

# Group- vs home-based exercise training in healthy older men and women: a community-based clinical trial.

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# Group- vs Home-Based Exercise Training in Healthy Older Men and Women A Community-Based Clinical Trial

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## Abstract

**Objective.** —To determine the effectiveness of group- vs home-based exercise training of higher and lower intensities among healthy, sedentary older adults.

**Design.** —Year-long randomized, controlled trial comparing (1) higher-intensity group-based exercise training; (2) higher-intensity home-based exercise training; (3) lower-intensity home-based exercise training; or (4) assessment-only control.

**Setting.** —General community located in northern California.

**Participants.** –One hundred sixty women and 197 men 50 to 65 years of age who were sedentary and free of cardiovascular disease. One out of nine persons contacted through a community random-digit-dial telephone survey and citywide promotion were randomized.

**Interventions.** –For higher-intensity exercise training, three 40-minute endurance training sessions per week were prescribed at 73% to 88% of peak treadmill heart rate. For lower-intensity exercise training, five 30-minute endurance training sessions per week were prescribed at 60% to 73% of peak treadmill heart rate.

**Main Outcome Measures.** –Treadmill exercise test performance, exercise participation rates, and heart disease risk factors.

**Results.** –Compared with controls, subjects in all three exercise training conditions showed significant improvements in treadmill exercise test performance at 6 and 12 months ( $P<.03$ ). Lower-intensity exercise training achieved changes comparable with those of higher-intensity exercise training. Twelve-month exercise adherence rates were better for the two home-based exercise training conditions relative to the group-based exercise training condition ( $P<.0005$ ). There were no significant training-induced changes in lipid levels, weight, or blood pressure.

**Conclusions.** –We conclude that (1) this community-based exercise training program improved fitness but not heart disease risk factors among sedentary, healthy older adults; (2) home-based exercise was as effective as group exercise in producing these changes; (3) lower-intensity exercise training was as effective as higher-intensity exercise training in the home setting; and (4) the exercise programs were relatively safe.(*JAMA*. 1991;266:1535-1542)

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