A Controlled Trial of Physician Counselling to Promote the Adoption of Physical Activity

In this month’s edition of “EIM Research Shorts”, we wanted to step back in time and present one of the classic trials examining the promotion of physical activity (PA) in our healthcare systems – the Physical-based Assessment and Counseling for Exercise (PACE) trial. The PACE trial was conducted in the mid-1990’s by an esteemed team of researchers, many of whom are still actively involved with the EIM initiative. The PACE trial took place in San Diego, CA where 17 physicians from diverse ethnic backgrounds and practice types were recruited to participate – ten in the PACE intervention arm and seven in a control arm. Physicians selected as a part of the PACE intervention arm received training in small group settings, conducted role playing with mock participants, and received the study training manual.

Patients, who had appointments with physicians in the PACE intervention arm, were asked to complete a PACE assessment questionnaire while in the waiting room. Their “stage of change” was then scored by a nurse or receptionist and they were designated as being in precontemplation, contemplation, or currently active. The physician and his team spent 3-5 minutes of the office visit discussing stage-relevant information and strategies for becoming more physically active with the patient. Afterwards, a health educator followed up the counseling session with a booster phone call to reinforce information provided during the clinic visit.

During the study, 407 eligible patients were identified, 255 enrolled in the study (a 62.7% enrollment rate), and 212 completed all study follow up assessments (an 83.1% completion rate). Over the course of the study, a significant proportion of patients who visited physicians in the PACE intervention arm moved from the contemplation to the active stage with 52% reporting being regularly active (compared to 12% of the control patients). Similarly, patients in the PACE intervention significantly increased their walking time by 40 minutes a week, a 100% increase over their baseline activity levels (compared to a 10 minute per week increase in the control patients).

The results of this study clearly demonstrated that minimal physician counseling, matched to a patient’s needs and current motivation level (i.e., Stage of Change), was capable of producing
meaningful changes in PA levels. The PACE study set a historical precedent showing that 3 to 5
minutes of counseling can lead to important changes in patient activity levels. This trailblazing
study set a path forward for research examining the promotion of PA in the healthcare setting,
eventually serving as the foundation for the launch of the Exercise is Medicine® initiative in
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