Figure. Behavioral Counseling to Promote a Healthful Diet and Physical Activity for Cardiovascular Disease Prevention in Adults Without Cardiovascular Risk Factors: Clinical Summary

Population	Adults without obesity who do not have known CVD risk factors
Recommendation	Individualize the decision to offer or refer adults to behavioral counseling to promote a healthful diet and physical activity. Grade: C

Risk Assessment	Adults who adhere to national guidelines for a healthful diet and physical activity have lower rates of cardiovascular morbidity and mortality than those who do not. All persons, regardless of their CVD risk status, can gain health benefits from healthy eating behaviors and appropriate physical activity.
Interventions	Dietary counseling interventions typically focused on general heart-healthy eating patterns (increased consumption of fruits, vegetables, fiber, and whole grains; decreased consumption of salt, fat, and red and processed meats). Physical activity interventions emphasized gradually increasing aerobic activities to recommended levels, with many studies emphasizing walking.
	change, ranging from 1-time mailings to monthly mailings over 3 years. Medium- and high-intensity interventions commonly included face-to-face individual or group counseling or both, with telephone, email, and text message follow-up.
Balance of Benefits and Harms	The USPSTF concludes with moderate certainty that behavioral counseling interventions to promote a healthful diet and physical activity have a small net benefit in adults without obesity who do not have specific common risk factors for CVD (hypertension, dyslipidemia, abnormal blood glucose levels, and diabetes).
Other Relevant USPSTF Recommendations	The USPSTF has recommendations on several aspects of CVD prevention in adults with and without common risk factors, including behavioral counseling interventions to promote a healthful diet and physical activity for CVD prevention in adults with cardiovascular risk factors, screening for and management of obesity in adults, screening for abnormal blood glucose levels and type 2 diabetes mellitus, screening for high blood pressure, use of statin medications in persons at risk for CVD, screening and counseling for tobacco smoking cessation, and aspirin use for CVD primary prevention. These recommendations are available on the USPSTF website (https://www.uspreventiveservicestaskforce.org).

For a summary of the evidence systematically reviewed in making this recommendation, the full recommendation statement, and supporting documents, please go to https://www.uspreventiveservicestaskforce.org.

Abbreviation: CVD=cardiovascular disease.