



## EDITOR'S CHOICE

# The miracle cure

Fiona Godlee *editor in chief*

The BMJ

As miracle cures are hard to come by, any claims that a treatment is 100% safe and effective must always be viewed with intense scepticism. There is perhaps one exception. Physical activity has been called a miracle cure by no less a body than the Academy of Medical Sciences (<http://bit.ly/2ITqDvc>); and, like those who avail themselves of it, the supporting science grows stronger by the day. *The BMJ* recently published a systematic review showing a clear dose-response relation between physical activity and all cause mortality (doi:10.1136/bmj.l4570). The authors concluded that any level of activity is better than none, and more is better still, a message recently encapsulated in the updated guidelines from the UK's chief medical officers (doi:10.1136/bmj.l5470).

As summarised by Christine Haseler and colleagues this week, the evidence that activity is good for both body and mind is impressive (doi:10.1136/bmj.l5230). People who are more active live longer and have lower rates of cardiovascular disease, cancer, and depression. Physical activity is safe and beneficial for almost everyone, they say. People should "start slow and build up" to avoid injury, and those with chronic illness may benefit from a tailored exercise prescription.

Are there downsides? There seem to be far fewer than for other widely used preventives and cures. Indeed, physical activity is one of the alternatives to antidepressants and painkillers that Ian Hamilton says we need for people struggling with physical or psychological pain (<https://blogs.bmj.com/bmj/2019/09/13/ian-hamilton-prescription-drugs-are-no-cure-for-deprivation>). It seems to have few if any side effects, and unlike some prescription drugs it is not generally addictive, although exercise addiction does occur. Nor does it drive overdiagnosis, unlike intensive precision screening as described this week by Henrik Vogt and colleagues (doi:10.1136/bmj.l5270).

So how can we encourage patients to be more active? Haseler and colleagues say that any contact with patients is an opportunity to raise the issue and that even a brief discussion can help. You should feel free to print off the figures from their article and hand them to patients or put them up in your waiting room.

As for doctors, we should take the same advice: be more active, for our own health and wellbeing and as role models to patients and colleagues. Whether walking or cycling to work, having stand-up meetings and ward rounds, or just getting up from your desk between consultations, physical activity is the miracle cure.