Protected by copyright, including for uses related to text and data mining, Al training, and similar

Health and productivity at work: which active workstation for which benefits: a systematic review

Francois Dupont, ¹ Pierre-Majorique Léger, ² Mickael Begon, ^{1,3} François Lecot, ¹ Sylvain Sénécal, ² Elise Labonté-Lemoyne, ² Marie-Eve Mathieu^{1,3}

¹École de kinésiologie et des sciences de l'activité physique, Université de Montréal, Montreal, Quebec, Canada ²Tech3Lab, HEC Montréal, Montreal, Quebec, Canada ³Research Center, Sainte-Justine University Hospital Center, Montreal, Quebec, Canada

Correspondence to

Professor Marie-Eve Mathieu, École de kinésiologie et des sciences de l'activité physique, Universite de Montreal, Montreal, QC H3T1J4, Canada; me.mathieu@umontreal.ca

Received 30 July 2018 Revised 19 November 2018 Accepted 26 November 2018 Published Online First 28 January 2019 **ABSTRACT** In order to reduce sedentary behaviour at work, research has examined the effectiveness of active workstations. However, despite their relevance in replacing conventional desks, the comparison between types of active workstations and their respective benefits remains unclear. The purpose of this review article is thus to compare the benefits between standing, treadmill and cycling workstations. Search criteria explored Embase, PubMed and Web of Science databases. The review included studies concerning adults using at least two types of active workstations, evaluating biomechanical, physiological work performance and/or psychobiological outcomes. Twelve original articles were included. Treadmill workstations induced greater movement/activity and greater muscular activity in the upper limbs compared with standing workstations. Treadmill and cycling workstations resulted in elevated heart rate, decreased ambulatory blood pressure and increased energy expenditure during the workday compared with standing workstations. Treadmill workstations reduced fine motor skill function (ie, typing, mouse pointing and combined keyboard/mouse tasks) compared with cycling and standing workstations. Cycling workstations resulted in improved simple processing task speeds compared with standing and treadmill workstations. Treadmill and cycling workstations increased arousal and decreased boredom compared with standing workstations. The benefits associated with each type of active workstation (eg, standing, treadmill, cycling) may not be equivalent. Overall, cycling and treadmill workstations appear to provide greater short-term physiological changes than standing workstations that could potentially lead to better health. Cycling, treadmill and standing workstations appear to show short-term productivity benefits; however, treadmill workstations can reduce the performance of computer tasks.



► http://dx.doi.org/10.1136/ oemed-2018-105671



© Author(s) (or their employer(s)) 2019. No commercial re-use. See rights and permissions. Published by BMJ.

To cite: Dupont F, Léger P-M, Begon M, et al. Occup Environ Med 2019;**76**:281–294.

INTRODUCTION

In 2013, costs associated with sedentary behaviour were estimated at \$65.5 billion worldwide. Moreover, a shift from manual labour jobs to highly sedentary service industry and office-based professions has been observed over the last decades. Recently, researchers have begun to study interventions designed to break up and reduce sedentary time throughout the workday by replacing the sitting workstation, which promotes sedentary behaviour, with active workstations.

Key messages

What is already known about this subject?

- ► Physical demands in the work environment have declined in Western countries over the last decades resulting in new types of negative health concerns.
- ➤ Active workstations such as standing, walking and cycling may reduce sitting time and could enhance health and productivity at work.

What are the new findings?

- ► The benefits associated with each type of active workstation (eg, standing, treadmill, cycling) may not be equivalent.
- Cycling and treadmill workstations appear to provide greater short-term physiological changes than standing workstations that could potentially lead to better health.
- Cycling, treadmill and standing workstations appear to show short-term productivity benefits, while treadmill workstations reduce the performance of computer-related work.

How might this impact on policy or clinical practice in the foreseeable future?

- ► These results are relevant in order to optimise future workplace interventions.
- Workers and corporations should be able to look at the benefits and limits of each type of workstation and determine which one is most appropriate for workers' specific needs and tasks.

Standing, treadmill or cycling workstations change the ergonomic paradigm of the 09:00–17:00 workday, allowing a change in posture (ie, sitting vs standing) and improved muscle activation (ie, none vs muscular contractions) during work activities (figure 1). Many studies suggest that active workstations could reduce sedentary time at work, 4-6 maintain work productivity, increase energy expenditure, 7 regulate high blood pressure, 8 relieve back pain, 9 enhance positive affect 10 and increase cognitive abilities 11 compared with conventional seated workstations.

Considering the growing body of evidence that suggests that standing, treadmill and cycling work-stations may improve health and productivity at work compared with seated workstations, it would be relevant to have a better understanding of what benefits are specific to each of these active work-stations. The purpose of this review article is thus



lata mining, Al training, and similar technologies

Protected by copyright, including for uses related



Standing Workstation

Cycling Workstation

Treadmill Workstation

Figure 1 Type of active workstations included in the systematic review.

to compare the benefits between standing, treadmill and cycling workstations.

METHODS

Eligibility and exclusion criteria

To be included in this review, studies were required to be published in peer-reviewed academic journals, written in English and respect Participants, Interventions, Comparators, Outcomes, Study criteria (table 1). Participant criteria included adult population, healthy or with cardiometabolic disorders and free of musculoskeletal complaints. Studies were required to include at least two types of active workstations. Both laboratory and free-living environment intervention protocols were included. Studies also needed to evaluate biomechanical, physiological, psychobiological and/or cognitive outcomes. Studies

 Table 1
 Participants, interventions, comparators, outcomes, study

 (PICOS) designs

(PICOS) designs	
PICOS	Details
Participants	At least 18 years old. Adults presenting cardiometabolic disorders and healthy adults.
Interventions	Intervention with conventional seats, seated active workstations (eg, cycling desk and elliptical pedal desk) and upright active workstations (eg, standing desk, treadmill desk). Interventions were performed in a laboratory or free-living environment.
Comparative factors	Different types of workstations (ie, standing, treadmill, recumbent pedal, elliptical pedal and cycling).
Outcomes	Biomechanical: measurement of muscle activation, posture and joint angles, as well as kinematics. Physiological: heart rate, oxygen consumption, energy expenditure, blood pressure, perceived exertion and pressure pain thresholds. Work performance: quantitative and qualitative measurements of typing, mouse pointing, multitasking, perception of task, attention to task, speech assessment and memory tasks. Psychobiological: quantitative and qualitative measurement of arousal, stress, boredom, task satisfaction, and quantitative measurement of salivary cortisol and encephalography.
Study designs	Pilot study, randomised cross-over full-factorial study, randomised repeated measures design, within participant experimental design, experimental mixed-model study.

were excluded if active workstations were not standing, treadmill or cycling based, and included 'interest of use' or 'social acceptance' outcomes.

Literature search and study selection

A computer-assisted systematic search of Central, Embase, PubMed and Web of Science databases was conducted on 13 March 2018 and included all studies prior to that date. The following keywords were used: 'desks', 'workstation', *work station, *works station and the following Boolean phrase: active OR bik* OR cycling OR 'height adjustable' OR stepping OR 'stand up' OR standing OR treadmill* OR walk* OR elliptical OR bicycl* OR pedaling OR 'stability ball' OR 'stability balls' OR 'exercise ball' OR 'exercise balls' OR 'swiss balls' OR 'sit-to-stand' OR 'sit stand'.

A first study selection was completed independently by two reviewers (FD, FL) based on the 'inclusion of at least two active workstations' by screening titles and abstracts. A final selection was made according to eligibility criteria by one reviewer (FD) using full texts.

Data extraction and results presentation

Data extraction process was completed by FD. Relevant outcomes were collected, analysed and summarised. Only significant differences (ie, mean values, z-scores, percentile, and so on) were reported in the review. Effect size (Cohen's *d*) has been calculated for all significant differences.

Quality assessment

Two authors (FD, FL) used the modified Downs and Black checklist¹² based on 27 'yes'-or-'no' items across five sections of quality assessments to determine risk of bias: (1) study quality; (2) external validity; (3) study bias; (4) confounding and selection bias; and (5) power of the study.

RESULTS

Out of the 1352 studies identified through computer search, 274 examined the effects of active workstations (figure 2). Twelve studies met eligibility criteria (table 2) and their quality was assessed (table 3). Studies were diverse in terms of outcomes, measures and study design. Selected studies used different taxonomies to define 'active workstation', and we regrouped them as follows: (1) standing workstations, (2) walking workstations

Protected by copyright, including for uses related to text and data mining, AI training, and

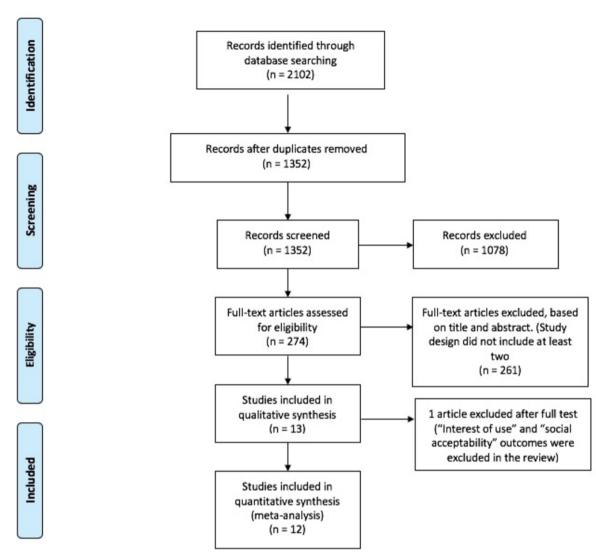


Figure 2 Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) flow diagram.

(speed expressed in km/hour), and (3) pedalling/elliptical workstations (power expressed in watts (W) and in maximum aerobic power (MAP)). Conventional seated workstations were present in selected studies, but are beyond the scope of the present review.

Musculoskeletal activity

One study¹³ examined the biomechanics of three active workstations using electromyography of the trapezius and erector spinae, trunk and head 3D kinematics and physical activity quantified by accelerometers on the legs, trunk and arms. Twelve participants were asked to complete general office tasks (ie, typing, reading, correction, telephone use, mouse dexterity and cognitive tasks) while using active workstations. An increase in right trapezius activity was observed from standing to treadmill_{2.5 km/hour} workstations: 3.8% vs 8.1% of maximum voluntary contraction (median values), respectively. Also, all variables concerning the intensity of movement (median and 95th percentile) increased in treadmill_{0.6 km/hour} and treadmill_{2.5 km/hour} conditions compared with standing, except for the physical activity intensity of the head at the 95th percentile for treadmill_{0.6 km/hour} which remained similar to the standing condition.

Physiological activity

Six studies⁸ ^{13–17} reported physiological outcomes. Four ^{13–16} included adults with no health issues (n=109) and two studies⁸ ¹⁷ included adults with overweight or class 1 obesity who also had prehypertension or impaired fasting glucose (n=22). From those four studies, mean heart rate (HR), blood pressure, energy expenditure, perceived exertion and pressure pain thresholds were assessed. All studies except one ¹⁷ showed no difference between workstations.

Mean HR

Increased HR was observed in all four studies⁸ ^{13–15} when using treadmill or cycling compared with standing workstations. Specifically, Botter *et al*¹³ reported an increase of 12 beats per minute (bpm) using a treadmill_{2.5 km/hour} (91 bpm) compared with standing (79 bpm), which was corroborated by Cox *et al*.¹⁴ Moreover, Straker *et al*¹⁵ reported an increase of 5 bmp for the treadmill_{3.2 km/hour} and an increase of 7 bmp for cycling_{30 w} compared with standing workstations. All other conditions with lower power or speed (eg, treadmill_{1.6 km/hour}; cycling_{5 w}) did not result in an increase in bmp. Zeigler *et al*⁸ monitored HR during a 12-hour period (08:00–20:00) and were specifically interested in two periods (ie, work hours (08:00–16:00) and postwork

continued

Table 2 cc	continued							
Authors/study	Design	Intervention duration	Sample (n)	Population characteristics	Experimental conditions	Measures	Results	Effect size (Cohen's d)
Commissaris et al ³⁵	Randomised repeated measures	1 workday	Males=7 Females=8	29.0 years old BMI=22.3 kg/m²	strting Standing Standing (2.5km/hour) Eliptical (17.W) Cycling (85.W) Cycling (85.W)	Typing task (number of characters propedring) Reading and correcting task (number of characters task (number of characters tead/min) Reaction time test: Reaction time test: And a fast sumfing task Andidirectional cognitive task Andidirectional cognitive Task Multidirectional capative Test counting task Filiken flanher Habact test Telephone task	No statistical analyses have been done between active workstations.	47
Coxet all ⁴⁴	Randomised repeated measures	60min	Males=9 Females=72	37 years old	Stating Standing Treadmil (1.6km/ho.u/)	Aerobic capacity Heart rate Heart rate Blood pressure Perceived effort Dysprova perception Speech assessment	Treadmill, stumon, (7.4±0.33) increased VO, demands compared with standing (4.0±0.18), (4.0±0.18). Treadmill, sumon, increased heart rate compared with standing. SBP values meana-SE: standing (124±3) and treadmill, sumon, (129±3). Treadmill, sumon, lowed blood pressure compared with standing. Rating perceived effort values, standing (7.1/10) and treadmill, sumon, (13.1/10). Dispone apreceiped is cores aloned effort compared with standing. Dispone apreceiped sorse showed that treadmill perception of breathing effort and sigher compared with standing.	VO, treadmill strummur to standing=0.80 thear fate treadmill.strummur standing=missing data among the standing=0.29 SP treadmill strummur to standing=0.29 standing=0.53 Dyspnoes treadmill_strummur byspnoes treadmill_strummur standing=missing data
Gilson et al ¹⁸	Pilot study	1.5-hour work periods/day/ experimental condition	n=20 EEG subgroup=13 Salivary cortisol subgroup=16	23–63 years old	Sitting Sitting/standing Sitting/treadmill (self- determined speed range between 1.6 and 4 km/hour)	EGG Salivary cortisol	All results were non-significant.	NA
Kruse et al ¹⁷	Pilot study	(1) 4 hours of uninterrupted sitting (2) 4 hours of sitting interrupted with four 10 min bouts of standing interrupted with four (3) 4 hours of sitting interrupted with four 10 min bouts of light-intensity desk cycling	Males=10 Females=3	35–50 years old BMI=29.7 kg/m² Sedentary, overweight and obese adults	Standing Cycling	Flow-mediated dilation Heart rate Blood pressure Calf circumferences before and after conditions	All results were non-significant.	NA
Ohlinger et al ²⁰	Within-participants experimental	75 min for all assessments	n=50	43.2 years old	Sitting Standing Treadmill (1.6 km/hour)	Short-term auditory verbal memory Selective attention Simple motor skill	Simple motor skills decreased from Treadmill sumbay compared with standing. All other results were non-significant.	Simple motor skill treadmill _{1,8 immoor} vs standing=0.15
Mullane <i>et al</i> ¹⁹	Randomised crossover	8 hourse/gerineerial condition with bouts of 10, 15, 20 and 30 min on active workstation	Males=2 Females=7	30.0 years old BMI=28.7 kg/m² Prehypertensive (n=7)	String Standing Treadmill (1.6km/hour) Cycling (20 W at 25–20 RPM)	Detection test (speed expressed in 2-stone and mean log 10 transformed reaction times for correct responses) One back test Set-shifting test	Detection test processing speed z-score standing (~0.43±0.97), troadmill, tembor ~10.44±0.97), troadmill, tembor ~10.44±0.97), trocasing speed the z-score of standing and treadmill, tembor cycling, and treadmill, tembor speed that scholing, worldstations showed lower performance speed than cycling, worldstation test reaction time values: standing (2.72±0.13 log10 ms), treadmill, standon (2.72±0.13 log10 ms) and cycling, w. (2.72±0.13 log10 ms). Reaction time was faster for cycling, w. (2.65±0.14 log10 ms).	Detection test processing speed cyclings, vs treadmill, u,mos, e. 6.6.3 Detection test processing speed cyclings, vs standing=0.6.1 Reaction time cyclings, w standing=0.44
Sliter and Yuan ¹⁰	Pilot study	35 min	n=180	21.2 years old BMI=22.9 kgm² Undergraduate students	Sitting Standing Treadmill Cyding	Stress Arousal Boredom Task satsifaction Performance (runmber of correct tasks; number of errors in task)	Treadmill (2.85±0.30) increased arousal compared with standing (2.55±0.42). Cyding increased arousal compared with standing. Treadmill decreased broadom compared with standing. Cyding decreased broadom compared with standing. Treadmill decreased stress compared with standing. Treadmill decreased stress compared with standing. Treadmill provided more task satisfaction than standing. The performance between cyding and standing. All other results were non-significant.	Arousal treadmill vs standing=0,77 Mousal opding vs standing=0,55 Boredom treadmill vs standing=-1,82 Stress treadmill vs standing=-0,27 Task satisfaction treadmill vs standing=0,58 Performance-level cycling vs standing=-0,68

Table 2	continued							
Authors/study	Design	Intervention duration	Sample (n)	Population characteristics	Population characteristics Experimental conditions	Measures	Results	Effect size (Cohen's d)
Straker et al ¹⁵	Exp ermental mixed model	±1 workday	Males=14 Females=16	22-64 years old BMI (female)=25.1 frgm² BMI (male)=24.7 kg/m²	Stating Standing Standing Standing Treadmil (1, 6 km/hour) Cyding (3 W) Cyding (3 W)	Typing speed (words/min) Typing accuracy (% typing errors) Typing perceived speed Typing perceived scuracy Mouse perceived speed mis) Mouse perceived speed Mouse perceived speed Mouse perceived speed mouse speed (words/s) and error Combined keyboard and mouse task perceived speed mouse task perceived speed mouse task perceived speed mouse task perceived speed Hand rid and Exertion	(99.74), cycling, (85.78), cycling, (85.10), treadmill, submilling perceived speed task values; standing (84.09), treadmill, submilling perceived speed scores; standing (28.6), treadmill, submilling specieved speed scores; standing (2.86), treadmill, submilling specieved speed scores; standing (2.86), treadmill, submilling specieved speed scores; standing (2.86), treadmill, submilling specieved scready scores; standing (2.86), treadmill, submilling specieved accuracy score; standing (2.89), treadmill, submilling scores spowed a decrease in accuracy perception for treadmilling, submilling scores spowed a decrease in accuracy perception for treadmilling, submilling, submi	Typing speed treadmillinnew_us_standing=-0.00 Hyping speed (readmillinnew_us_standing=-0.10 Hyping speed cyclingws_standing=-0.02 Hyping speecewed speed cyclingws_standing=-0.02 Hyping speecewed sccuracy treadmillinnew_ss_standing=-0.03 Hyping speecewed accuracy treadmillinnew_ss_standing=-0.03 Hyping speecewed accuracy cyclingws_standing=-0.03 Hyping speecewed accuracy treadmillinnew_ss_standing=-0.03 Hyping speecewed accuracy treadmillinnew_ss_standing=-0.03 Hyping speecewed accuracy treadmillinnew_ss_standing=-0.03 Hyping speecewed accuracy cyclingws_standing=-0.03 Hyping speecewed accuracy treadmillinnew_ss_standing=-0.03 Hyping speecewed accuracy treadmillinnew_ss_standing=-0.03 Hyping speecewed accuracy treadmillinnew_ss_standing=-0.03 Hyping speecewed speed cyclingws_standing=-0.03 Hyping speecewed speed treadmillinnew_ss_standing=-0.03 Hypingspeecewed accuracy treadmillinnew_ss_standing=-0.03 Hypingspeecewed speed treadmillinnew_ss_standing=-0.03 Hypingspeecewed speed cyclingws_standing=-0.03 Hypingspeecewed speed cyclingws_standing=-0.03 Hypingspeecewed speed treadmillinnew_ss_standing=-0.03 Hypingspeecewed speed treadmillinnew_ss_standing=-0.03 Hypingspeecewed accuracy treadmillinnew_ss_standing=-0.
								continued

Table 2 Contributed Sept. Sept.																																												
Design Intervention duration Sample (s) Peoplation distracteristic Experimental conditions (Measures)		Effect size (Cohen's d)	Combined keyboard-mouse speed treadmill _{3.2 km} ,	hour vs cycling.w=-0.28 Combined keyboard-mouse speed treadmill.	hour vs cycling _{5,w} =-0.13	Combined keyboard-mouse speed treadmill _{3.2 km/} vs cycling=-1.53	Combined keyboard-mouse speed treadmill is km/	hour vs cycling _{10W} =-1.36 Combined keyboard-mouse perceived speed	treadmill _{32,kmhour} vs standing=1.10	Combined keyboard-mouse perceived speed treadmill vs standing=0.60	Combined keyboard-mouse perceived speed	cycling, w standing=0.47 Combined keyboard-moise ner eived speed	cycling _{sow} vs standing=0.55	Combined keyboard-mouse perceived speed treadmill vs cycling=0.51	Combined keyboard-mouse perceived speed	treadmill 16 bankor Vs Cycling w=0.15 Combined keyboard-mouse perceived speed	treadmill _{32 kinfour} vs cycling _{30w} =0.58	Combined keyboard-mouse perceived speed treadmill vs cycling =0.15	Combined keyboard-mouse perceived accuracy	treadmill _{32 km/hour} vs standing=3.32	Combined keyboard-mouse perceived accuracy treadmill vs standing=2.43	Combined keyboard-mouse perceived accuracy	cycling, w s standing=1.31	cycling _{nw} vs standing=1.57	Combined keyboard-mouse perceived accuracy	u eduliii _{32 kinhou} r vs u eduliiii _{16 kinhou} r =0.04 Combined keyboard-mouse perceived accuracy	treadmill _{32 km/hour} vs cycling _{4,w} =1.75	treadmill, vs cycling,=1.45	Heart rate treadmill _{3.2 km} hour vs standing=0.22	Heart rate cycling _{30 w m} /hour vs standing=0.31 Heart rate treadmill vs treadmill	hour = 0.22	Heart rate cycling _{30Wm/hour} vs treadmill _{1.6km/} =0.31	Heart rate treadmill _{3.2 km} hour vs cycling _{5.w} =0.37	Heart rate treadmill skmhour vs cycling sw=0.15 Hoart rate cycling	Perceived exertion treadmill 2 Jumps vS	standing=0.56	Perceived exertion treadmili _{1.6 km/hour} vs standing=0.33	Perceived exertion cycling _{sw} vs standing=0.29	Perceived exertion cycling _{sow} vs standing=0.66 Perceived exertion treadmill.	1.8 sar kminour = 0.65	Perceived exertion cycling _{30w} vs treadmill _{1.6km} ,	Perceived exertion treadmill 3.2 hankour vs	cyclings w=0.23 Perceived exertion cycling _{sow} vs cycling _{sw} =0.34	continued
Design Intervention duration Sample (s) Peoplation distracteristic Experimental conditions (Measures)		iesults																																										
Design Intervention duration Sample (s) Population characteristics. Experimental conditions		~																																										
Design Intervention duration Sample (a)																																												
Continued Design Intervention duration Sample (n)		erimental conditio																																										
Continued Design Intervention duration Sample (n)		haracteristics Exp																																										
Design Intervention duration		Population d																																										
Design Intervention duration		nple (n)																																										
Design Design		San																																										
Design Design		ention duration																																										
		Interve																																										
	ntinued	Design																																										
		thors/study																																										

	Effect size (Cohen's d)	data	Heart rate (08.00–20.00) treadmill (aminow ys standing—0.3 standing—0.3 standing—0.3 standing—0.3 standing—0.3 standing—0.3 standing—0.1 standing—0.1 standing—0.0 treadmill summow vs standing—0.00 (0.00-20.00) cycling, wy standing—0.1 stp (08.00–20.00) cycling, wy streadmill summom—0.1 stp (0.00) treadmill summom, wy standing—0.1 stp (0.00) treadmill summom, wy standing—0.1 stp (0.00) treadmill summom, cycling, wy standing—0.1 stp (0.00) treadmill summom, cycling, wy standing—0.1 stp (0.00) treadmill summom, cycling, wy standing—0.1 stp (0.00) cycling, wy standing—0.1 stp (0.00) cycling, wy standing—0.2 stp (0.00) cycling, wy standing—0.01 stp (0.00) cycling, wy standing—0.0	
		Typing gross speed values: Standing (47), cycling ₂₀₀₀₀₀ (46.5), cycling ₂₀₀₀₀₀₀ (45.5). Missing data Typing gross speed values: Standing (47), cycling ₂₀₀₀₀₀₀ (46.5), cycling ₂₀₀₀₀₀₀ (43.6). Typing net speed values: standing (46.3), cycling ₂₀₀₀₀₀₀ (43.8). Typing net speed values: standing (46.3), cycling ₂₀₀₀₀₀₀₀ (43.8). Typing error values: standing (13.8), cycling ₂₀₀₀₀₀₀₀₀₀₀₀₀₀₀₀₀₀₀₀₀₀₀₀₀₀₀₀₀₀₀₀₀₀₀₀₀	12-hour period (08:00-20:00) mean heart rate values: standing (74±12), treadmilli _g Heart rate (08:0) transcorped with standing. Heart rate (08:00-20:00) mean heart rate values: standing (74±12), treadmill _{g, standing} (13±14), ording, with standing. 12-hour mean SB Values: standing (12±12), treadmill _{g, standing} (13±16), cyling, standing—10.3 (10:00-10.3) mean At treadmill _{g, standing} (12±12), cyling, with standing. 12-hour mean DB Values: standing (72±12), treadmill _{g, standing} (12±12), cyling, mean DB values: standing (72±12), treadmill _{g, standing} (12±16), cyling, mean DB values: standing (13±16), treadmill _{g, standing} (12±16), cyling, mean order order treatming (12±16), treadmill _{g, standing} (12±16), cyling, mean values: standing (73±12), treadmill _{g, standing} (12±16), cyling, mean values: standing (73±12), treadmill _{g, standing} (12±16), cyling, mean values: standing (73±16), treadmill _{g, standing} (12±16), cyling, mean values: standing (73±16), treadmill _{g, standing} (12±16), cyling, mean values: standing (73±16), treadmill _{g, standing} (12±16), cyling, mean values: standing (73±16), treadmill _{g, standing} (12±16), cyling, mean values: standing (13±16), treadmill _{g, standing} (12±16), cyling, mean values: standing (13±16), treadmill _{g, standing} (12±16), cyling, mean values: standing (13±16), treadmill _{g, standing} (13±17), cyling, mean values: standing (13±16), treadmill _{g, standing} (13±17), cyling, mean values: standing (13±16), treadmill _{g, standing} (13±17), cyling, mean values: standing (13±16), treadmill _{g, standing} (13±17), cyling, mean values: standing (13±16), treadmill _{g, standing} (13±17), cyling, mean values: standing (13±16), treadmill _{g, standing} (13±17), cyling, mean values: standing (13±16), treadmill _{g, standing} (13±17), cyling, mean values standing (13±18), treadmill _{g, standing} (13±17), cyling, mean values: standing (13±18), treadmill _{g, standing} (13±17), cyling, mean values standing (13±18), treadmill _{g, standing} (13±17), cyling, mean values standing (13±18), treadmi	Makes prevented are manns, unless otherwise specified. Sing parkational force % MAVC, maximum voluntary contractions; BMI, body mass index, DBP, distribic blood pressure; EEG, electroencephalography; EGG, electroencephalography; EMG, electroencephalography; MAR 9% of maximum aerobic power; MET, metabolic equivalent; NA, not applicable, RPM, revolutions sper minute; SBP, systolic blood pressure; W. wants.
	Measures Results	Pressure pain threshold Typin Thermal pain threshold Typin Thermal pain threshold Typin Gross speed (includes standers; words/min) standers, words/min) standers successful task from the task from th	Heart rate 12-4 Blood pressure rates 17-4 (13-4) (1	netabolic equivalent; NA, not applicable; RPA
	Experimental conditions	Standing (20%MAP) Cycling (50%MAP)	Stiring S. Standing Treadmill (1.5km/hour) Cycling (20 W at 25–20.RPM)	AAP, % of maximum aerobic power; MET, n
	Population characteristics	26.8 years old Healthy adults	30years old BMI=28.7kg/m² Prehypertensive (n=7)	encephalography; EMG, electromyography; N
	Sample (n)	Males=15 Females=21	Mates=2 Females=7	electroencephalography; EGG, electroe
	Intervention duration	Standing session of 30 min Cyding, session of 75 min Cyding, session of 30 min Cyding, session of 30 min	Monitoring for 12 hours (08:00–20:00). (1) 12 hours (08:00–20:00) (1) 12 hours (08:00–16:00) with bout volved hours (08:00–16:00) with bout of active workstation for a cumulative of 25 hours (3) Postwork hours (16:00–20:00)	body mass index; DBP, diastolic blood pressure; EEG,
continued	Design	Randomised crossover	Randomised cross-over full factorial	Values presented are means, unless otherwise specified. %g. gravitationalforce, %MVC, maximum voluntary contractions; BMI
Table 2 continued	Authors/study	Tron app et a ll ⁶	Zeiger et af	Values presented are mea %g, gravitation alforce; %

Table 3	3 Study quality assessed by the modified Downs and Black checkli	the modified L	owns and Bl	lack checklist								
		Score										
ltem	Criteria	Bantoft et al ²¹	Botter et al ¹³	Commissaris et a l ²⁵ Cox et a l ¹⁴	Gilson et al ¹⁸	Kruse et al ¹⁷	Ohlinger <i>et al</i> ²⁰	Mullane et al ¹⁹	Sliter and Yuan ¹⁰	Straker <i>et al</i> ¹⁵	Tronarp et al ¹⁶	Zeigler et al ⁸
Reporting												
-	Is the hypothesis/aim/objective of the study clearly described?	-	-		_	-	-	-	-	-	-	-
2	Are the main outcomes to be measured clearly 1 described in the introduction? or Methods section?	-	-	-	_	-	-	_	_	_	-	-
m	Are the characteristics of the patients included in the study clearly described?	1 1	-		_	-	-	-	-	-	-	_
4	Are the interventions of interest dearly described?	-	_	1	_	-	-	-	-	_	-	-
75	Are the distributions of principal confounders in each group of subjects to be compared clearly described?	2	0	2 0	_	2	2	2	0	-	-	2
9	Are the main findings of the study clearly described?	-	_	1	-	-	-	-	-	_	-	-
7	Does the study provide estimates of the random variability in the data for the main outcomes?	-	-		_	-	-	-	-	-	-	-
∞	Have all important adverse events that may be a consequence of the intervention been reported?	-	0	1 0	0	-	-	_	0	0	0	0
6	Have the characteristics of patients lost to follow-up been described?	0	0	0 0	_	0	0	-	_	0	-	-
10	Have actual probability values been reported (eg. 0.035 rather than <0.05) for the main outcomes except where the probability value is less than 0.001?	-	-	-	-	-	-	-	-	-	-	-
External validity	alidity											
=	Were the subjects asked to participate in the study representative of the entire population from which they were recruited?	-	F	0 0	0	0	-	0	_	_	-	-
12	Were those subjects who were prepared to participate representative of the entire population from which they were recruited?	-	-	0	0	0	-	0	0	0	-	-
13	Were the staff, places and facilities where the patients were treated representative of the treatment the majority of patients receive?	0	0	1 0	0	0	0	0	0	0	0	0
Internal val	Internal validity—bias											
14	Was an attempt made to blind study subjects to the intervention they have received?	0	0	0 0	0	0	0	0	0	0	0	0
15	Was an attempt made to blind those measuring the main outcomes of the intervention?	0	0	0	0	0	0	0	0	0	0	0
16	If any of the results of the study were based on 'data dredging', was this made clear?	_	-	1	_	1	-	1	-	-	-	-
17	In trials and cohort studies, do the analyses adjust for different lengths of follow-up of patients, or in seas—control studies, is the time period between the intervention and outcome the same for cases and controls?	-	0	-	_	-	-	-	-	-	-	-
18	Were the statistical tests used to assess the main outcomes appropriate?	<u>-</u>	-	1	1	-	-	1	-	1	_	_
19	Was compliance with the intervention/s reliable?	-	-	1	-	-	-	-	-	-	-	-
20	Were the main outcome measures used accurate (valid and reliable)?	_	_		1	-	-	1	_	_	-	_
												continued

Occup Environ Med: first published as 10.1136/oemed-2018-105397 on 28 January 2019. Downloaded from http://oem.bmj.com/ on June 5, 2025 at Department GEZ-LTA

Erasmushogeschool .

Protected by copyright, including for uses related to text and data mining, Al training, and similar technologies.

Table	Table 3 continued	Score											
		acore											
Item	Criteria	Bantoft et al ²¹	Botter et al ¹³	Commissaris et al ²⁵	Cox et al ¹⁴	Gilson <i>et al</i> ¹⁸	Kruse <i>et al¹⁷</i>	Ohlinger <i>et al</i> ²⁰	Mullane et al ¹⁹	Sliter and Yuan ¹⁰	Straker <i>et al</i> ¹⁵	Tronarp <i>et al</i> ¹⁶	Zeigler <i>et al</i> ⁸
Internal va	Internal validity—confounding (selection bias)												
21	Were the patients in different intervention groups (trials and cohort studies) or were the cases and controls (case–control studies) recruited from the same population?	-	-	0	0	0	0	-	0	-	-	-	0
22	Were study subjects in different intervention groups (trials and cohort studies) or were the cases and controls (case–control studies) recruited over the same period of time?	0	0	0	0	0	0	0	0	0	0	0	0
23	Were study subjects randomised to intervention groups?	-	-	-	-	-	0	_	_	0	0	-	-
24	Was the randomised intervention assignment concealed from both patients and healthcare staff until recruitment was complete and irrevocable?	0	0	0	0	0	0	0	0	0	0	0	0
25	Was there adequate adjustment for confounding in the analyses from which the main findings were drawn?	-	0	0	0	0	-	0	-	0	0	_	0
56	Were losses of patients to follow-up taken into account?	0	-	0	0	-	0	0	_	-	0	-	-
Power													
27*	Did the study have sufficient power to detect a clinically important effect where the probability value for a diffreence being due to chance is less than 5%? Sample sizes have been calculated to detect a diffreence of x% and y%.	0	0	0	0	0	0	-	0	_	0	-	0
Total score		19/28	16/28	17/28	14/28	16/28	16/28	20/28	19/28	17/28	15/28	21/28	19/28
*Item has bu	*Item has been modified 'yes'=1; 'no'=0.												

Al training, and

hours (16:00–20:00)). Results from the 12-hour period showed an increase of 4 bpm for both treadmill $_{1.6~\rm km/hour}$ and cycling $_{20~\rm W}$ conditions compared with standing. Results from the working hour-specific period showed an increase of 5 bpm for treadmill $_{1.6~\rm km/hour}$ and 6 bpm for cycling $_{20~\rm W}$ compared with standing. Results from postwork period showed no difference in HR between conditions.

Blood pressure

Two studies⁸ 14 with different populations and active workstations examined mean systolic blood pressure (SBP) and mean diastolic blood pressure (DBP). Cox et al¹⁴ found no difference in SBP and DBP measured during an intervention comparing standing and treadmill workstations. The second study⁸ monitored ambulatory blood pressure on adults with overweight or class 1 obesity meeting prehypertensive or impaired fasting glucose criteria over a 12-hour period (08:00-20:00). During the 12-hour period, a reduction of 2 mm Hg for cycling,0 w and 1 mm Hg for treadmill_{1.6 km/hour} was reported in SBP compared with standing. For the work hour period (08:00-16:00), a decrease in SBP of 2 mm Hg was reported for cycling,0 w compared for both treadmill $_{1.6~km/hour}$ and standing workstations. In the postwork period (16:00–20:00), there was a greater decrease in SBP compared with the two periods mentioned above. SBP for cycling_{20 W} decreased by 8 mm Hg compared with treadmill_{1.6 km/} hour and 9 mm Hg compared with the standing workstation. DBP was similar between standing and treadmill_{1.6 km/hour} conditions for all three periods. However, cycling_{20 W} decreased DBP by 3 mm Hg compared with standing, and 2 mm Hg compared with treadmill_{1.6 km/hour} workstations for the 12-hour period as well as decreased DBP by 3 mm Hg compared with standing during working hours.

Energy expenditure

Energy expenditure and VO $_2$ were measured in three studies. ^{13 14 16} Botter *et al* ¹³ showed an increase in energy expenditure of 1.2 metabolic equivalent (MET) for treadmill $_{2.5~\rm km/hour}$ workstations compared with standing. Cox *et al* ¹⁴ measured a similar increase of 1 MET from standing to treadmill $_{1.61~\rm km/hour}$. Tronarp *et al* ¹⁶ measured energy expenditure in kcal. In this study, energy expenditure increased between all three conditions: an increase of 2.9 kcal/min between cycling $_{2096\rm MAP}$ and standing; an increase of 6.9 kcal/min between cycling $_{5096\rm MAP}$ and standing.

Perceived exertion and pain tolerance

Two studies ¹⁴ ¹⁵ measured perceived exertion, both using the 10-point Borg Scale. In the first study, Cox *et al* ¹⁴ reported an increase in perceived effort and perceived breathlessness (ie, dyspnoea) on the treadmill compared with standing for all tasks, namely warm-up, silent reading, reading aloud and speaking aloud spontaneously. The second study ¹⁵ reported higher perceived exertion for treadmill _{1.6 km/hour} (1.74/10), treadmill _{3.2 km/hour} (2.39/10), cycling _{5 W} (1.66/10) and cycling _{30 W} (2.61/10) compared with standing (0.95/10). Furthermore, higher perceived exertion was reported for greater power and speed on treadmill and cycling workstations (eg, treadmill _{3.2 km/hour} and cycling _{30 W} compared with treadmill _{1.6 km/hour} and cycling _{5 W}). Pressure pain threshold was measured in kilopascals (kPa)

Pressure pain threshold was measured in kilopascals (kPa) using a Somedic algometer on the right quadriceps, right ventral forearm and right trapezius. ¹⁶ Only differences in the pressure pain threshold of the right trapezius between standing (16.8 kPa) and cycling_{2096MAP} (39.3 kPa) were reported.

Work performance

Seven studies¹⁰ ¹⁵ ¹⁶ ^{18–21} reported cognitive outcomes. The authors measured perceived and actual task performances (eg, typing, mouse, psychomotor performances), attention and short-term memory capacity as well as psychobiological (eg, arousal, boredom) outcomes.

Perceived work performance

One study¹⁵ reported perceived task performance. Studies observed perceived speed and accuracy of typing, mouse pointing and combined keyboard/mouse tasks. Perceived work performance was assessed with a questionnaire. Participants rated perceived effect of the use of diverse active workstations on a scale of 1–5 (ie, 1=very enhanced to 5=very diminished). Results from the perceived typing questionnaire showed a decrease in performance for the treadmill_{1.6 km/hour}, treadmill_{3.2 km/hour}, cycling_{5 W} and cycling_{30 W} compared with standing. Perceived accuracy also decreased with the use of both treadmill_{1.6-3.2 km/hour} and cycling_{5-30 W} workstations compared with the standing workstation. In addition, a decline in perceived accuracy was reported for the low-intensity treadmill_{1.6 km/hour} compared with the low-intensity cycling_{5 W} condition.

Questionnaire outcomes for perceived mouse pointing speed showed a decrease for treadmill_{1.6 km/hour}, treadmill_{3.2 km/hour}, cycling_{5 W} and cycling_{30 W} compared with standing. Also, a reduction of perceived speed was observed for both treadmill_{1.6km/hour} and treadmill_{3.2 km/hour} compared with both cycling_{5 W} and cycling_{30 W} conditions. There was a decline for the treadmill_{1.6} km/hour, treadmill_{3.2 km/hour}, cycling_{5 W} and cycling_{30 W} compared with standing in perceived mouse pointing accuracy. There was a reduction in perceived accuracy for both treadmill workstations compared with low-intensity cycling_{5 W}

Questionnaire outcomes for perceived combined keyboard/mouse speed tasks showed a decrease in perceived speed for treadmill_{1.6 km/hour}, treadmill_{3.2 km/hour}, cycling_{5 W} and cycling_{30 W} compared with standing. In addition, a decline in perceived speed for both treadmill workstation conditions compared with both cycling workstation conditions was observed. Perceived accuracy decreased for the treadmill_{1.6 km/hour}, treadmill_{3.2 km/hour}, cycling_{5 W} and cycling_{30 W} compared with standing. Moreover, perceived accuracy declined for treadmill_{3.2 km/hour} compared with the lower intensity treadmill_{1.6 km/hour} and both cycling workstation conditions.

Actual performance tasks

Three studies 15 16 20 examined the effect of active workstations on typing performance. Straker et al¹⁵ examined the effect of active workstations on typing speed performance (words/min) and accuracy (% of typing errors). Typing speed was reduced for the treadmill $_{\rm 3.2\,km/hour}$ (49.73 words/min), treadmill $_{\rm 1.6\,km/hour}$ (50.14 words/min), cycling_{5 W} (53.17 words/min) and cycling_{30 W} (52.58 words/min) compared with standing (54.09 words/min). No differences were reported for the accuracy test. Tronarp $et al^{16}$ found that gross speed (ie, including erased typing errors) was reduced for the cycling_{50%MAP} (45.5 words/min) and cycling_{20%MAP} (46.5 words/min) compared with standing (47.0 words/ min). Net speed (ie, excluding erased typing errors) was also reduced for cycling_{50%MAP} (43.8 words/min) and cycling_{20%MAP} (44.3 words/min) compared with standing (46.3 words/min). Moreover, typing errors (ie, number of errors) increased with both $\operatorname{cycling}_{50\% \operatorname{MAP}}$ (20) and $\operatorname{cycling}_{20\% \operatorname{MAP}}$ (16.3) compared with standing (13.8). No differences were reported between cycling_{50%MAP} and cycling_{20%MAP}. Ohlinger et al²⁰ measured the

number of taps in a 10 s trial. A reduction in taping speed was observed for the treadmill workstation (55.8) compared with the standing workstation (57.0). To resume, all three studies observed decreases in typing speed with treadmill workstations compared with a standing workstation. The two studies ^{15 16} with cycling conditions observed a decrease in typing speed compared with a standing workstation. Only one study ¹⁶ observed a decrease in typing word accuracy with the use of cycling workstations compared with a standing workstation.

Two studies 15 16 examined mouse pointing speed (ie, milliseconds) and accuracy (ie, actual errors). The first study 15 reported a decrease in speed for treadmill $_{1.6~km/hour}$ (1059 ms); treadmill $_{3.2~km/hour}$ (1107 ms); and cycling $_{5~W}$ (1022 ms) compared with standing (959 ms). Similar values were reported for cycling, w and cycling_{30 W} workstations (1022 ms). Both treadmill_{1.6-3.2 km/} workstations resulted in decreased mouse pointing speed compared with both cycling_{5-30 W} workstations. Furthermore, pointing error increased using treadmill_{1.6 km/hour} (0.17), tread- $\text{mill}_{3.2 \text{ km/hour}}$ (0.20) and cycling_{30 W} (0.16) compared with standing (0.10), and for treadmill $_{3.2 \text{ km/hour}}$ (0.20) compared with cycling $_{5 \text{ W}}$ (0.13). To resume this study observed that mouse pointing speed and accuracy decreased with treadmill workstations compared with a standing workstation. In addition, mouse pointing speed decreased with the use of treadmill workstations compared with cycling workstations. The second study¹⁶ reported a decrease in mouse pointing speed for standing (33.6 ms) compared with $cycling_{20\%MAP}$ (32.6 ms). But contrary to the last study, a decrease in mouse pointing speed was reported for a higher cycling 50% MAP intensity (33.9 ms) compared with standing (33.6 ms). Accuracy was assessed by the number of successful tasks. Results showed a reduction of successful tasks during both cycling_{50%MAP} (3.5) and cycling $_{20\%MAP}$ (5.5) compared with standing (7), and a decrease in cycling_{50%MAP} (3.5) compared with cycling_{20%MAP} (5.5).

One study¹⁵ examined combined keyboard and mouse task performance (ie, speed (words/s) and error rate). A decrease in speed was observed for both treadmill_{1.6 km/hour} (9.57 words/s) and treadmill_{3.2 km/hour} (8.26 words/s) compared with standing (11.94 words/s). Furthermore, a decrease in speed was observed for the treadmill_{1.6 km/hour} (9.57 words/s) and treadmill_{3.2 km/hour} (8.26 words/s) conditions compared with the cycling_{5 W} (10.84 words/s) and cycling_{30 W} (11.17 words/s) conditions. No differences in error rate were reported between active workstations.

Processing speed tasks

Processing speed tasks were assessed in one study. ¹⁹ Researchers used a psychomotor test (ie, detection test from Cogstate) to measure speed and reaction time to accomplish a simple task. Standing z-score and treadmill $_{\rm 1.6~km/hour}$ z-score showed a lower speed of performance than cycling $_{\rm 20~W}$ z-score. Cycling $_{\rm 20~W}$ reaction time was faster than standing reaction time.

Attention and short memory

Out of the four studies 18-21 that examined the influence of active workstations on attention and short-term memory capacity, none found differences between active workstations (ie, standing, treadmill and cycling) in selective attention. Moreover, divided attention and short-term auditory verbal memory revealed no differences between standing, treadmill and cycling workstations.

Psychobiological

One study¹⁰ reported psychobiological outcomes. With a 4 rating scale questionnaire, this study evaluated the level of arousal,

boredom, stress and task satisfaction (eg, 1=definitely no to 4=definitely yes). The authors reported that treadmill workstations increased arousal compared with standing as well as cycling compared with standing. Boredom decreased with treadmill and cycling workstations compared with standing. Stress scores showed that treadmill workstations lowered stress compared with standing.

DISCUSSION

The purpose of this review article was to compare the benefits between standing, treadmill and cycling workstations. This article reviewed 12 studies. Our main findings were that: (1) the benefits associated with standing, treadmill and cycling workstations may not be equivalent; (2) cycling and treadmill workstations appear to provide greater short-term physiological changes than standing workstations that could potentially lead to better health; and (3) cycling, treadmill and standing workstations appear to show productivity benefits while treadmill workstations seem to diminish the performance of work-related use of computers.

Cycling workstation

Cycling workstations with resistance (ie, 20–30 W) can increase energy expenditure by twice the amount of MET compared with standing workstations. Likewise, related to energy expenditure, HR could be increased by 10% compared with standing workstations. Also pertinent, one study reported that cycling workstations with the same HR and energy expenditure as treadmill workstations produced a greater decrease in ambulatory blood pressure in adults presenting with obesity and a prehypertension. Moreover, cycling was the only active workstation that decreased DBP. Although cardiometabolic benefits accompany 20–30 W of resistance, a lower intensity (ie, 5 W) does not provide any advantages over standing or treadmill conditions. Also, bouts of 10 min/hour using a cycling workstation are not enough to reverse the negative effects of prolonged sitting time on lower limb endothelial dysfunction.

Cycling workstations increase arousal and reduce boredom significantly better than standing workstations. These outcomes are relevant as research has reported an interaction between level of physical activity at work, well-being at work and work productivity. 22 23 Furthermore, one study has proposed that cycling workstations could be capable of increasing short-term memory and attention more effectively than standing or treadmill workstations. 19

No reductions in motor task performance were reported with the use of cycling workstations. ¹⁵ ^{24–27} Speed processing time in simple tasks does increase compared with treadmill and standing conditions. ¹⁹ ²⁸ These productivity results are important as cycling workstations, compared with treadmill and standing workstations, allow workers to experience greater cardiometabolic gains, while maintaining acceptable levels of productivity in office tasks.

Treadmill workstation

Treadmill workstations with speeds between 1.6 and 2.5 km/hour raise energy expenditure by about 1 MET beyond standing workstations and the sedentary threshold (1.5 MET). Also, with greater intensity (ie, 3.2 km/hour), treadmill workstations can increase HR similar to what is found for cycling workstations at 30 W of resistance. However, at this speed, the increase in perceived exertion and discomfort decreases implementation feasibility and motor task performance. Furthermore, the use of

treadmills compared with standing workstations decreases SBP while no difference is found for DBP. 8 14

Compared with standing workstations, treadmill workstations can positively influence many psychological components related to the work environment. A reduction in task stress, an increase in arousal, a lower feeling of boredom and a higher feeling of task satisfaction were reported by participants based on a single study. ¹⁰ More studies are required to clarify the effects of low-intensity exercise similar to the effects described for treadmill workstations on workers' mood. Some of these improvements may be explained by the increase in cardiovascular activity associated with an active workstation, possibly contributing to improved brain oxygenation, hence an improvement in cognitive tasks (memorisation and attention). ¹¹ ^{29–33} However, the results of the current review did not provide evidence of any cognitive benefits from treadmill compared with cycling or standing workstations.

With treadmill workstations, executive motor task performance, such as typing, or mouse pointing was reduced. 15 25 34 Higher walking speeds (3.2 km/hour) produced greater muscular activity in the upper limbs than that observed in standing or cycling workstations. This increase in muscular demand of the trunk muscles and upper limb muscles in order to stabilise posture and gait may affect motor coordination related to computer tasks 13 35 and could lead to muscular fatigue and muscle tension. 13 In this context, safety issues should be raised, and further studies are required to ensure the safety of workers using treadmill desks.

Standing workstation

Several studies suggest that standing workstations can decrease sitting time at work. As a result, even if standing workstations do not exceed a sedentary threshold (ie, energy expenditure), Postprandial glycaemia excursion and blood pressure are improved compared with conventional seated workstations. It is known that prolonged sitting can potentially cause low back pain due to lumbar flexion. A standing position inhibits lumbar flexion. Periods of time on a standing workstation have shown to be preventive against such injuries at work. Interestingly, contrary to a treadmill workstation, the upright posture from standing workstations does not alter executive office tasks such as typing and mouse pointing. Moreover, standing workstations do not increase perceived exertion or reduce the efficiency of computer tasks. Furthermore, studies suggest that globally, standing workstations do not alter cognitive performance tasks. Standing workstations do not alter cognitive performance tasks.

Perspectives and limits

Active workstations are a novel intervention. The comparison of active workstations was available in 12 studies and only 11 specifically compared outcomes between active workstations. Also, the findings of this literature review are supported by short-term measures only. In addition, a large number of outcomes were provided by only one or two studies which both had relatively small sample sizes. As mentioned by other authors, 42 larger randomised controlled trials with mid-term and long-term protocols are needed to provide stronger evidence.

CONCLUSIONS

The benefits associated with standing, treadmill and cycling workstations may not be equivalent. Cycling and treadmill workstations appear to provide greater short-term physiological improvements compared with standing, which could potentially

lead to better health outcomes. Cycling, treadmill and standing workstations appear to show short-term productivity benefits; however, treadmill workstations reduce the performance of computer-related work.

With workers and the workplace slowly moving towards active workstations, future long-term studies integrating different types of active workstations should be conducted in order to provide additional evidence. Ultimately, workers and corporations should be able to critically examine the benefits and limitations of each type of workstation and determine which is most appropriate for the worker's specific needs and tasks.

Acknowledgements The authors acknowledge the following individuals who contributed significant time and effort to the consensus development process and to the preparation of this manuscript: Denis Arvisais, Ryan Reid, Thiffya Arabi Kugathasan, Grant FIT24-Healthy and Productive Work Initiative (No 146019) by Social Sciences and Humanities Research

Contributors FD and FL performed the literature review. FD and MEM designed the project. FD provided the first draft of the paper. All the authors revised and approved the manuscript.

Funding Grant FIT24-Healthy and Productive Work Initiative (No 146019) by Social Sciences and Humanities Research and Canadian Institutes of Health Research.

Competing interests None declared.

Patient consent for publication Not required.

Provenance and peer review Not commissioned; externally peer reviewed.

REFERENCES

- 1 Ding D, Lawson KD, Kolbe-Alexander TL, et al. The economic burden of physical inactivity: a global analysis of major non-communicable diseases. The Lancet 2016;388:1311–24
- 2 Choi B, Schnall PL, Yang H, et al. Sedentary work, low physical job demand, and obesity in US workers. Am J Ind Med 2010;53:1088–101.
- 3 Parry S, Straker L. The contribution of office work to sedentary behaviour associated risk. BMC Public Health 2013;13:296.
- 4 Chu AH, Ng SH, Tan CS, et al. A systematic review and meta-analysis of workplace intervention strategies to reduce sedentary time in white-collar workers. Obes Rev 2016;17:467–81.
- 5 Hutcheson AK, Piazza AJ, Knowlden AP. Work site-based environmental interventions to reduce sedentary behavior: a systematic review. Am J Health Promot 2018:32:32–47.
- 6 Neuhaus M, Eakin EG, Straker L, et al. Reducing occupational sedentary time: a systematic review and meta-analysis of evidence on activity-permissive workstations. Obes Rev 2014:15:822–38.
- 7 Tudor-Locke C, Schuna JM, Frensham LJ, et al. Changing the way we work: elevating energy expenditure with workstation alternatives. Int J Obes 2014;38:755–65.
- 8 Zeigler ZS, Mullane SL, Crespo NC, et al. Effects of standing and light-intensity activity on ambulatory blood pressure. Med Sci Sports Exerc 2016;48:175–81.
- 9 Ognibene GT, Torres W, von Eyben R, et al. Impact of a sit-stand workstation on chronic low back pain. J Occup Environ Med 2016;58:287–93.
- 10 Sliter M, Yuan Z. Workout at work: laboratory test of psychological and performance outcomes of active workstations. J Occup Health Psychol 2015;20:259–71.
- 11 Labonté-LeMoyne Élise, Santhanam R, Léger P-M, et al. The delayed effect of treadmill desk usage on recall and attention. Comput Human Behav 2015;46:1–5.
- 12 Downs SH, Black N. The feasibility of creating a checklist for the assessment of the methodological quality both of randomised and non-randomised studies of health care interventions. *J Epidemiol Community Health* 1998;52:377–84.
- 13 Botter J, Ellegast RP, Burford EM, et al. Comparison of the postural and physiological effects of two dynamic workstations to conventional sitting and standing workstations. *Ergonomics* 2016;59:449–63.
- 14 Cox RH, Guth J, Siekemeyer L, et al. Metabolic cost and speech quality while using an active workstation. J Phys Act Health 2011;8:332–9.
- 15 Straker L, Levine J, Campbell A. The effects of walking and cycling computer workstations on keyboard and mouse performance. *Hum Factors* 2009;51:831–44.
- 16 Tronarp R, Nyberg A, Hedlund M, et al. Office-cycling: a promising way to raise pain thresholds and increase metabolism with minimal compromising of work performance. Biomed Res Int 2018;2018:1–12.
- 17 Kruse NT, Hughes WE, Benzo RM, et al. Workplace strategies to prevent sittinginduced endothelial dysfunction. Med Sci Sports Exerc 2018;50:801-808.
- 18 Gilson ND, Hall C, Renton A, et al. Do sitting, standing, or treadmill desks impact psychobiological indicators of work productivity? *Journal of Physical Activity and Health* 2017;14:793–6.

Protected by copyright, including for uses related to text and data mining, Al training, and similar technologies

Review

- 19 Mullane SL, Buman MP, Zeigler ZS, et al. Acute effects on cognitive performance following bouts of standing and light-intensity physical activity in a simulated workplace environment. J Sci Med Sport 2017;20:489–93.
- 20 Ohlinger CM, Horn TS, Berg WP, et al. The effect of active workstation use on measures of cognition, attention, and motor skill. J Phys Act Health 2011;8:119–25.
- 21 Bantoft C, Summers MJ, Tranent PJ, et al. Effect of standing or walking at a workstation on cognitive function: a randomized counterbalanced trial. Hum Factors 2016;58:140–9.
- 22 Michishita R, Jiang Y, Ariyoshi D, et al. The practice of active rest by workplace units improves personal relationships, mental health, and physical activity among workers. J Occup Health 2017;59:122–30.
- 23 Puig-Ribera A, Martínez-Lemos I, Giné-Garriga M, et al. Self-reported sitting time and physical activity: interactive associations with mental well-being and productivity in office employees. BMC Public Health 2015;15:72.
- 24 J. Carr L, Maeda H, Luther B, et al. Acceptability and effects of a seated active workstation during sedentary work. Int J Workplace Health Manag 2014;7:2–15.
- 25 Commissaris DA, Könemann R, Hiemstra-van Mastrigt S, et al. Effects of a standing and three dynamic workstations on computer task performance and cognitive function tests. Appl Ergon 2014;45:1570–8.
- 26 Elmer SJ, Martin JC. A cycling workstation to facilitate physical activity in office settings. Appl Ergon 2014;45:1240–6.
- 27 Cho J, Freivalds A, Rovniak LS. Utilizing anthropometric data to improve the usability of desk bikes, and influence of desk bikes on reading and typing performance. *Appl Ergon* 2017:60:128–35.
- 28 Torbeyns T, de Geus B, Bailey S, et al. Cycling on a bike desk positively influences cognitive performance. PLoS One 2016;11:e0165510.
- 29 Giles GE, Brunyé TT, Eddy MD, et al. Acute exercise increases oxygenated and deoxygenated hemoglobin in the prefrontal cortex. Neuroreport 2014;25:1320–5.
- 30 Ouchi Y, Okada H, Yoshikawa E, et al. Absolute changes in regional cerebral blood flow in association with upright posture in humans: an orthostatic PET study. J Nucl Med 2001;42:707–12.

- 31 Rooks CR, Thom NJ, McCully KK, et al. Effects of incremental exercise on cerebral oxygenation measured by near-infrared spectroscopy: a systematic review. Prog Neurobiol 2010:92:134–50.
- 32 Tomporowski PD. Effects of acute bouts of exercise on cognition. Acta Psychol 2003:112:297–324.
- 33 MacEwen BT, MacDonald DJ, Burr JF. A systematic review of standing and treadmill desks in the workplace. *Prev Med* 2015;70:50–8.
- 34 Funk RE, Taylor ML, Creekmur CC, et al. Effect of walking speed on typing performance using an active workstation. Percept Mot Skills 2012;115:309–18.
- 35 Fedorowich LM, Emery K, Côté JN. The effect of walking while typing on neck/ shoulder patterns. Eur J Appl Physiol 2015;115:1813–23.
- 36 Alkhajah TA, Reeves MM, Eakin EG, et al. Sit-stand workstations: a pilot intervention to reduce office sitting time. Am J Prev Med 2012;43:298–303.
- 37 Mansoubi M, Pearson N, Clemes SA, et al. Energy expenditure during common sitting and standing tasks: examining the 1.5 MET definition of sedentary behaviour. BMC Public Health 2015;15:516.
- 38 Bouchard DR, Strachan S, Johnson L, et al. Using shared treadmill workstations to promote less time spent in daily low intensity physical activities: a pilot study. J Phys Act Health 2016;13:111–8.
- 39 Buckley JP, Mellor DD, Morris M, et al. Standing-based office work shows encouraging signs of attenuating post-prandial glycaemic excursion. Occup Environ Med 2014:71:109–11
- 40 Karakolis T, Barrett J, Callaghan JP. A comparison of trunk biomechanics, musculoskeletal discomfort and productivity during simulated sit-stand office work. *Ergonomics* 2016;59:1275–87.
- 41 Russell BA, Summers MJ, Tranent PJ, et al. A randomised control trial of the cognitive effects of working in a seated as opposed to a standing position in office workers. Eraonomics 2016:59:737–44.
- 42 Shrestha N, Kukkonen-Harjula KT, Verbeek JH, et al. Workplace interventions for reducing sitting at work. Cochrane Database Syst Rev 2018;6:CD010912.