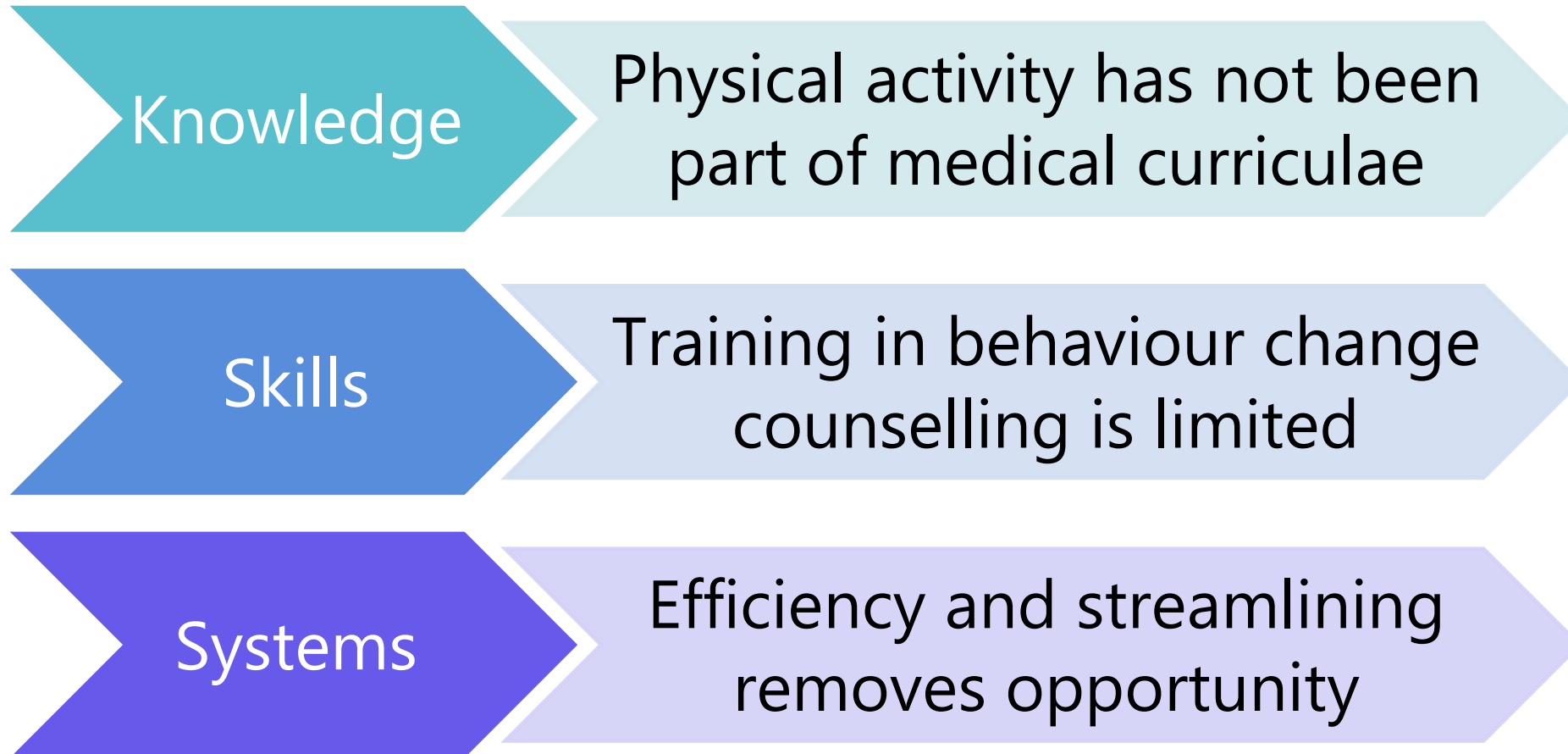
Physical activity reduces disease



Clinical practice is grounded in conversations



Clinical staff are ill equipped



The legacy of rest



Conversations require skill

Do you ever hear the following in consultation?

- *"Yes, but..."*
- *"I've tried that before"*
- *"It's just not for me"*
- *"It's not my fault"*

Or have you even found yourself in an argument?



Commonly perceived barriers to behavioural change

They don't see

Give them insight

they will change

They don't know

Give them knowledge

if people just know they will change

They don't care

Scare them; make them care

if you make people afraid/bad they will change

They don't know how

Give them skill

if you can teach people how to change

We challenge this view

They ~~don't~~ see

**They know they
could be more active**

They are ambivalent to
change

They ~~don't~~ know

**They expect it would
be good for them**

Recognise there are also
benefits to not changing

They ~~don't~~ care

People do care

Understand what they care
about most

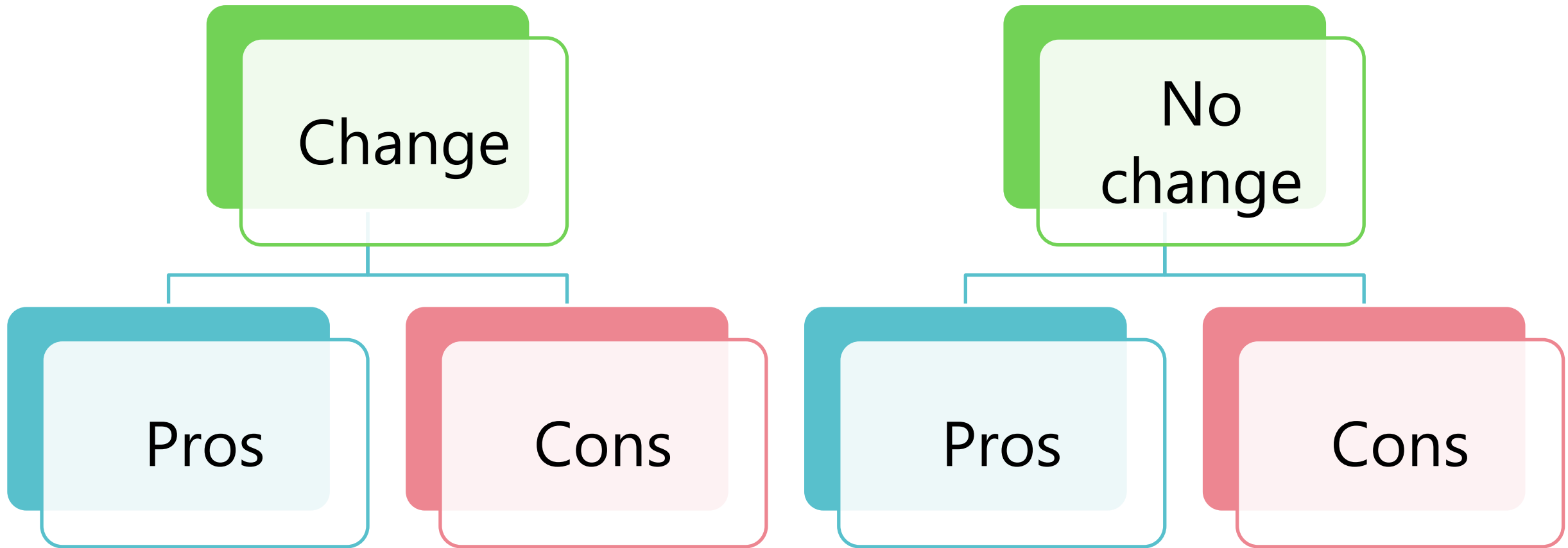
They don't ~~know~~ how

**Everybody knows
how to move**

Help them define their
expectations



Ambivalence



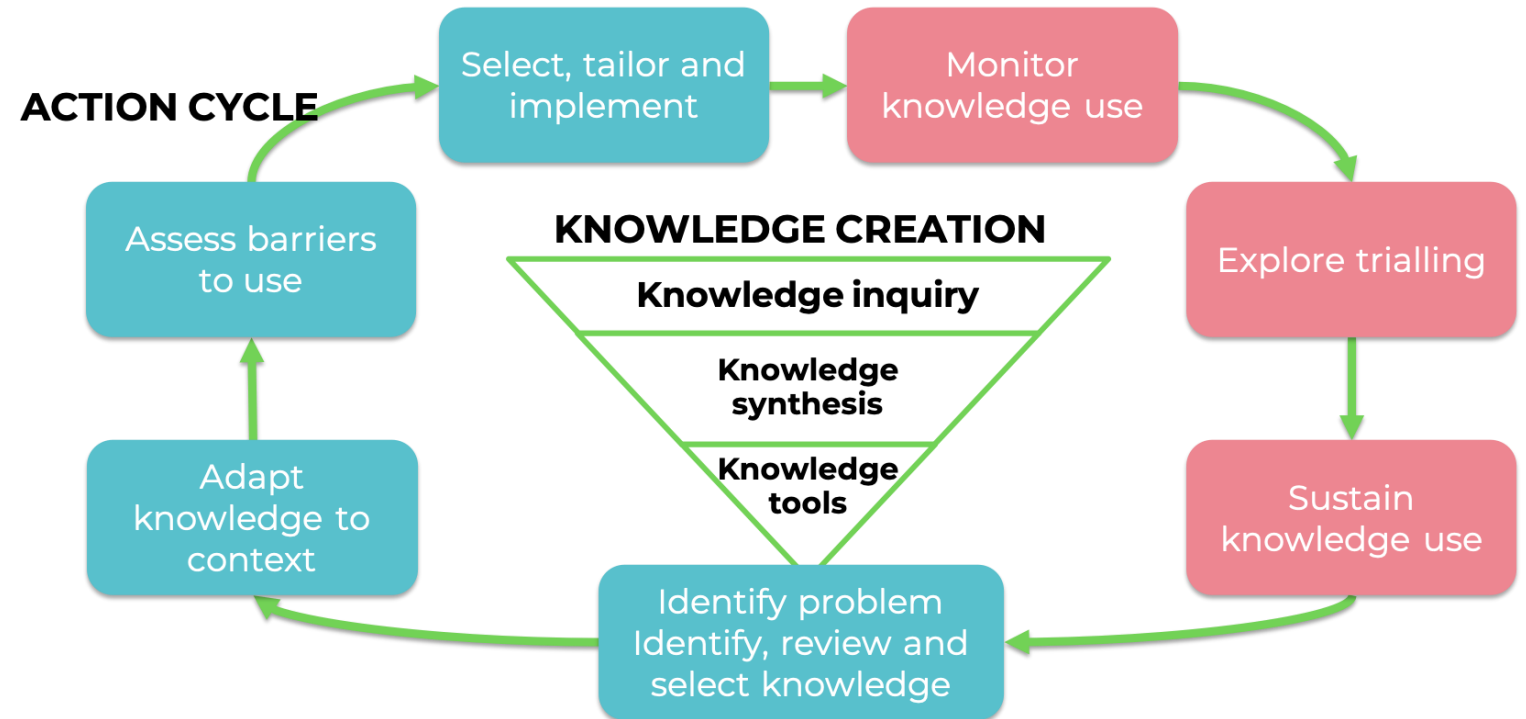
Is time a problem for you too?





Prescribing Movement resources

Developed using a knowledge into action framework with over 300 professionals



Partners and contributors



Prescribing movement



Cancer



COPD



Dementia



Type 2 Diabetes



Depression



Falls and Frailty



**Inflammatory
Rheumatic
Disease**



**Ischaemic Heart
Disease**



MSK pain



**Primary
Prevention**



Prescribing movement for

Musculoskeletal pain

We've squeezed all the important information into our step-by-step guides to help you have good quality conversations about physical activity. Just pick how much time you've got, we've done the rest.



**The 1 minute
conversation**



**The 5 minutes
conversation**



**The more minutes
conversation**



**Information
for patients**





1 minute conversation

1

Ask

if they know that many people with musculoskeletal pain find moving more really helps them **i**

2

Explain

that regular physical activity can help people to take control of their condition **i**

3

Invite

them to return to discuss their thoughts about being more active with you or a colleague and offer the patient information **i**

Did you know?

Your advice makes a difference **i**



Every conversation you have with people about physical activity is important in supporting behavioural change over the life course

Start small and build up gradually for a safe approach to starting activity **i**

MSK pain



The 1 minute
conversation



The 5 minutes
conversation



The more minutes
conversation



Information
for patients

Ask

Explore

Agree

Ask

NEXT →

As pain affects an individual's physical activity beliefs and behaviours, focusing on this can be a useful way to introduce the topic

1

Ask Permission

Ask permission to talk about either 'physical activity' or 'something that can make a big difference to your future health and wellbeing' **i**

2

Assess impact

How has their disease affected their physical activity levels and the things they enjoy? **i**

3

Explore benefits

What do they know about the benefits of physical activity in people with musculoskeletal pain? **i**

MSK pain



The 1 minute conversation



The 5 minutes conversation



The more minutes conversation



Information for patients

Ask

Explore benefits

Explore concerns

Build readiness

Agree a plan

Arrange support

Ask

NEXT →

As pain affects an individual's physical activity beliefs and behaviours, focusing on this can be a useful way to introduce the topic

1

Ask permission

Ask permission to talk about either 'physical activity' or 'something that can make a big difference to your future health and wellbeing'. ⓘ

2

Assess impact

How has their disease affected their physical activity levels and the things they enjoy? ⓘ

3

Review activity ⓘ

ACTIVITY CALCULATOR

4

Explore benefits

What do they know about some of the benefits of physical activity in people with musculoskeletal pain? ⓘ

MSK pain

1

The 1 minute conversation

5

The 5 minutes conversation

+

The more minutes conversation

?

Information for patients

Ask

Explore benefits

Explore concerns

Build readiness

Agree a plan

Arrange support

Explore benefits

← BACK

NEXT →

Now you've started to understand their views, it may be appropriate to introduce and explore further benefits:

1 Ask

“Can I share with you what we now know?” or “Can I tell you some more information to see what you make of it?”

2 Share

2-3 benefits of physical activity for people with **Osteoarthritis**



Reduces pain



Reduces stiffness



Improves physical function



Improves quality of life



Improves general health



Improves mental health



The 1 minute conversation



The 5 minutes conversation



The more minutes conversation



Information for patients

Ask

Explore benefits

Explore concerns

Build readiness

Agree a plan

Arrange support

2

Share

If they mention one of these common concerns, click on it to see a useful response.



I'm already in pain and doing more will just make that worse...



I already feel tired and you want me to do more....



I am worried that my symptoms will get worse...



I've been told that my scan shows damage and I don't want to make that worse...



I have been diagnosed with osteoporotic spinal fractures. Is it advisable for me to be active, or will it cause me to have more fractures or pain?



I've already tried this before, but I stopped because I saw no benefit...



I'm already very busy, how can I find the time to fit this in?



No one in my community does exercise, it is not in our culture...



My gym said I need medical clearance before being active: am I OK to exercise?

MSK pain



The 1 minute conversation



The 5 minutes conversation



The more minutes conversation



Information for patients

Ask

Explore benefits

Explore concerns

Build readiness

Agree a plan

Arrange support



I've been told that my scan shows damage and I don't want to make that worse...



I have been diagnosed with osteoporotic spinal fractures. Is it advisable for me to be active, or will it cause me to have more fractures or pain?



I've already tried this before, but I stopped because I saw no benefit...

Despite these changes, the evidence suggests that pain, function and other symptoms are still improved with regular physical activity. Also, the link between changes on scans and symptoms is rarely straight forward. For example, 52% of those aged 30, 80% of those aged 50 and 93% of those aged 70 without back pain will have evidence of lumbar disc degeneration on their MRI.



Tips you may wish to share:

- Changes on scans need not stop activity levels increasing
- Scan changes do not necessarily represent symptoms
- Improving the strength and support around joints can improve symptoms
- See our 'Explain How it Works' page to understand how

Reference

Brinjikji W, Diehn FE, Jarvik JG, *et al.* MRI findings of disc degeneration are more prevalent in adults with low back pain than in asymptomatic controls: A systematic review and meta-analysis. *Am J Neuroradiol* 2015; **36**:2394–9. doi:10.3174/ajnr.A4498

MSK pain



The 1 minute conversation



The 5 minutes conversation



The more minutes conversation



Information for patients

Ask

Explore benefits

Explore concerns

Build readiness

Agree a plan

Arrange support

Select their biggest barrier to moving more: Musculoskeletal Pain ↓

Positive



Negative



4 Agree a plan

Different options suit different people and can be effective when used alone or with each other.

Explore the options below and print out the relevant PDF for your patient or print the workbook in [Information for Patients](#).

1

Motivational support

Use this document for people who are keen to review and develop their motivation for behavioural change

2

Action planning

Action planning is good for those who hope to set structured goals to create a roadmap for behaviour change ⓘ

3

Step counting

Use this for those keen to use self-monitoring devices such as pedometers, wrist worn accelerometers or smartphones to monitor their daily step counts. ⓘ

4

Make a diary

Creating a personalised monthly schedule helps work out where and when someone can start to fit opportunities to become more active into their everyday life.

Individuals are more likely to change their behaviour if they are following a set of goals they have committed to.



Develop an action plan and set goals

- Give them a copy of [this document](#) and if you have time go through it together

Signpost opportunities

- Visit 'next steps' with them and share information about local physical activity resources

MSK pain



The 1 minute conversation



The 5 minutes conversation



The more minutes conversation



Information for patients

Being active is important for Musculoskeletal Pain



What good things could being more active do for you?

- Reduces pain
- Reduces stiffness
- Improves physical ability
- Improves quality of life
- Improves general health
- Improves mental health

Reduce your risk by being more active. All adults keeping physically active reduces your chance of:



How can being active improve my pain?



- Better sleep quality & better self-esteem
- Greater balance or physical ability
- Improve focus
- Less fatigue and greater energy
- Improve resilience

- 1 Find something you enjoy. If one thing isn't for you, try something else.
- 2 Increase your duration of activity first, then the intensity.
- 3 Ensure that you warm up before dedicated activity, and cool down afterwards.
- 4 Muscle soreness after physical activity is very common, particularly if you're new to regular exercise, but it does not mean damage. As you get stronger and fitter, this will get better.
- 5 Function often improves before pain - strong muscles support joints.
- 6 Don't let bad days discourage you or make you stop.
- 7 Even be at the time of day when your pain is usually least severe.
- 8 Wear supportive footwear - shock absorption and stability are important.
- 9 Start slow and build up gradually aiming for bouts of 10 minutes or more.
- 10 Tell your friends and family your plans.




Do you want to learn more?

- Visit movingmedicine.ac.uk
- Sign up for our next Active Conversation course
- Join our ambassador network

**Become an
ambassador**




Spread the word



**Join the
moving
movement.**


Even if you start slow, you're still lapping everyone on the sofa.

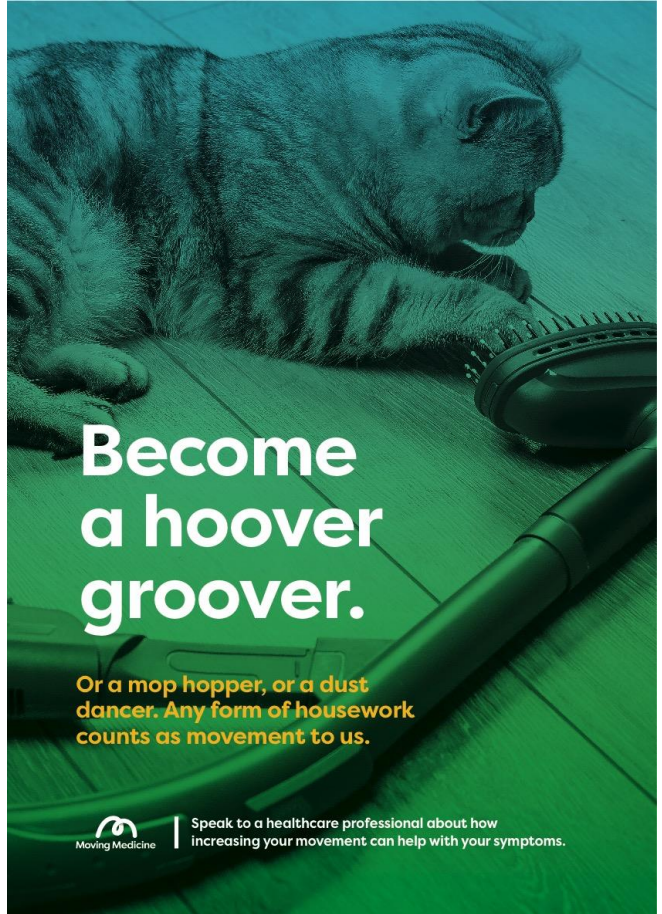
 | Speak to a healthcare professional about how increasing your movement can help with your symptoms.



**Practice
what you
prescribe.**


We're not asking you to run a marathon, but keeping active daily needn't be a stretch.

 | Speak to your patients about how increasing their movement can help with their symptoms.

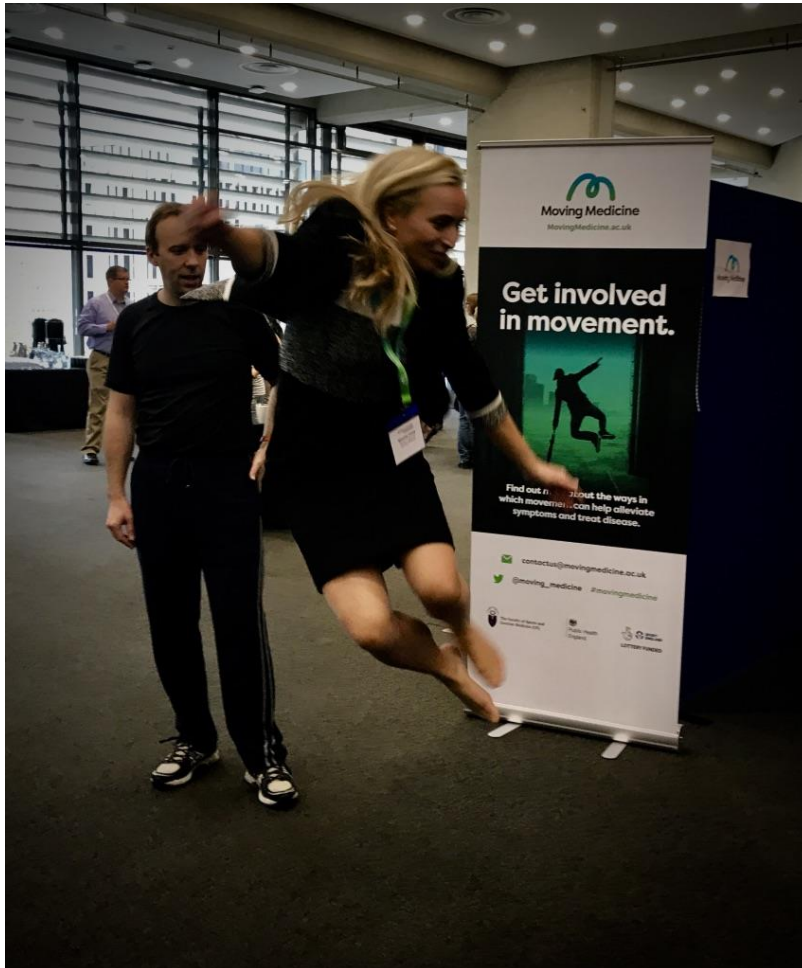


**Become
a Hoover
groover.**

Or a mop hopper, or a dust dancer. Any form of housework counts as movement to us.

 | Speak to a healthcare professional about how increasing your movement can help with your symptoms.

We are gaining traction



“Doctors should prescribe more gardening, ballroom dancing and art rather than reaching for medication”

Matt Hancock

Secretary of State for Health and Social Care

September 2018



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Moving Medicine

**Join the moving
movement**

