

• A PATIENT GUIDE FROM YOUR CARDIOLOGIST

Exercise for a *Longer, Healthier Life*

*A simple, evidence-based guide to moving more — protecting your heart,
sharpening your metabolism and adding healthy, active years to your life*



01 Why movement is medicine

If the benefits of regular exercise could be put in a pill, it would be the most powerful medicine I could prescribe — and the one with the fewest side effects. The good news is that you do not need to be an athlete. Modest, regular activity delivers most of the benefit.

For most adults living beyond their 50s, the greatest threats to a long and independent life are the chronic diseases — heart disease, type 2 diabetes, dementia and many cancers. Regular physical activity is one of the few things proven to lower the risk of **all of them at once**, while also improving mood, sleep and energy today.

The headline numbers

Up to 30%

LOWER RISK OF EARLY DEATH IN ADULTS WHO MEET ACTIVITY GUIDELINES

40%

LOWER ALL-CAUSE MORTALITY WHEN STRENGTH & AEROBIC EXERCISE ARE COMBINED

13–15%

FALL IN MORTALITY RISK FOR EVERY STEP UP IN CARDIORESPIRATORY FITNESS

What regular activity helps protect you from

- **Heart disease & stroke** — lower blood pressure, healthier arteries and a stronger heart muscle.
- **Type 2 diabetes** — muscles use glucose more efficiently, improving blood-sugar control.
- **Several cancers** — including bowel and breast cancer, with lower recurrence after diagnosis.
- **Dementia & low mood** — better blood flow to the brain, sharper memory and reduced anxiety.
- **Frailty & falls** — stronger muscles and bones keep you steady and independent for longer.

THE BIG PICTURE

It is almost never too late to start, and the largest gains come to those who are currently the least active. Going from doing nothing to doing *something* matters far more than going from good to excellent. The aim of this guide is to make that first step — and every step after it — simple.

02 The building blocks of fitness

“Being fit” is really four different things working together. A good routine touches on each one. You do not need to train them separately — a sensible weekly plan (Section 04) covers them all.

1 Cardiovascular fitness (aerobic)

How well your heart, lungs and blood vessels deliver oxygen. Built by walking, cycling, swimming and similar. Improves blood pressure, stamina, metabolism and mood — the foundation of a long life.

2 Muscle strength

How much force your muscles can produce. Built by lifting, pushing and pulling against resistance. Protects against the natural loss of muscle with age, strengthens bones and steadies blood sugar.

3 Balance & flexibility

The ability of your joints and muscles to move freely and your body to stay steady. Reduces stiffness, protects against falls and keeps everyday movements comfortable. Built by stretching and balance work.

4 Healthy body composition

A healthy balance of muscle to fat — more important than weight alone. More muscle and less visceral fat lowers the risk of heart disease and diabetes. Built through activity *plus* good nutrition.

What exercise does inside your body

Lifts your mood

Releases endorphins; eases anxiety and low mood.

Steadies blood sugar

Muscles absorb glucose, improving insulin sensitivity.

Improves sleep

Helps reset your day–night rhythm for deeper rest.

Boosts energy

Builds more mitochondria — your cells’ power plants.

Supports immunity

Keeps circulation and the lymphatic system moving.

Slows ageing

Linked to healthier cells and longer protective telomeres.

03 How much, and how hard?

Every major health body — the World Health Organization, the European Society of Cardiology and the UK Chief Medical Officers — now agrees on a simple weekly target. You can build up to it gradually.

150–300

MINUTES OF MODERATE AEROBIC
ACTIVITY PER WEEK

2+ days

OF MUSCLE-STRENGTHENING
ACTIVITY, ALL MAJOR MUSCLE
GROUPS

6,000–8,000

DAILY STEPS — WHERE THE
LONGEVITY BENEFIT LEVELS OFF
FOR OLDER ADULTS

Moderate aerobic activity can also be met with 75–150 minutes of more vigorous exercise per week, or a mix of the two. Minutes can be broken into short blocks across the day — it all counts.

How hard should it feel? The talk test

You don't need a heart-rate monitor. The simplest, well-validated guide is how hard you feel you are working on a scale of 1–10, and how easily you can talk.

1–2
VERY LIGHT

Barely any effort. You could keep going for hours — like a gentle stroll.

3–4
MODERATE

Comfortable but noticeable. You can hold a conversation. **This is your aerobic target.**

5–7
VIGOROUS

Working hard. A little short of breath — you can speak a sentence but not sing.

7–8
VERY HARD

Difficult to sustain. Only a few words at a time — the zone for short interval bursts.

9–10
MAX EFFORT

All-out and unsustainable. Not needed for health — and best avoided with a heart condition.

A WORD ON “ZONE 2”

Most of your aerobic minutes should be easy enough to hold a conversation — often called *Zone 2*. It is the comfortable, sustainable pace that builds heart and metabolic health with very little risk. For strength work, aim for an effort of about 6–8 out of 10 on the last few repetitions — feeling you had 2–3 reps left in reserve.

04 Build up at your own pace

Start wherever you are and progress only when the current level feels comfortable. Each stage still hits the essentials: daily walking, two to three strength sessions and regular aerobic activity. There is no rush — consistency beats intensity every time.

Stage 1 · Starting out

FOCUS	WHAT TO DO
Every day	Build gradually towards a daily walk — even 10 minutes counts to begin with.
2 × week	Short, gentle strength session (bodyweight or light weights), combined with a brisk walk.
Goal	Move most days and get comfortable with the routine before adding more.

Stage 2 · Building (the weekly target)

DAY	ACTIVITY	TIME
Monday	Strength session + brisk walk	40–50 min
Tuesday	Moderate aerobic — walk, easy cycle or swim	30 min
Wednesday	Rest or gentle mobility / stretching	—
Thursday	Strength session + brisk walk	40–50 min
Friday	Moderate aerobic	30 min
Saturday	Longer enjoyable activity — walk, hike, cycle or swim	45–60 min
Sunday	Rest day	—

Stage 3 · Thriving

Once Stage 2 feels routine, add a third strength session and, if you wish, one or two short bursts of more vigorous activity (intervals) on your aerobic days — provided your cardiology team is happy for you to do so.

PROGRESS ONE SMALL STEP AT A TIME

Add a few minutes or a repetition or two before adding weight or speed. Change only one thing at a time and ease back for a week every couple of months. Mild muscle soreness for a day or two is normal and expected.

05 Getting started safely

Exercise is safe and beneficial for the great majority of heart patients — in fact it is part of the treatment. A few sensible checks make sure it stays that way.

⚠ BEFORE YOU BEGIN

If you have had a recent cardiac event or heart surgery, unstable or new symptoms, uncontrolled blood pressure, or significant valve disease, please confirm with your cardiologist that this programme is right for you before starting.

Stop and seek advice if you experience chest pain or pressure, unusual breathlessness, dizziness or fainting, or irregular or racing palpitations.

Simple habits that make it stick

- Always warm up for 5 minutes and cool down gently afterwards.
- Schedule sessions like appointments — same days each week.
- Make it enjoyable; choose activities you actually like.
- Stay hydrated and avoid intense exercise when unwell.
- Track your week (below) — progress is motivating.
- Pair activity with good nutrition and proper sleep.

Simple weekly tracker

Print this page or fill it in on screen. Note your sessions, total aerobic minutes and how it felt (1–10).

WEEK	STRENGTH SESSIONS	AEROBIC MINUTES	HOW IT FELT
1			
2			
3			
4			
5			
6			

06 References & further reading

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- 7 Arnett DK, Blumenthal RS, Albert MA, et al. 2019 ACC/AHA Guideline on the Primary Prevention of Cardiovascular Disease. *Circulation*. 2019;140(11):e596–e646.
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⚠ IMPORTANT — PLEASE READ

This guide is general health information for educational use within the cardiology clinic and should be tailored to each patient. It does not replace individual clinical judgement. Decisions about your medication, exercise and treatment should be made together with your GP or cardiologist — especially after a recent cardiac event or surgery. If you experience chest pain, breathlessness, palpitations or sudden weakness, seek medical help immediately.



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