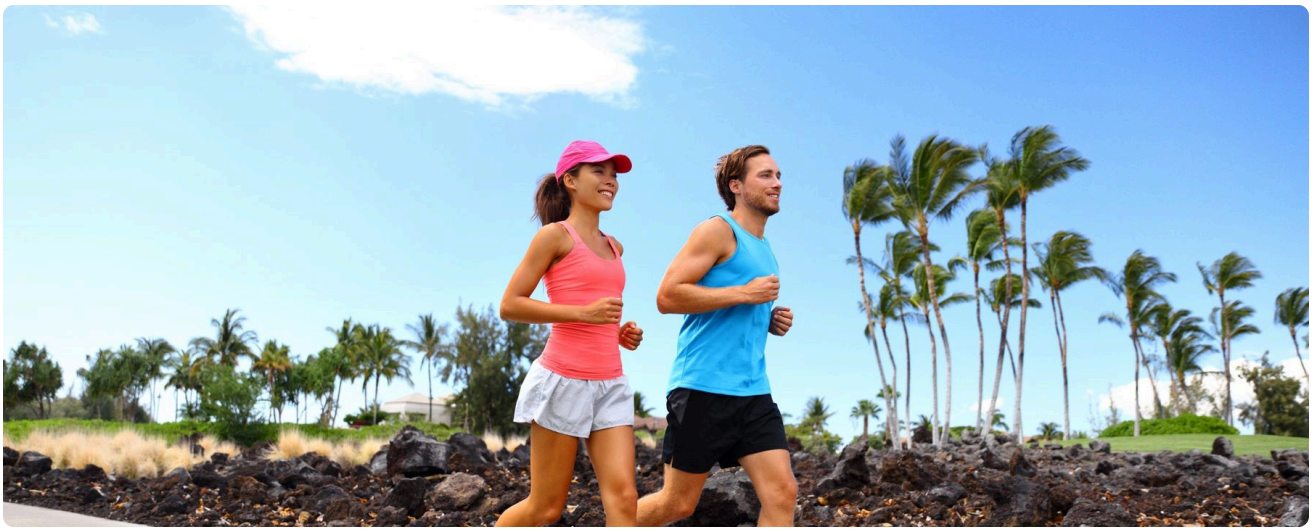
How much exercise is enough?

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About 150 minutes a week of moderate activity, or 75 of vigorous, is linked to most of the lower risk of death seen in large studies.

Why it matters: Many people assume exercise only counts if it happens in long gym sessions, so they never start. Large studies point the other way: going from no activity to some carries the biggest payoff.

The big picture: The first minutes count the most: going from none to some brings the biggest drop in risk.

Your weekly target

- **Aerobic activity:** 150 minutes of moderate or 75 minutes of vigorous activity a week, or a mix. One vigorous minute counts as about two moderate ones [1, 2].
- **Moderate** means you breathe harder but can still talk, as in brisk walking. **Vigorous** means you can say only a few words before pausing for breath, as in running or fast cycling.
- **Muscle-strengthening work:** in long-term studies, the lowest risks of death, heart disease and cancer showed up at about 30 to 60 minutes a week [3]. That figure concerns health. The strength training article covers how much lifting builds the most muscle or strength.

Go deeper

By the numbers: A pooled analysis followed 661,137 adults for a median of 14.2 years [1].

- Some activity, but less than the 150-minute minimum, was linked to a 20% lower risk of death than none.
- One to two times the minimum: 31% lower.

- Three to five times the minimum: 39% lower. The curve flattened after that.
- A 2026 study of 594,285 U.S. adults followed for about 9½ years found the same pattern. Even 5 minutes a week was linked to a 13% lower risk of death than none, and 150 minutes to 19% lower. The biggest drop came from moving from none to a little [8].
- Even at 10 times the minimum, the researchers found no added risk.

Between the lines: Most of the drop came early, from the first step up. These are relative risks. A 31% lower risk does not mean 31 fewer deaths per 100 people.

Moderate vs. vigorous:

- A Harvard study of 116,221 adults tracked activity with questionnaires repeated up to 15 times over 30 years [2].
- Meeting the vigorous guideline (75 to 149 minutes a week) was linked to a 19% lower risk of death than no vigorous activity. Meeting the moderate guideline (150 to 299 minutes) was linked to a 19% to 25% lower risk of death from all causes, heart disease and other causes.
- The association came close to its lowest point at about 150 to 300 vigorous or 300 to 600 moderate minutes a week, with no clear further drop and no sign of harm beyond that.

Strength training:

- A 2022 meta-analysis of 16 studies that followed people over time linked muscle-strengthening activity to a 10% to 17% lower risk of early death, heart disease, cancer, diabetes and lung cancer, regardless of aerobic exercise [3].
- People who did both strength and aerobic activity had a 40% lower risk of death than people who did neither.
- Above about 60 minutes a week, the curve bent back slightly. Few people in these studies lifted that much, so whether more lifting truly lowers the benefit is unclear.

Other ways the minutes add up:

- **Short bursts.** Among 25,241 UK adults who did not exercise, three bursts of hard effort a day, each lasting one to two minutes, were linked to a 38% to 40% lower risk of death overall and from cancer, and a 48% to 49% lower risk from heart disease [4]. Think fast stair climbing or carrying heavy bags.
- **Weekend sessions.** In 350,978 U.S. adults, people who packed their weekly exercise into one or two sessions had a similar risk of death to those who spread the same minutes over three or more [5]. The weekend group was small and reported its own activity, so that estimate is less precise.
- **Sitting.** In more than 1 million adults, sitting over eight hours a day was linked to a higher risk of death. About 60 to 75 minutes a day of moderate activity cancelled that extra risk. For heavy TV watching, activity reduced the risk but did not remove it [6].
- **Steps.** In a 2022 meta-analysis of 15 studies that followed adults over time, risk of death fell as daily steps rose, then leveled off: at 8,000 to 10,000 steps for adults under 60 and 6,000 to 8,000 for adults 60 and older [7].

Reality check: Nearly all of this comes from observational studies, which show links rather than proof of cause. People who are already ill tend to move less, which can make exercise look more protective than it is. Researchers adjust for this, but no adjustment is perfect. Trials lasting decades with death as the outcome are not practical, so the case rests on many large studies pointing the same way.

How sure are we: Strong that more activity is linked to lower risk of death, with the biggest gain from the first minutes. Moderate on cause and effect, because the evidence is mostly observational.

Build your own target

1. **Start where you are.** Any activity was linked to lower risk than none.
2. **Work up to the weekly floor.** Aim for 150 moderate or 75 vigorous minutes, or a mix.
3. **Add strength work.** Two sessions a week that together total 30 to 60 minutes, covering your legs, hips, back, chest, abdomen, shoulders and arms, fits the range studied.
4. **Do more if you enjoy it.** The link with lower risk kept improving up to roughly 300 to 600 moderate minutes, then flattened.
5. **Fit it to your life.** Short bursts, weekend sessions and daily steps all count. If you sit most of the day, more daily movement offsets part of that risk.

Sources

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