## Advising the Obese Patient on Starting a Running Program

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Running for weight loss is a popular fitness trend. Scientific guidelines are not yet formulated for the overweight and obese population, but key principles of safety and progression may help minimize injury risk as training adaptations and weight loss occur. The main goals of the running program should include enjoyment of the exercise, gradual weight loss, and avoidance of injury. It is acknowledged that specific scientific evidence for this population wishing to begin running is lacking. As such, the following points may help clinicians provide conservative advice on preparing for running, progression, and selfmonitoring. A focus on form and control should be a priority over speed or finishing running events. Preemptive musculoskeletal double- and single-legged strengthening exercises can be used to improve the function and stability of the feet and ankles, hip abductors, quadriceps, and trunk to help support the load-bearing joints before engaging in running. Initiating exercise with a few weeks of walking on a flat surface or on an incline at high intensity can increase endurance and increase caloric expenditure (2). For young, otherwise healthy persons with no joint pain, other more aggressive training options may be used. Walking at the "walk-to-run transition speed" or the speed at which the person feels that he or she may prefer to start jogging increases caloric expenditure more than slower walking (1). Progression into running should include slow and consistent increases in intensity or mileage at a rate not exceeding 5% to 10% per week. Intermittent walk-jog programs can be suggested if the individual cannot sustain running for a long period (3). For morbidly obese persons, intermittent high-intensity stationary cycling may be used to improve fat oxidation before engaging in walking and running. For all persons, musculoskeletal pain should neither carry over to the next day nor be increased the day after exercising. Fatigue can compromise running mechanics. Patients should be advised to stop running and walk when too fatigued to control the running motion. Rest days in between running sessions may help prevent overuse injury.

## References

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