Danish University Colleges

Mens mobile health

Effect of health mobile apps to men with short-term or no studies during a 6 months intervention study
Levisen, Vinie Diana Hvidbak; Castaño, Francisco Mansilla; Jensen, Camilla Skovbjerg

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Men`s mobile health:
Effect of health mobile apps to men with short-term or no studies during a 6 months intervention study

Authors: Vinie Diana Hvidbak Levisen, RN, MLP. Knowledge Center for Health Promotion, University College South Denmark.
Francisco Mansilla Castaño, PhD, Associated professor Medical laboratory technologist degree program, University College South Denmark.
Camilla Skovbjerg Jensen, assistant professor, cand.scient.san.publ., University College South Denmark.

CONCLUSION
- We present evidence that Health mobile apps affect the physical activity trends of men with short-term or no studies. This effect is increased when the individuals undergo preliminary and final physical condition measurements.
- The apps tend to modify the men’s way of thinking more than their doing.
- Health-promotion sms sent to these men every two weeks seem to increase the frequency on which they both think and do something about their health.
- Reporting the number of steps every fourth week makes these men think more about their own health.
- These men had a significant increase in muscle mass and oxygen uptake after the intervention process. In addition, there is a tendency to increase their median number of steps per day, rest heart rate, body fat and fitness rating.
- In contrast, their BP increased slightly.

BACKGROUND
Mobil app.
- Men`s health depends of their education
- Men die 4.2 years before women
- Men turn too late professional assistance
- Meet the man where he is – at work
- Men don’t think about their health
- Health promotion without professional contact
- Health tends to modify the men’s way of thinking

METHOD
Clinical control trial flow-chart

RESULTS

Fig 1: Effect of intervention on VAS doing and VAS thinking
The study showed:
- Men’s thoughts and action increases
- Better match between thinking and doing

Table 1: Measurement of cardiovascular parameters at baseline and effect points
<table>
<thead>
<tr>
<th>Variable</th>
<th>Baseline</th>
<th>Effect</th>
<th>p-value</th>
<th>Baseline</th>
<th>Effect</th>
<th>p-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>BP systolik (mm Hg)</td>
<td>142,94</td>
<td>139,00</td>
<td>0.13</td>
<td>134,00</td>
<td>136,00</td>
<td>0.09</td>
</tr>
<tr>
<td>BP distolik (mm Hg)</td>
<td>90,00</td>
<td>88,00</td>
<td>0.56*</td>
<td>83,76</td>
<td>86,36</td>
<td>0.03*</td>
</tr>
<tr>
<td>RHR (bpm)</td>
<td>64,00</td>
<td>67,00</td>
<td>0.99</td>
<td>66,85</td>
<td>65,12</td>
<td>0.26</td>
</tr>
</tbody>
</table>

Table 2: Measurement of physical parameters at baseline and effect points
<table>
<thead>
<tr>
<th>Variable</th>
<th>Baseline</th>
<th>Effect</th>
<th>p-value</th>
<th>Baseline</th>
<th>Effect</th>
<th>p-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fitness rating</td>
<td>33,00</td>
<td>33,66</td>
<td>0.39</td>
<td>36,03</td>
<td>37,18</td>
<td>0.068</td>
</tr>
<tr>
<td>Oxigen uptake (Vo2) (l/min)</td>
<td>2.85</td>
<td>2.93</td>
<td>0.21</td>
<td>3.09</td>
<td>3.22</td>
<td>0.03*</td>
</tr>
<tr>
<td>Body fat (%)</td>
<td>14,90</td>
<td>19,10</td>
<td>2.10**</td>
<td>17,46</td>
<td>16,43</td>
<td>0.06</td>
</tr>
<tr>
<td>Muscle mass (Kg)</td>
<td>67,80</td>
<td>67,30</td>
<td>0.46</td>
<td>67,90</td>
<td>68,81</td>
<td>0.02*</td>
</tr>
</tbody>
</table>