

Behavioral Counseling Interventions to Promote a Healthful Diet and Physical Activity for Cardiovascular Disease Prevention in Adults

The U.S. Preventive Services Task Force (Task Force) has issued a **final** recommendation on *Behavioral Counseling Interventions to Promote a Healthful Diet and Physical Activity for Cardiovascular Disease Prevention in Adults*.

This recommendation is for adults ages 18 and older who have not been diagnosed with high blood pressure, diabetes, high blood cholesterol, or heart disease.

The Task Force reviewed recent research studies on actions health care professionals can take to help adults eat a healthy diet and be physically

active to prevent heart disease. This type of care is called behavioral counseling. The recommendation summarizes what the Task Force learned about the potential benefits and harms of this counseling: It concluded that for most people at low risk for heart disease, the benefits of behavioral counseling are small. Some people, however, do experience a greater benefit. Therefore, health care professionals may choose to provide counseling to these patients, rather than offering it to everyone.

This fact sheet explains the recommendation and what it might mean for you.

What is
cardiovascular
disease prevention?

Cardiovascular disease includes heart disease and stroke. Each year, more than half a million Americans die from heart disease and more than 100,000 die from stroke. Taking action to reduce risk factors can help prevent or delay cardiovascular disease. These actions include:

- not smoking
- eating a healthy diet
- being physically active
- maintaining a healthy weight
- keeping blood pressure and blood cholesterol under control

Facts About Healthy Eating, Physical Activity, and Heart Disease

A healthy diet and regular physical activity promote overall health and reduce the risk of common chronic diseases, including heart disease. Heart disease is the leading cause of death in the United States, and risk factors for heart disease, such as obesity, high blood pressure, diabetes, and high blood cholesterol, are common. Adults who eat a healthy diet and are physically active can reduce these risk factors, as well as reduce their chances of developing and dying from heart disease.

National **dietary guidelines** encourage adults to eat a healthy diet and maintain calorie balance over time to achieve and sustain a healthy weight. A healthy diet emphasizes nutrient-dense foods and is low in solid fats, added sugars, refined grains, and sodium. Nutrient-dense foods include:

- **vegetables and fruits**
- **whole grains**
- **fat-free or low-fat milk and milk products**
- **seafood, lean meats and poultry, eggs, beans and peas, and nuts and seeds**

National **physical activity guidelines** recommend that adults:

- **avoid inactivity**
- **be physically active for at least 150 minutes a week**
- **include muscle-strengthening activities 2 or more times a week**

Behavioral Counseling on Healthy Eating and Physical Activity to Prevent Heart Disease

Even if you have not been diagnosed with high blood pressure, diabetes, high blood cholesterol, or heart disease, you can benefit from healthy eating and regular physical activity. Discussions about healthy lifestyle choices to reduce your risk of heart disease should be a regular and ongoing part of conversations with your health care professional.

Your health care professional may suggest you join a program that can help you make healthy eating choices and increase physical activity. These programs are usually taught by health educators, nurses, counselors, dietitians or nutritionists, or exercise professionals.

The Task Force studied a variety of diet and physical activity counseling programs, including:

- **low-intensity programs**, which involve written information or one or two brief sessions with a counselor or trainer
- **medium-intensity programs**, which involve three or more phone sessions or one or more in-person sessions
- **high-intensity programs**, which involve four or more group sessions

Potential Benefits and Harms

The Task Force examined changes in eating and physical activity behaviors that participants said they made after being in a program. The Task Force also studied the effects of these programs on participants' weight, blood pressure, and blood cholesterol. Low-intensity programs did not show any benefits. Medium-intensity or high-intensity behavioral counseling programs had small to moderate benefits.

The Task Force did not find evidence about whether these programs reduced heart attacks or deaths from heart disease.

The Task Force also found that potential harms from behavioral counseling programs are very small.

The Task Force Recommendation on Behavioral Counseling on Healthy Eating and Physical Activity to Prevent Heart Disease: What Does It Mean?

Here is the Task Force's recommendation on counseling on healthy eating and physical activity to prevent heart disease. The recommendation has a letter grade. The grade is based on the quality and strength of the evidence about the counseling and on the potential benefits and harms of the counseling.

A **Grade C** recommendation means that the Task Force recommends offering a behavioral counseling program to some but not all patients in this population. A health care professional may choose to offer it to certain patients because of their particular health situation. In deciding whether to offer a program, the health care professional also may take into account whether a patient seems ready to change behaviors and has support for these changes at home or in the community. The Notes next to the recommendation explain key ideas.

Visit the Task Force Web site to read the full [recommendation statement](#). The statement explains the evidence the Task Force reviewed and how it determined the grade. An [evidence report](#) provides more detail about the studies the Task Force reviewed.

1 Although the *correlation* between healthful diet, physical activity, and the *incidence* of *cardiovascular disease* is strong, existing evidence indicates that the health benefit of *initiating* behavioral counseling in the primary care setting to promote a healthful diet and physical activity is small. *Clinicians* may choose to *selectively provide this service* to patients rather than incorporating it into the care of all adults in the general population. **Grade C**

- **Considerations:** Clinicians may consider other risk factors for cardiovascular disease, patient readiness for change, social support and community resources that support behavioral change, and other health care and preventive service priorities.
- **Potential harms:** Harms may include the lost opportunity to provide other services with a greater health impact.

Notes

1 *correlation*
Relationship.

incidence

The number of new cases during a specific time period.

cardiovascular disease

A condition in which a fatty substance builds up in the arteries that supply oxygen-rich blood to the heart and brain. This can lead to a blockage in the arteries, causing a heart attack or stroke.

initiating
Beginning.

clinicians

Health care professionals, including doctors, nurses, physician assistants, and nurse practitioners.

selectively provide this service

A clinician may choose to offer behavioral counseling to some patients because it would help them, even though the benefits for adults in this population are small.

considerations and potential harms

These are the factors that can help a clinician decide whether to offer this type of behavioral counseling to a patient.

What is the U.S. Preventive Services Task Force?






The Task Force is an independent group of national experts in prevention and evidence-based medicine. The Task Force works to improve the health of all Americans by making evidence-based recommendations about clinical preventive services such as screenings, counseling services, or preventive medicines. The recommendations apply to people with no signs or symptoms of the disease being discussed.

To develop a recommendation statement, Task Force members consider the best available science and research on a topic. For each topic, the Task Force posts draft documents for public comment, including a draft recommendation statement. All comments are reviewed and considered in developing the **final recommendation statement**. To learn more, visit the [Task Force Web site](#).

USPSTF Recommendation Grades

Grade	Definition
A	Recommended.
B	Recommended.
C	Recommendation depends on the patient's situation.
D	Not recommended.
I statement	There is not enough evidence to make a recommendation.

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-  **ChooseMyPlate.gov**
(U.S. Department of Agriculture)
-  **Be Active Your Way: A Guide for Adults**
(U.S. Department of Health and Human Services)
-  **Keep Your Heart Healthy**
(healthfinder.gov)
-  **What is Coronary Heart Disease?**
(National Heart, Lung, and Blood Institute)
-  **Million Hearts™**
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