



**CAMFiC AL DIA**  
L'actualització en AP



**CAMFiC**  
societat catalana de medicina  
familiar i comunitària

# ÉS L'ACTIVITAT FÍSICA UN BON TRACTAMENT PER LA DISPNEA?

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Metge Família. EAP Tremp. Pallars Jussà  
Grup de Treball Exercici físic i salut de la CAMFiC

# CONFLICTES D'INTERÈS

Declaro que no tinc cap conflicte d'interès en la presentació d'aquests articles



## QUÈ SABEM ABANS DE 2023?

- L'activitat física te beneficis en ítems socials, fisiològics i psicològics en MPOC
- Tractament mèdic + activitat física en insuficiència cardíaca millora morbimortalitat (vs fàrmacs sols)
- Durant el tractament del càncer de pulmó l'activitat física disminueix, fet que repercuteix en la capacitat funcional

## QUÈ SABEM ABANS DE 2023?

- En ansietat i depressió l'activitat física és beneficiosa, però no la prescrivim
- Hi ha dubtes sobre si la realització d'activitat física en pacients afectats de COVID pot ser contraproduent donada la possible miocardiopatia inflamatòria associada.
- Més activitat física i menys sedentarisme disminueix risc de mortalitat prematura i té beneficis econòmics



# PULMONOLOGY

[www.journalpulmonology.org](http://www.journalpulmonology.org)



## REVIEW

# Unsupervised physical activity interventions for people with COPD: A systematic review and meta-analysis



C. Paixão<sup>a,b,c</sup>, V. Rocha<sup>a,b</sup>, D. Brooks<sup>d,e</sup>, A. Marques<sup>a,b,\*</sup>

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<sup>d</sup> School of Rehabilitation Sciences, McMaster University, Hamilton, Canada

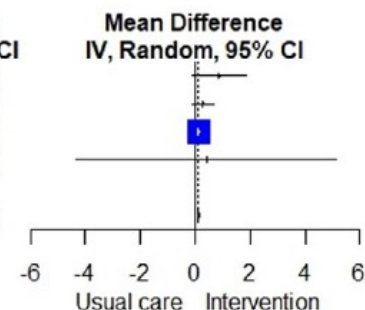
<sup>e</sup> West Park Healthcare Centre, Toronto, Canada

**a) CRQ-D**

Study	Intervention			Usual care			Weight	Mean Difference IV, Random, 95% CI
	Mean	SD	Total	Mean	SD	Total		
Moore et al, 2009	0.43	0.34	10	-0.43	1.55	10	0.1%	0.86 [-0.12; 1.84]
Mitchell et al, 2014	0.71	1.18	71	0.42	1.40	84	0.5%	0.29 [-0.12; 0.70]
Coultas et al, 2016	0.02	0.09	113	-0.10	0.14	134	99.4%	0.12 [0.09; 0.15]
Lahham et al, 2020	2.60	9.20	29	2.20	9.20	29	0.0%	0.40 [-4.34; 5.14]

**Total (95% CI)** 223 257 100.0% **0.12 [0.09; 0.15]**

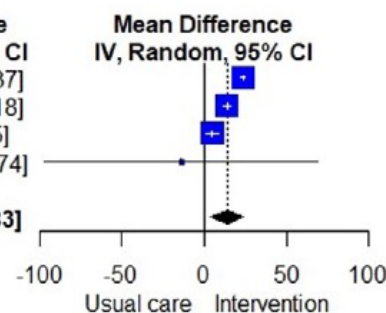
Heterogeneity:  $\tau^2 = 0$ ;  $\text{Chi}^2 = 2.85$ ,  $\text{df} = 3$  ( $P = 0.42$ );  $I^2 = 0\%$   
 Test for overall effect:  $Z = 8.25$  ( $P < 0.01$ )


**b) 6MWD**

Study	Intervention			Usual care			Weight	Mean Difference IV, Random, 95% CI
	Mean	SD	Total	Mean	SD	Total		
Elçi et al, 2008	16.50	2.50	39	-6.90	1.80	39	33.6%	23.40 [22.43; 24.37]
Coultas et al, 2016	0.30	8.78	113	-13.40	11.13	134	33.0%	13.70 [11.22; 16.18]
Chen et al, 2017	47.79	10.02	25	43.01	1.33	22	32.0%	4.78 [0.81; 8.75]
Lahham et al, 2020	15.00	163.48	29	29.00	157.98	29	1.4%	-14.00 [-96.74; 68.74]

**Total (95% CI)** 206 224 100.0% **13.70 [3.58; 23.83]**

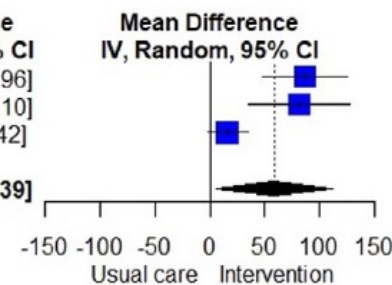
Heterogeneity:  $\tau^2 = 79.2814$ ;  $\text{Chi}^2 = 121.39$ ,  $\text{df} = 3$  ( $P < 0.01$ );  $I^2 = 98\%$   
 Test for overall effect:  $Z = 2.65$  ( $P < 0.01$ )


**c) ISWD**

Study	Intervention			Usual care			Weight	Mean Difference IV, Random, 95% CI
	Mean	SD	Total	Mean	SD	Total		
Moore et al, 2009	64.00	29.24	10	-22.33	55.04	10	32.4%	86.33 [47.70; 124.96]
Ho et al, 2012	62.50	106.00	20	-19.10	5.00	21	30.1%	81.60 [35.10; 128.10]
Mitchell et al, 2014	9.40	62.33	71	-6.70	52.37	84	37.5%	16.10 [-2.22; 34.42]

**Total (95% CI)** 101 115 100.0% **58.59 [5.79; 111.39]**






Heterogeneity:  $\tau^2 = 1849.0795$ ;  $\text{Chi}^2 = 14.73$ ,  $\text{df} = 2$  ( $P < 0.01$ );  $I^2 = 86\%$   
 Test for overall effect:  $Z = 2.17$  ( $P = 0.03$ )





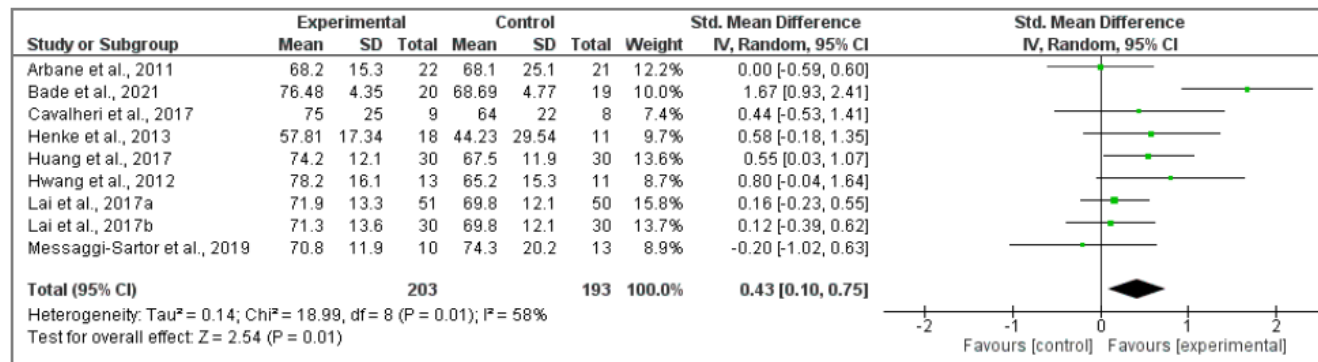
*Systematic Review*

# Effects of Physical Activity Interventions on Self-Perceived Health Status among Lung Cancer Patients: Systematic Review and Meta-Analysis

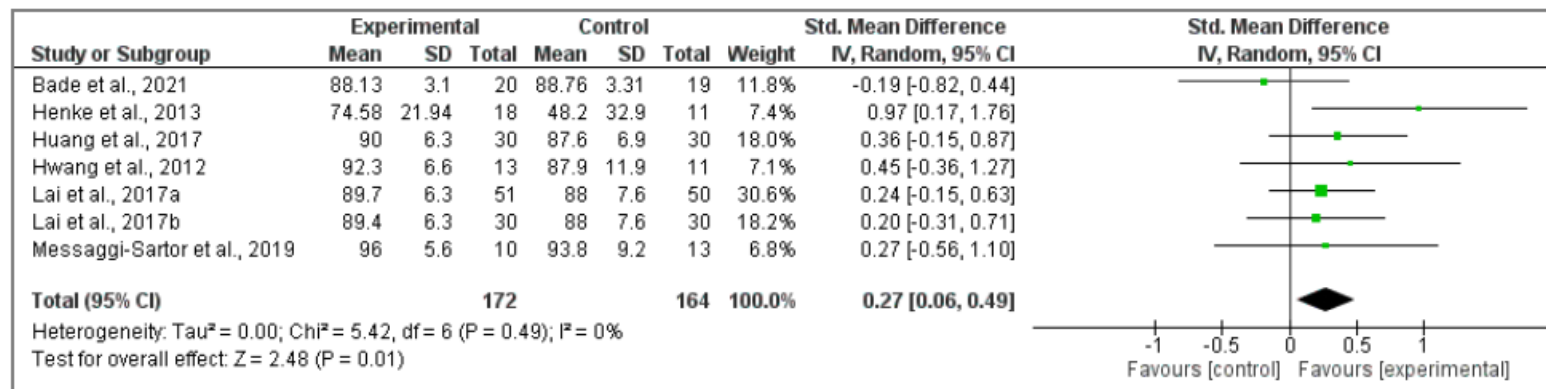
Alejandro Barrera-Garcimartín <sup>1</sup>, Miguel Sánchez-Polán <sup>2,\*</sup>, Ana López-Martín <sup>3</sup>, María José Echarri-González <sup>3</sup>, Moisés Marquina <sup>4</sup>, Rubén Barakat <sup>2</sup>, Carlos Cordente-Martínez <sup>4</sup> and Ignacio Refoyo <sup>4</sup>

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  - <sup>2</sup> AFIPE Research Group, Faculty of Physical Activity and Sport Sciences-INEF, Universidad Politécnica de Madrid, 28040 Madrid, Spain; barakatruben@gmail.com
  - <sup>3</sup> Oncology Service, Hospital Universitario Severo Ochoa de Leganés, 28911 Leganés, Spain; almartin@salud.madrid.org (A.L.-M.); mecharrigonzalez@gmail.com (M.J.E.-G.)
  - <sup>4</sup> Sports and Training Research Group, Sports Department, Faculty of Physical Activity and Sport Sciences-INEF, Universidad Politécnica de Madrid, 28040 Madrid, Spain; moises.mnieto@upm.es (M.M.); carlos.cordente@upm.es (C.C.-M.); ignacio.refoyo@upm.es (I.R.)
- \* Correspondence: miguelspanpol@gmail.com

## Qualitat de vida

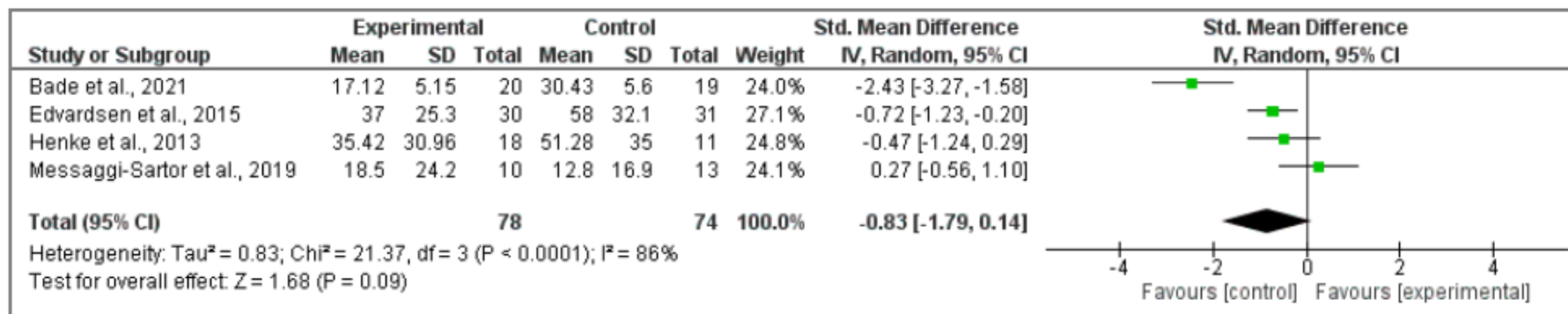


## Percepció de benestar







## EFFECTES D'ACTIVITAT FÍSICA EN DISPNEA

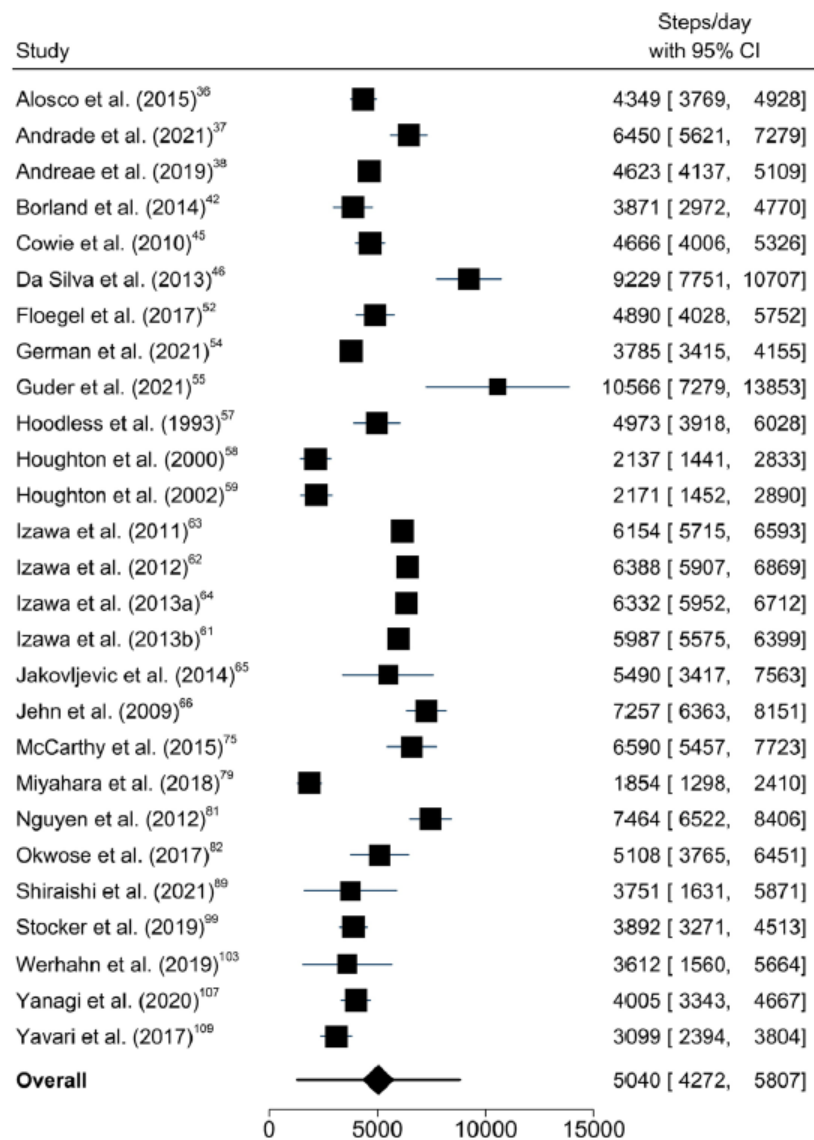


Heart 2023; 109:1357-1362

Systematic review

# Habitual physical activity levels of adults with heart failure: systematic review and meta-analysis

Cara Jordan <sup>1</sup>, Sarah J Charman <sup>2,3</sup>, Alan Mark Batterham,<sup>1</sup> Darren Flynn,<sup>4</sup>  
David Houghton,<sup>2,5</sup> Linda Errington,<sup>6</sup> Guy MacGowan,<sup>3,6</sup> Leah Avery<sup>1</sup>



Random-effects REML model  
 Knapp-Hartung standard errors

Heliyon 9, 2023 e19339

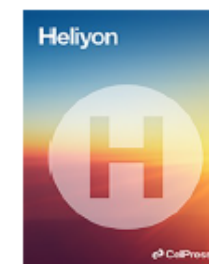
Heliyon 9 (2023) e19339



Contents lists available at ScienceDirect

Heliyon

journal homepage: [www.cell.com/heliyon](http://www.cell.com/heliyon)



Review article

## Meta-analysis of the impact of physical activity on the recovery of physical function in COVID-19 patients

Geng Yang<sup>a</sup>, Zhigan Li<sup>b,\*</sup>, Zhenpeng Li<sup>c</sup>, Linjie Huang<sup>a</sup>, Peiyi Liang<sup>a</sup>, Lining Liu<sup>a</sup>, Dingge Li<sup>a</sup>

<sup>a</sup> Graduate School, Guangzhou Sport University, Guangzhou, 510500, Guangdong, China

<sup>b</sup> School of Sports and Health, Guangzhou Sport University, Guangzhou, 510500, Guangdong, China

<sup>c</sup> Sports Group, Zhongshan Yangxianyi Middle School, Zhongshan, 528403, Guangdong, China

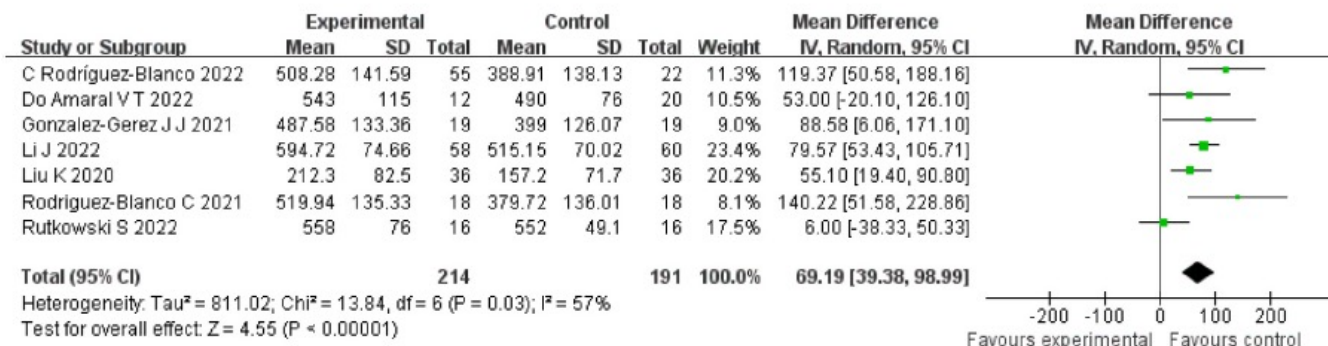


Fig. 3. Forest plot of 6MWT of experimental and control groups.

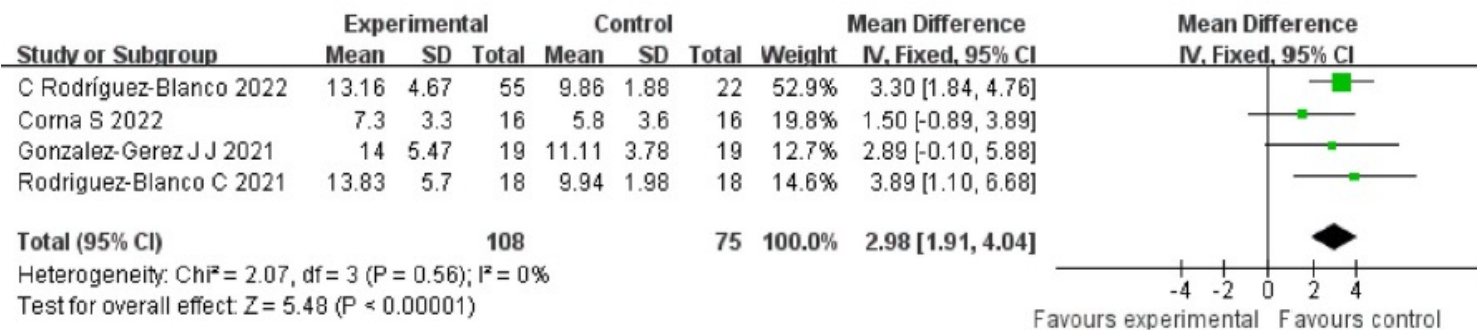


Fig. 4. Forest plot of 30STST of experimental and control groups.

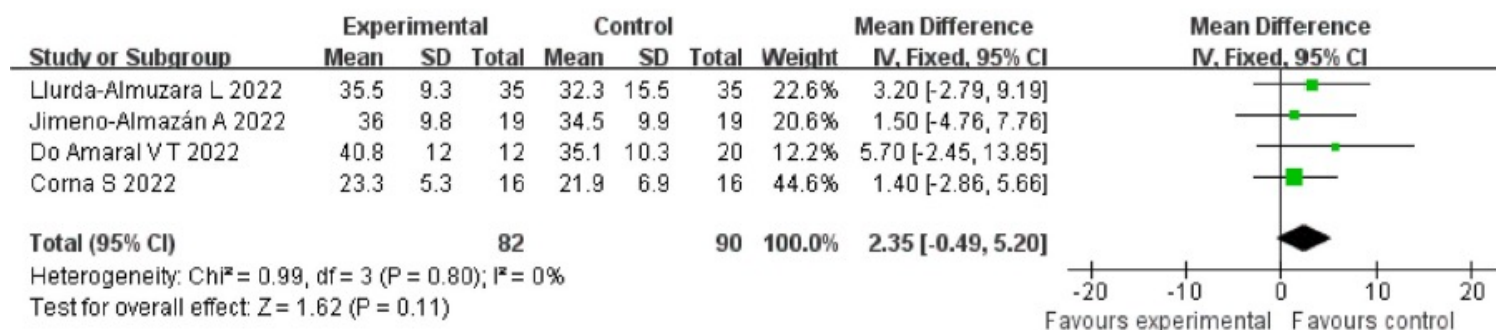


Fig. 5. Forest plot of GS of experimental and control groups.

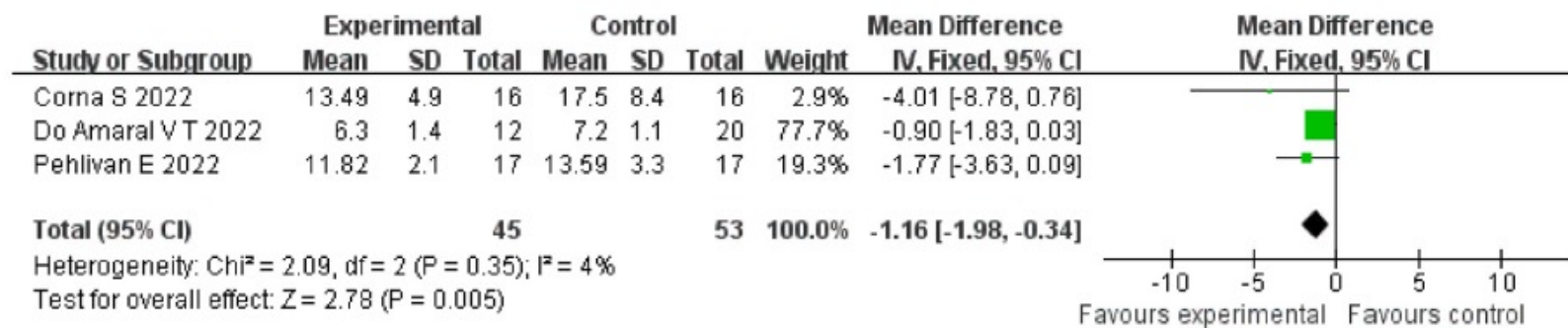




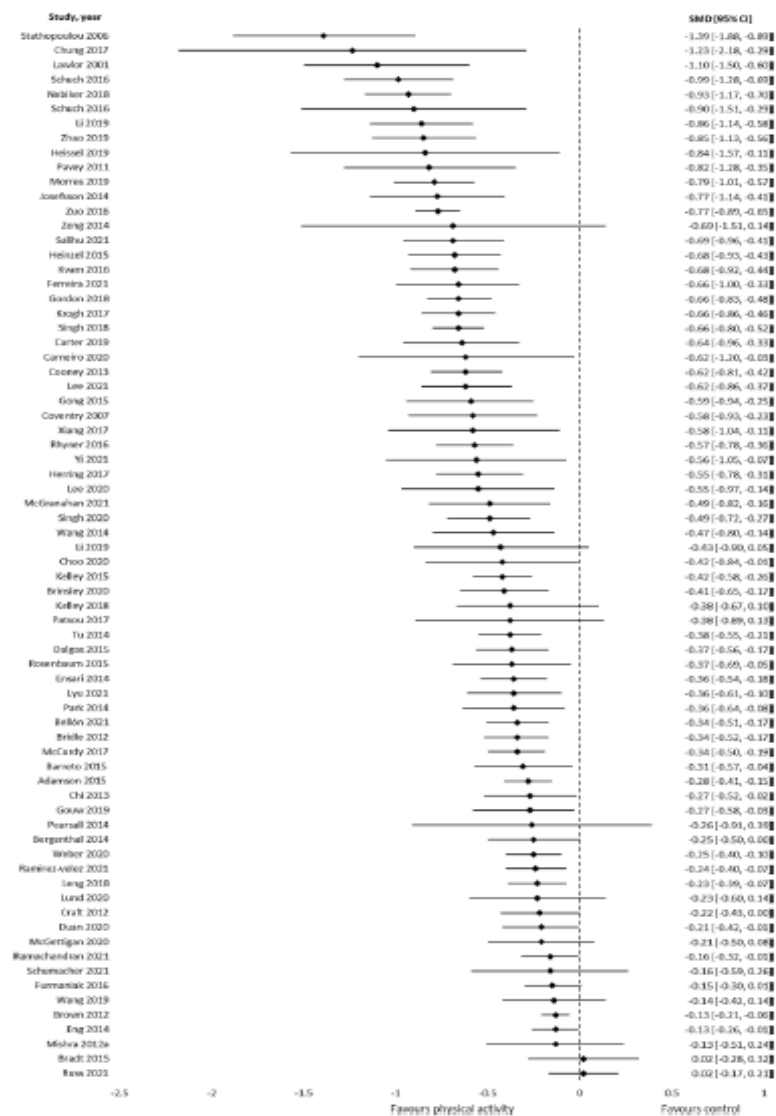
Fig. 6. Forest plot of TUG of experimental and control groups.

Br J Sports Med 2023; 57:1203-1209

Systematic review

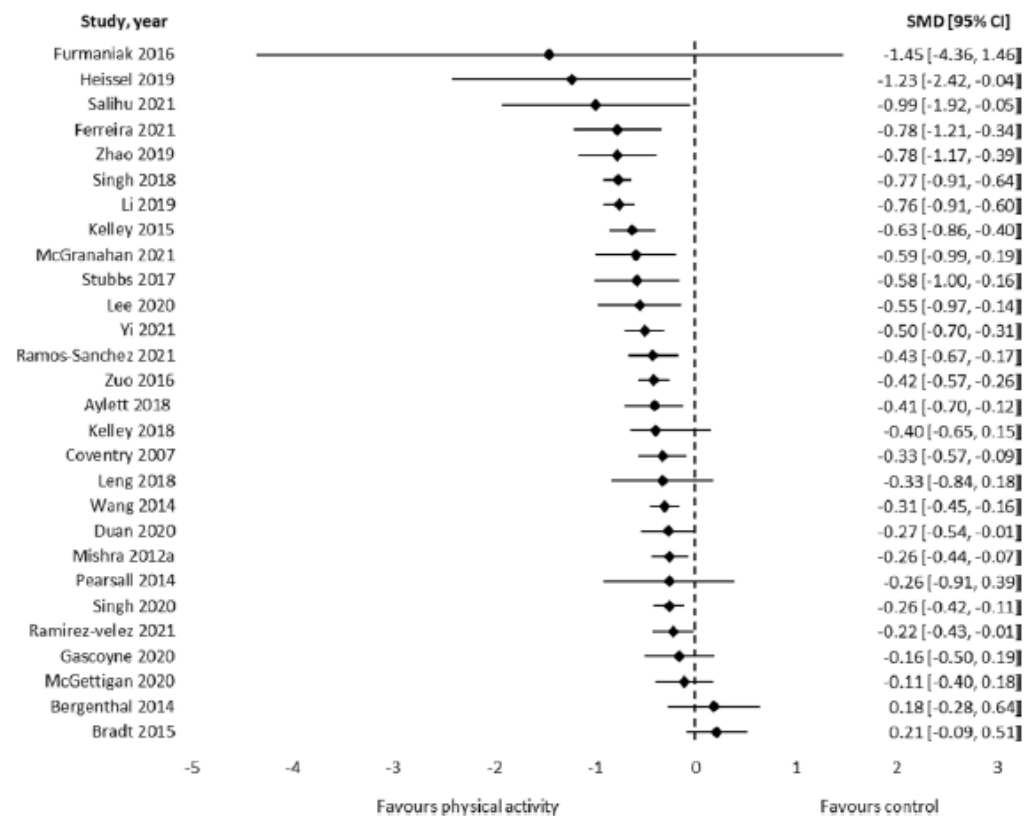
# Effectiveness of physical activity interventions for improving depression, anxiety and distress: an overview of systematic reviews

Ben Singh ,<sup>1</sup> Timothy Olds,<sup>1</sup> Rachel Curtis,<sup>1</sup> Dorothea Dumuid ,<sup>1</sup> Rosa Virgara,<sup>1</sup> Amanda Watson,<sup>1</sup> Kimberley Szeto,<sup>1</sup> Edward O'Connor,<sup>1</sup> Ty Ferguson,<sup>1</sup> Emily Eglitis,<sup>1</sup> Aaron Miatke,<sup>1</sup> Catherine EM Simpson,<sup>1</sup> Carol Maher<sup>2</sup>



**Figure 1** Results of meta-analyses that assessed symptoms of depression using standardized mean differences (negative values represent a reduction in symptoms).





**Figure 2** Results of meta-analyses that assessed symptoms of anxiety using standardised mean differences (negative values represent a reduction in symptoms).

SCANDINAVIAN JOURNAL OF PRIMARY HEALTH CARE  
2024, VOL. 42, NO. 1, 61–71



## Scandinavian Journal of Primary Health Care

ISSN: (Print) (Online) Journal homepage: <https://www.tandfonline.com/loi/ipri20>

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### Physical activity on prescription in Swedish primary care: a survey on use, views, and implementation determinants amongst general practitioners

Elina Brorsson Lundqvist, Marcus Praetorius Björk & Susanne Bernhardsson

Table 3. Associations between likelihood of frequent use of Physical activity on prescription and gender, practice location, and years of practice.

	B	SE	<i>p</i>	OR	95% CI for OR
Gender <sup>1</sup>	0.298	0.416	0.474	1.347	0.596 to 3.047
Practice location <sup>2</sup>	1.849	0.433	< <b>0.001</b>	6.352	2.720 to 14.834
Years of practice <sup>3</sup>	0.935	0.433	<b>0.031</b>	2.547	1.090 to 5.955



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