FIT YOUTH ... FIT ADULT
In a systematic review, Jonatan Ruiz1 (see page 909) provides convincing evidence that being physically fit as a child and an adolescent provides long-term cardiovascular benefits later in life, suggesting not only that exercise is good, but that exercise in young people is particularly good. Individuals who were more fit had better blood lipid profiles and blood pressure, and less adiposity later in life. Conversely, those who had higher BMI had an increased risk of death. The direct results of obesity and physical inactivity result in an estimated $147 billion dollars (US) in health care cost in the United States alone; the last thing people need is another excuse not to exercise. In this issue, Dr Neil King and colleagues from Professor John Blundell’s lab in Leeds report that exercise provides important health benefits independently of weight loss (see page 924). The issue also highlights that exercise is beneficial for people of all shapes, sizes and ages!

EXERCISE IS EVEN GOOD FOR THOSE WHO ARE ALREADY OVERWEIGHT AND OBES
It would be ideal if all children were fit and active and this led to a world of healthy, ideal-weight adults. However, a quick glance around the mall reveals that this is not the case. Recommending exercise to those who are already overweight or obese can sometimes be daunting. This issue introduces a simple system for exercise prescription in this group (see page 951). The Activity Point System (APS) is based on the Dr Barb Ainsworth’s Compendium of Physical Activity.2 The APS gives an accurate way to quantify and track physical activity in heavier individuals and draws attention to the fact that many everyday actions should be included in activity calculations. Tracking physical activity can motivate and energise an individual to sustain an exercise programme, and, as has been repeatedly pointed out, exercise is good for just about everyone.

CANCUN 2010 — AMSSM ANNUAL MEETING!
On that note of continuing education, AMSSM is committed to fostering research, furthering education and providing a collegial atmosphere for its members. I invite you to consider our next annual meeting from 17 to 21 April 2010 in the resort town of Cancun, Mexico. We showcase cutting-edge, clinically relevant content and encourage research submissions. Our meetings have increasingly benefited from international participants and, to encourage this further, AMSSM extends its member conference registration rate to all non-North Americans.

REFERENCES