

SmartMoves - a pilot study

Submission date 10/06/2014	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
Registration date 07/08/2014	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
Last Edited 05/01/2016	Condition category Other	<input type="checkbox"/> Individual participant data

Plain English summary of protocol

Background and study aims

Physical activity (exercise) isn't just good for a child's health. Research has shown that physical education (PE) and physical activity can also improve academic performance. However, to date, there have been few studies looking into the effects of physical activity on the cognitive functioning (for example thinking, remembering, judging, and problem-solving) in children. Furthermore, the effects of prolonged sitting on the cognitive functioning of children has never been properly investigated, or indeed how physical activity (or prolonged sitting) affects children's cardiometabolic health (i.e. their risk of developing heart disease or diabetes). Here, we are going to look into how feasible it is to set up a study to measure the effect of physical activity on the cognitive functioning of children when at school.

Who can participate?

Dutch speaking, healthy children between the ages of 10 and 13.

What does the study involve?

All participating children eat the same breakfast in the morning. They are then randomly allocated into one of three groups. Those in group A sit for a prolonged period in their classroom at school (all morning). Those in group B also sit in their classroom, but with an active break (where the children do a physical activity) halfway through the morning. Those in group C start the day with a physical activity, then sit down in their classroom with an active break halfway through the morning. Blood samples are taken from all the children just before they eat their breakfast and then at the end of the morning. They all take part in cognitive functioning tests at various times throughout the morning.

What are the possible benefits and risks of participating?

There is very little risk to taking part in this study. Blood samples are collected using a fingerprick method, a commonly used technique with few risks.

Where is the study run from?

Department of Public and Occupational Health, VU University Medical Centre, Amsterdam (Netherlands)

When is the study starting and how long is it expected to run for?

June 2013 to June 2014

Who is funding the study?

EMGO Institute for Health and Care Research (Netherlands)

Who is the main contact?

Dr Amika Singh

a.singh@vumc.nl

Contact information

Type(s)

Scientific

Contact name

Dr Amika Singh

Contact details

van der Boechorststraat 7

Amsterdam

Netherlands

1081 BT

+31 (0)20 4448382

a.singh@vumc.nl

Additional identifiers

Protocol serial number

NL43909.029.13

Study information

Scientific Title

Physical activity, sitting and cognition a pilot study

Study objectives

We hypothesized that both one as well as two bouts of moderate-intensity physical activity would enhance childrens selective attention, with larger effects for repeated bouts, when compared to sitting the whole morning.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Medical Ethics Committee of the VU University Medical Center, Amsterdam (The Netherlands),
17/12/2013

Study design

Randomised pilot study

Primary study design

Interventional

Study type(s)

Quality of life

Health condition(s) or problem(s) studied

Physical activity, cognitive functioning

Interventions

Group A - prolonged sitting

Group B - sitting with an active break halfway the morning

Group C - day start with physical activity, then sitting with an active break halfway the morning

Intervention Type

Behavioural

Primary outcome(s)

Selective attention according to the TEA-CH test, measured at baseline, after 20, 110, 130 and 220 minutes

Key secondary outcome(s)

Fasting blood levels of C-peptide, triglycerides and cholesterol, measured at baseline, after 20, 110, 130 and 220 minutes

Completion date

01/06/2014

Eligibility

Key inclusion criteria

1. Aged between 10-13 years
2. Apparently healthy
3. Dutch speaking

Children were requested to refrain from any moderate-to-vigorous physical activity (MVPA) for at least 3 days prior to the experiment.

Participant type(s)

Healthy volunteer

Healthy volunteers allowed

No

Age group

Child

Lower age limit

10 years

Upper age limit

13 years

Sex

All

Key exclusion criteria

1. Known physical activity contraindications
2. Major illness/injury (acute or chronic)
3. Physical problems that may limit the ability to perform the experiment

Participants will be screened by a health check questionnaire.

Date of first enrolment

01/06/2013

Date of final enrolment

01/06/2014

Locations

Countries of recruitment

Netherlands

Study participating centre

van der Boechorststraat 7
Amsterdam
Netherlands
1081 BT

Sponsor information

Organisation

EMGO Institute for Health and Care Research (Netherlands)

ROR

<https://ror.org/0258apj61>

Funder(s)

Funder type

University/education

Funder Name

Results and Publications

Individual participant data (IPD) sharing plan

IPD sharing plan summary

Not provided at time of registration

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article	results	01/10/2016		Yes	No
Participant information sheet	Participant information sheet	11/11/2025	11/11/2025	No	Yes