**Table 2a. Strength of evidence of studies among obese adults\***

| **Number of Studies, Participants** | | **Domains Pertaining to Strength of Evidence** | | | | | | **Strength of evidence** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | **Risk of Bias** | **Consistency** | | **Directness** | | **Precision** |  |
| **Physical Activity (KQ3)** | | | | | | | | |
| BMI change | |  | |  |  |  | | Insufficient  No studies identified |
| **Weight change** | | | | | | | | |
| 1 trial (120 analyzed)1 | Moderate  Outcome assessor not blinded | | | N/A | Indirect  Goal of study was to increase physical activity during commute to work | Imprecise  Confidence intervals for both groups contain 1 | | Low  Cycling group had 0.1 unit greater decrease in BMI than walking group |
| **Waist circumference change** | | | | | | | | |
| 1 trial (120 analyzed)1 | Moderate  Outcome assessor not blinded | | | N/A | Indirect  Goal of study was to increase physical activity during commute to work | Imprecise  Confidence intervals for both groups contain 1 | | Low  Cycling group had 0.5 cm greater decrease in waist circumference than walking group |
| **Adherence** |  | | |  |  |  | |  |
| 1 trial (120 analyzed)1 | Moderate  Outcome assessor not blinded | | | N/A | Indirect  Goal of study was to increase physical activity during commute to work | Precise  P<0.001 | | Insufficient  Although the bicycling intervention group was more likely to ride a bicycle at least 2 kilometers per day than the walking group, the adherence was only 39% in the bicycling group and 9% in the walking group. Overall, adherence was poor. |

**\*No other key questions, clinical or health related quality of life results were reported.**

**Reference**

1. Hemmingsson E, Uddén J, Neovius M, et al. Increased physical activity in abdominally obese women through support for changed commuting habits: a randomized clinical trial. Int J Obesity (2005) 2009; 33(6):645-52.