



Recommendations for Patients Starting a Pedometer Walking Program

- Establish a weekly baseline step count. Measure and record how many steps you take in a day and in a week, **before** you start your program.
- Start by putting the pedometer on in the morning, reset to 0, and forget about the pedometer for the entire day. When retiring for the evening, take the pedometer off and record the number of steps you have accumulated over the course of the day. Repeat this for 5–7 days to see your daily average.
- Begin a walking program by adding 2000–3000 step counts (1–1.5 walking miles) to your daily average from your baseline. For those individuals who have been previously sedentary they can begin by adding a total of 1000–1500 steps per day (0.5–0.75 mile).
 - For example, if you averaged 4500 step counts per day at baseline, then for the next several weeks add 2000 step counts so you are averaging 6500–7500 step counts per day.
 - Note that for most people, ~2000 step counts equals one mile (\pm 200 step counts). Make every effort to stay above the “sedentary lifestyle index” which is < 5,000 steps (Tudor-Locke, 2004).
- After 2–4 weeks, add another 2000–3000 step counts to your daily average so you are averaging 9,000–10,000 or more steps per day on most days of the week. Remember that this total step count includes all daily step count activities including your walking program.
- This total step count should be adjusted to each patient’s fitness level, health status, and age. For example, a patient whose baseline step count is 3,800 per day and after 6 weeks is averaging 7,500 steps per day, is making a significant, positive improvement in both walking endurance and insulin sensitization.
- When using pedometers for monitoring physical activity for **weight loss purposes**, the overall goal is to eventually record 70,000–90,000 step counts per week or at least 10,000 steps a day.

NOTE: Several recent studies have reported \geq 12,000 steps per day are necessary for significant weight loss. This step count includes all daily activity, not just your walking program. Know also that the majority of studies indicate that significant weight loss requires \geq 2,000 kilocalories (kcal) per week of physical activity, which is equivalent to 18–20 miles of walking (actual kcal expenditure is dependent on body weight).

NOTE: Also understand that even if you are not capable of attaining these relatively high weekly step counts, you can accrue significant cardiometabolic health benefits including an improved glucose tolerance and lipoprotein profile and blood pressure reduction. Several large diabetes prevention studies demonstrated 40–60% reductions in diabetes risk with less than 10,000 walking steps per day average and only modest weight loss (*Diabetes Prevention Program, DaGing Diabetes Prevention Program, Finnish and Indian diabetes prevention studies*).

- To meet current U.S. public health guidelines, individuals are encouraged to walk a minimum of 3000 steps in 30 minutes (~3 mph for most adults) on 5 days each week. This speed will require adjusting for the patient's height (i.e., shorter patients 2.5–3 mph, taller patients 3–3.5 mph).
- Three (3) periods of 1000 steps in 10 minutes each day can also be used to meet the recommended U.S. public health goal.
- Patients should record their daily and/or weekly step counts in a log to be submitted to their health care provider. Many pedometer models have long-term memory and capacity to store step-totals over a 12–24 week period, or longer periods.
- Creative pedometer walking programs such as *pedometer trekking* are most helpful in instilling longer term use of pedometers. (See *pedometer trekking* section)

NOTE: It is important to note that for patients who are obese or who have the metabolic syndrome, prediabetes, or diabetes, the *relative increase or change* in daily or weekly step count above their previous sedentary step count baseline is the most important exercise outcome parameter that should be charted for improving cardiometabolic health.