Original



Comparison of accelerometer-measured sedentary behavior, and light- and moderate-to-vigorous-intensity physical activity in white- and blue-collar workers in a Japanese manufacturing plant

Noritoshi Fukushima¹, Makiko Kitabayashi^{1,2}, Hiroyuki Kikuchi¹, Hiroyuki Sasai³, Koichiro Oka⁴, Yoshio Nakata⁵, Shigeho Tanaka⁶ and Shigeru Inoue¹

¹Department of Preventive Medicine and Public Health, Tokyo Medical University, Tokyo, Japan, ²Faculty of Health Sciences, Kyorin University, Tokyo, Japan, ³Department of Life Sciences, Graduate School of Arts and Sciences, The University of Tokyo, Tokyo, Japan, ⁴Faculty of Sport Sciences, Waseda University, Tokorozawa, Saitama, Japan, ⁵Faculty of Medicine, University of Tsukuba, Tsukuba, Ibaraki, Japan and ⁶Department of Nutrition and Metabolism, National Institute of Health and Nutrition, National Institutes of Biomedical Innovation, Health and Nutrition, Tokyo, Japan

Abstract: Objective: The times spent in sedentary behavior (SB) and moderate-to-vigorous physical activity (MVPA) are independently associated with health outcomes; however, objective data on physical activity levels including SB among different occupations is limited. We compared accelerometer-measured times spent in SB, light-intensity physical activity (LPA), and MVPA, and the patterns associated with prolonged bouts of SB between white- and blue-collar workers. Methods: The study population consisted of 102 full-time plant workers (54 white-collar and 48 blue-collar) who wore a triaxial accelerometer during waking hours for 5 working days. Accelerometer-measured activity levels were categorized as SB (≤1.5 metabolic equivalents (METs)), LPA (1.6-2.9 METs), and MVPA (≥3.0 METs). A sedentary bout was defined as consecutive minutes during which the accelerometer registered less than ≤1.5 METs. Accelerometer variables were compared between whiteand blue-collar workers through analysis of covariance. Results: During working hours, white-collar workers spent significantly more time in SB and less time in LPA than blue-collar workers (SB: 6.4 h vs. 4.8 h, 73% vs. 55% of total work time; LPA: 1.9 h vs. 3.5 h, 22% vs. 40% of total work time, p<.001), whereas the MVPA time was similar between the groups. White-collar workers spent significantly more SB time in prolonged sedentary bouts (≥30 min) compared to blue-collar workers. During

Received October 18, 2017; Accepted February 2, 2018

Published online in J-STAGE March 20, 2018

leisure time, the SB, LPA, and MVPA times were similar between the groups. **Conclusions:** White-collar workers have significantly longer SB times than blue-collar workers during work hours, and do not compensate for their excess SB during work by reducing SB during leisure time.

(J Occup Health 2018; 60: 246-253) doi: 10.1539/joh.2017-0276-OA

©Article author(s). This is an Open Access article distributed under the Creative Commons Attribution-NonCommercial-ShareAlike 4.0 International License. To view the details of this license, please visit (https://creativecommons. org/licenses/by-nc-sa/4.0/).

Key words : Accelerometer, Occupational exposure, Physical activity, Sedentary behavior

Introduction

On work days, full-time workers usually spend at least one-third of their day in the workplace¹⁾. Since moderateto-vigorous physical activity (MVPA) is associated with positive health outcomes, the amount of time spent in MVPA during the work day is an important consideration for workers' health^{2,3)}. Moreover, research has shown that high levels of sedentary behavior (SB) are associated with chronic diseases and mortality, independent of MVPA^{4,5)}, and that the patterns of SB (i.e. prolonged sedentary bouts and fewer breaks in SB) are also associated with deleterious cardio-metabolic health outcomes^{6,7)}. In addition, light-intensity physical activity (LPA) is beneficially as-

Correspondence to: N. Fukushima, Department of Preventive Medicine and Public Health, Tokyo Medical University, 6-1-1 Shinjuku, Shinjukuku, Tokyo 160-8402, Japan (e-mail: fukufuku@tokyo-med.ac.jp)

sociated with 2 h plasma glucose levels in glucose tolerance tests, independent of MVPA⁸⁾. Thus, information about the time spent at different levels of physical activity (i.e. SB, LPA, and MVPA), and the patterns of SB among workers will be useful for developing health promotion programs for the workplace.

Previous studies have objectively measured physical activity levels among office workers and reported that they spend longer time in SB with uninterrupted sitting during work hours; however, these studies focused solely on office workers⁹⁻¹³⁾. It remains unclear whether there are any differences between white- and blue-collar jobs in terms of the total time spent in SB, LPA and MVPA, as well as the patterns of SB. To our knowledge, there is one study by Tigbe et al., which compared the levels of objectively measured daily activities, such as walking, standing, and sitting or lying down between postal office and postal delivery workers¹⁴⁾. In that study, office staff spent 2.2 h more time in sedentary postures, and 1.7 h less time in walking than delivery staff on work days¹⁴. However, that study did not examine the workers' patterns of SB. Therefore, there is a lack of objectively measured, descriptive data on the duration and patterns of SB, LPA and MVPA between white- and blue-collar workers.

Here, we conducted a descriptive study to evaluate and compare accelerometer-determined SB, LPA, and MVPA levels between white- and blue-collar workers. Specifically, we examined differences between the groups in the times spent in SB, LPA, and MVPA during working and non-working hours throughout the day. Additionally, we compared their patterns of SB, including the frequency and duration of sedentary bouts.

Methods

Participants

The study participants comprised full-time employees aged 18 to 69 years at an electric machinery and apparatus manufacturing sales plant in Nagano Prefecture, Japan. The plant has six business departments: general affairs, accounting, sales, engineering, quality assurance, and production, with 152 employees in total. Two of these workers were on maternity leave, leaving 150 employees eligible for the study. There was no shift work at this plant; all employees began working at 8:25 AM and finished at 5:10 PM if overtime was not required. Two orientations explaining the study schedule and procedure were offered in July and September 2014. The data were collected from September 30 to October 6, 2014. The study protocol was approved by the Tokyo Medical University Ethics Committee prior to initiation of the study, and all participants provided written informed consent.

Occupational classifications

White- and blue-collar workers were classified using

the International Standardized Classification of Occupations (ISCO-08). Prior to the study, we assigned the ten major group categories (Major Groups 0 to 9) in the ISCO-08 into white- and blue-collar occupations. Whitecollar occupations included managers, professionals, technicians, clerks, and sales workers, while blue-collar occupations included crafts, machine operators and assemblers, elementary occupations, agricultural and fishery workers, and armed forces. Thereafter, details of workers' tasks were assigned according to the ISCO-08 categories, and were directly inspected by the researcher through site visits accompanied by the plant manager over 3-4 h in July and September.

Measurement of SB, LPA, and MVPA

We measured SB, LPA, and MVPA times by using a triaxial accelerometer (Active style Pro HJA-350IT; Omron Healthcare, Kyoto, Japan). Participants were instructed to wear the accelerometer on their waists during waking hours for 5 consecutive work days, except during water activities, such as bathing or swimming, or during contact sports, for safety reasons. The accelerometer estimated the intensity of physical activity based on metabolic equivalents (METs). The algorithm for the prediction of METs was established by the Douglas bag method in a controlled laboratory setting^{15,16)}. Physical activity was classified into three intensity categories based on METs: SB (≤1.5 METs), LPA (1.6 - 2.9 METs), and MVPA $(\geq 3.0 \text{ METs})^{17-19}$. The data were collected in 60-s epochs. If no acceleration signal was obtained for ≥60 consecutive minutes, the period was defined as "non-wear". Participant records were considered valid when the device was worn for at least 10 h/day. Valid records collected for ≥4 working days were included in the analyses. We calculated the mean total daily minutes of SB, LPA, and MVPA. A sedentary bout was defined as consecutive minutes during which the accelerometer registered less than ≤ 1.5 METs.

Covariates and sociodemographic variables

General demographic information (age, sex, weight, height, and educational attainment) and overtime hours were obtained using a self-reported questionnaire. Body mass index (BMI) was calculated as weight (kg)/height $(m)^2$.

Statistical analysis

Comparisons between white- and blue-collar workers were conducted using Student's t-test or the Mann-Whitney U test for continuous variables, and the Chisquared test for categorical variables. For the analyses, daily accelerometer data was segmented as follows: 8:25 AM to 5:09 PM was considered working time, and 12:00 AM to 8:24 AM and 5:10 PM to 11:59 PM were defined as leisure time (i.e., non-working time). First, the mean

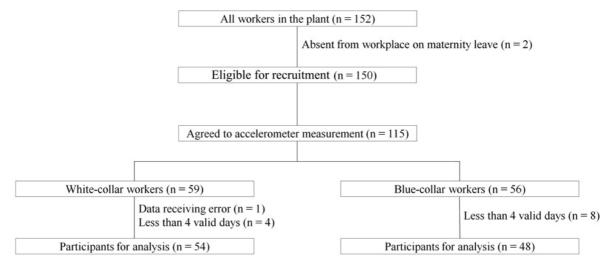


Fig. 1. Participant sampling flow chart.

Table 1. Participant characteristics

White-collar $(n = 54)$	Blue-collar $(n = 48)$	<i>p</i> -value
46.5 (11.3)	43.4 (12.2)	0.18
50 (92.6)	41 (85.4)	0.24
23.0 (3.4)	23.0 (2.3)	0.97
		0.80
43 (79.6)	40 (83.3)	
11 (20.4)	8 (16.7)	
		<.001
17 (31.5)	31 (64.6)	
8 (14.8)	10 (20.8)	
29 (53.7)	7 (14.6)	
20.0 (22.2)	22.5 (25.5)	0.60
892 (99.5)	860 (109.4)	0.13
524 (9.6)	524 (8.7)	0.66
368 (99.7)	336 (109.8)	0.12
	46.5 (11.3) 50 (92.6) 23.0 (3.4) 43 (79.6) 11 (20.4) 17 (31.5) 8 (14.8) 29 (53.7) 20.0 (22.2) 892 (99.5) 524 (9.6)	46.5 (11.3) $43.4 (12.2)$ $50 (92.6)$ $41 (85.4)$ $23.0 (3.4)$ $23.0 (2.3)$ $43 (79.6)$ $40 (83.3)$ $11 (20.4)$ $8 (16.7)$ $17 (31.5)$ $31 (64.6)$ $8 (14.8)$ $10 (20.8)$ $29 (53.7)$ $7 (14.6)$ $20.0 (22.2)$ $22.5 (25.5)$ $892 (99.5)$ $860 (109.4)$ $524 (9.6)$ $524 (8.7)$

Values are presented as the mean (SD) or number (%). BMI: body mass index. A whole day is from 12:00 AM to 11:59 PM; working time is from 8:25 AM to 5:09 PM; leisure time (non-working) is the sum of the periods from 12:00 AM to 8:24 AM and 5:10 PM to 11:59 PM.

times spent in SB, LPA, and MVPA were descriptively compared between white-collar and blue-collar workers before adjusting for covariates in each period (i.e., whole day, work time, and leisure time). Then, analysis of covariance was performed, adjusting for age, sex, accelerometer wear time (min/day), BMI, educational attainment, and overtime work (h/month). Sex, BMI (<25 vs. \geq 25 kg/m²), and educational attainment (\leq high school vs. junior college vs. \geq university graduate) were treated as categorical variables. For all analyses, *p*-values <.05 were considered statistically significant. The statistical analyses were performed using IBM SPSS Statistics for Windows, version 22.0 (IBM Corp., Tokyo, Japan).

Results

Participants

The participant flowchart is shown in Figure 1. Of 150 full-time employees, 115 workers (59 white- and 56 bluecollar) agreed to wear an accelerometer (response rate, 76.7%). One and four white-collar workers were excluded due to an error in downloading accelerometer data or for logging <4 valid days, respectively. Eight blue-collar workers were excluded for logging <4 valid days. The demographic characteristics of the study participants are presented in Table 1. Most study participants were male Noritoshi Fukushima, et al.: Sedentary behavior and physical activity by occupation

		Model 1			Model 2	
	White-collar	Blue-collar	<i>p</i> -value	White-collar	Blue-collar	<i>p</i> -value
Whole day						
SB time (min)	619 (97.7)	489 (147.9)	<.001	614 (12.9)	499 (13.9)	<.001
LPA time (min)	225 (74.0)	326 (100.9)	<.001	217 (12.1)	331 (13.1)	<.001
MVPA time (min)	46 (21.9)	44 (20.0)	0.67	44 (2.9)	46 (3.2)	0.66
Working time						
SB time (min)	384 (61.6)	289 (89.6)	<.001	387 (10.4)	288 (11.2)	<.001
LPA time (min)	115 (52.2)	210 (84.3)	<.001	112 (9.5)	209 (10.3)	<.001
MVPA time (min)	24 (15.7)	25 (14.8)	0.78	24 (2.1)	25 (2.3)	0.71
Leisure time						
SB time (min)	235 (79.6)	200 (88.3)	0.04	227 (5.2)	211 (5.7)	0.04
LPA time (min)	110 (38.8)	116 (41.1)	0.48	105 (4.7)	121 (5.1)	0.03
MVPA time (min)	22 (12.5)	19 (10.9)	0.26	20 (1.5)	21 (1.7)	0.76

Table 2. Differences in the times spent in SB, LPA, and MVPA between white- and blue-collar workers

Values are presented as mean (SD) in Model 1, and adjusted mean (SE) in Model 2. Model 1: no adjustment. Model 2: adjusted for age, sex, accelerometer wear time, BMI category, educational attainment, and overtime work. A whole day is from 12:00 AM to 11:59 PM; working time is from 8:25 AM to 5:09 PM; leisure time (non-working) is the sum of the periods from 12:00 AM to 8:24 AM and 5:10 PM to 11:59 PM. BMI: body mass index; SB: sedentary behavior; LPA: light-intensity physical activity; MVPA: moderate-to-vigorous physical activity.

(92.6% of white-collar workers; 85.4% of blue-collar workers). There were no significant differences between white- and blue-collar workers in terms of age, BMI, or hours of overtime work/month. White-collar workers had a higher level of education than blue-collar workers (p <.001). The accelerometer was worn for 4 valid days by 12 (22.2%) and 11 (22.9%) of white- and blue-collar workers, and for 5 valid days by 42 (77.8%) and 37 (77.1%) white- and blue-collar workers, respectively. There were no significant differences between white- and blue-collar workers in the mean daily duration of accelerometer wear (whole day: 892 ± 99.5 vs. 860 ± 109.4 min, p =.13; during work: 524 ± 9.6 vs. 524 ± 8.7 min, p =.66; and during leisure time: 368 ± 99.7 vs. 336 ± 109.8 min, p =.12).

Comparisons of SB, LPA, and MVPA times between white- and blue-collar workers

The times spent in each activity level are presented in Table 2, and unadjusted descriptive data are shown in Model 1, Table 2. During the whole day, white-collar workers spent more time in SB and less time in LPA than blue-collar workers (SB: 619 ± 97.7 vs. 489 ± 147.9 min, p < .001; LPA: 225 ± 74.0 vs. 326 ± 100.9 min, p < .001). The time spent in MVPA was similar between the groups ($46\pm$ 21.9 vs. 44 ± 20.0 min, p = .67). During the work day, white-collar workers spent a significantly greater time in SB (approximately 100 min more) and significantly less time in LPA (approximately 100 min less) than blue-collar workers. However, the time spent in MVPA was similar between the groups (p = .78). The SB time in

white-collar workers was also significantly longer than that of blue-collar workers during leisure time. Even after adjusting for age, sex, accelerometer wear time, BMI status, educational level, and overtime work, the betweengroup differences in SB and LPA time remained significant. However, the differences during leisure time were quite small compared to those measured during work and across the whole day (See Model 2, Table 2).

Proportions of SB, LPA, and MVPA times in white- and blue-collar workers

Figure 2 presents the percentages of accelerometer wear time spent in each PA level. White-collar workers spent a significantly higher proportion of their day in the sedentary state and spent a significantly lower proportion of their day in LPA than blue-collar workers (70% vs. 56%, p <.001; 25% vs. 39%, p <.001, respectively). Over the whole day, the time spent in MVPA was not significantly different between the groups (5% vs. 5%, p = .971) (Fig. 2A). Distinct differences were observed in the times spent in SB and LPA during the work day (73% vs. 55%, p <.001; 22% vs. 40%, p <.001, respectively), while there was no significant difference in the time spent in MVPA (5% vs 5%, p = .797) (Fig. 2B). There were slight differences in the times spent in SB and LPA during leisure time, but no significant difference in the time spent in MVPA (SB: 63% vs. 58%, *p* =.019; LPA: 31% vs. 36%, p = .014; and MVPA: 6% vs. 6%, p = .717, respectively) (Fig. 2C).

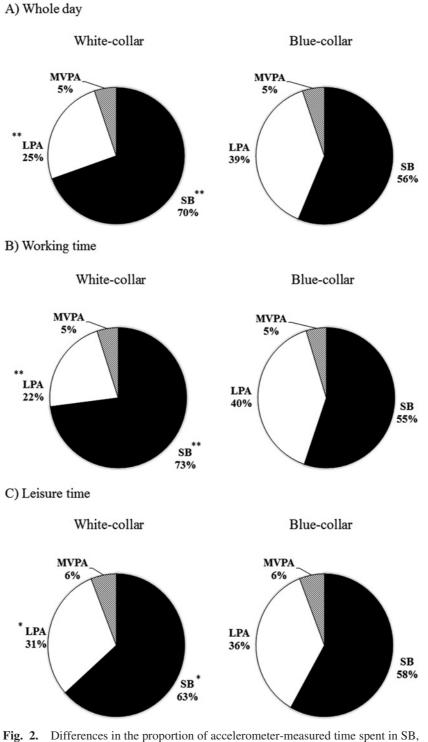


Fig. 2. Differences in the proportion of accelerometer-measured time spent in SB, LPA, and MVPA between white- and blue-collar workers. SB: sedentary behavior; LPA: light-intensity physical activity; MVPA: moderate-to-vigorous physical activity. *p*-values were obtained using Student's t-test (white- vs. blue-collar workers). **p*<.05, ***p*<.001.</p>

Characteristics of sedentary bouts during work time

The median number of sedentary bouts during work was 39.1 (1st and 3rd quartiles: 33.4 - 47.5) in white-collar workers and 56.3 (47.6-64.4) in blue-collar workers

(Table 3). Of all recorded sedentary bouts, the median percentages of prolonged sedentary bouts lasting \geq 30 min were 8.8% (4.6-12.9%) for white-collar workers and 1.8% (0.7-2.9%) for blue-collar workers, representing

Bout	Ĩ	No. of bouts/d		Per	Percent of bouts \ddagger		Percent of	Percent of sedentary time ‡	
duration, min	White-collar	Blue-collar	<i>p</i> -value	White-collar	Blue-collar	<i>p</i> -value	White-collar	Blue-collar	<i>p</i> -value
≥ 1	39.1 (33.4 to 47.5)	56.3 (47.6 to 64.4)	<.001	100	100		100	100	
≥ 5	17.2 (15.5 to 19.8)	15.6 (10.8 to 20.5)	0.14	45.3 (39.3 to 53.8)	28.6 (18.0 to 39.2)	<.001	89.3 (83.8 to 92.5)	73.7 (58.7 to 82.2)	<.001
≥10	11.2 (9.4 to 12.1)	7.5 (4.3 to 11.0)	<.001	28.7 (21.8 to 36.4)	13.0 (7.2 to 20.0)	<.001	78.6 (67.2 to 84.4)	54.0 (39.4 to 63.8)	<.001
≥20	5.6 (4.4 to 6.7)	2.1 (1.1 to 4.0)	<.001	14.6 (9.0 to 19.6)	4.0 (1.8 to 6.9)	<.001	57.5 (47.8 to 68.0)	29.8 (18.6 to 41.3)	<.001
≥30	3.5 (2.2 to 4.5)	1.1 (0.4 to 1.7)	<.001	8.8 (4.6 to 12.9)	1.8 (0.7 to 2.9)	<.001	42.3 (30.3 to 55.3)	20.2 (12.4 to 28.4)	<.001
≥40	2.1 (1.2 to 2.8)	0.7 (0.2 to 1.0)	<.001	4.8 (2.8 to 7.9)	1.2 (0.4 to 2.3)	<.001	31.6 (22.0 to 41.5)	14.5 (9.2 to 21.4)	<.001
≥50	1.2 (0.8 to 1.9)	0.4 (0.2 to 0.8)	<.001	3.1 (1.6 to 5.5)	0.7 (0.4 to 1.7)	<.001	21.8 (14.2 to 32.3)	12.5 (7.8 to 17.2)	<.001
≥60	0.6 (0.4 to 1.3)	0.2 (0.2 to 0.8)	<.001	1.5 (1.0 to 3.7)	0.4 (0.3 to 0.9)	<.001	13.9 (9.2 to 24.1)	8.7 (3.6 to 13.3)	<.001
Values are	presented as the medi-	Values are presented as the median (1st and 3rd quartiles). A sedentary bout was defined as consecutive minutes during which the accelerometer registered less than ≤ 1.5 METs.	es). A sedent	tary bout was defined a	as consecutive minutes	during whic	the accelerometer re-	gistered less than ≤ 1.5	METs.
† Percenta	ge of sedentary bouts:	⁺ Percentage of sedentary bouts: number of sedentary bouts of	outs of n mir	n/number of sedentary	bouts of $\geq 1 \text{ min.} \ddagger \text{Perc}$	centage of se	of n min/number of sedentary bouts of $\ge 1 \min$. [*] Percentage of sedentary time: summed time of sedentary bouts of n min/	time of sedentary bou	tts of n min/

Comparisons of sedentary bouts during work time between white- and blue-collar workers

Table 3.

summed time of all sedentary bouts $\ge 1 \min$. *p*-values were obtained by the Mann-Whitney U test (white- vs. blue-collar workers)

42.3% (30.3-55.3%) and 20.2% (12.4-28.4%) of the total sedentary time, respectively (Table 3).

Discussion

This study yielded four key implications for considering SB, LPA, and MVPA levels in different occupations. First, these findings demonstrate that white-collar workers spend significantly more time in SB and significantly less time in LPA than blue-collar workers during working hours and across the whole day. However, there was no significant difference between the groups in the time spent in MVPA. In other words, the difference in SB time was countered by differences in LPA during work time, rather than MVPA. Second, the times spent in SB, LPA, and MVPA during leisure time were similar between white- and blue-collar workers. Third, the most distinct differences in the proportions of time spent in SB and LPA were observed during working hours. Finally, a greater number of prolonged SB bouts (i.e., $\geq 30 \text{ min}$) were observed in white-collar workers during work time. Because occupational exposure to SB is associated with adverse health outcomes⁴⁻⁷⁾, these results have implications for developing worker health programs.

In this study, white-collar workers spent 73% of their work time in SB, compared to 55% for blue-collar workers; this was the period in which the difference in SB time (or LPA time) between white- and blue-collar workers was most pronounced. Other studies have reported similar findings on the proportion of SB in white-collar workers. Clemes et al. and Thorp et al. both used an Actigraph GT1M accelerometer and observed a large percentage of work time spent in sedentary activities (71% and 77%, respectively)^{9,10)}. Parry et al. used an Actical accelerometer and reported that 82% of work hours are spent in sedentary activities¹¹⁾. Although different devices and SB definitions were used in these studies, the proportion of time spent in SB by white-collar workers was similar between this study and these previous reports⁹⁻¹¹⁾. However, these previous studies did not include blue-collar workers; therefore, our study provides new and important information addressing differences in the proportion of SB between white- and blue-collar workers on work days.

During leisure time, the differences in the time spent in SB and LPA between white- and blue-collar workers were quite small, and the MVPA level was also similar. Tigbe et al. also reported no significant differences between physically active and inactive occupations in sedentary and standing times during non-work hours of working days, while times spent in sedentary, standing, and walking activities during work were all significantly different¹⁴. Furthermore, a study by Jans et al. using self-reported data from Dutch workers found that workers who sat for long periods during work did not compensate for their SB by sitting less during their leisure time²⁰.

These results support our findings that sedentary workers are not necessarily more active than non-desk-based workers during leisure time. Additionally, these findings suggest that both white- and blue-collar workers require more MVPA in their leisure time if workplace MVPA time is considered insufficient²¹).

We found that during the whole day white-collar workers spent on average 2 h more time in SB than blue-collar workers (10 h vs. 8 h), similar to the values reported by Tigbe et al¹⁴. Healy et al. reported that a difference of 2.3 h in sedentary time is associated with clinically meaningful differences in triglyceride levels and insulin resistance⁷. Matthews et al. reported that just a 1-h increase in sedentary time causes a 12% increase in mortality risk (this increase was reduced to 5% after adjusting for MVPA time)²²⁾. Compared with adults who were sedentary for 6 h/day, those sedentary for 8 h/day (the amount of time blue-collar workers spent in SB in this study) had a 14% greater mortality risk. Furthermore, adults who were sedentary for 10 h/day (the amount of time whitecollar workers spent in SB in this study) had a 29% greater mortality risk²²⁾. Our study confirmed that whitecollar workers are significantly more exposed to prolonged sitting than blue-collar workers, suggesting that white-collar workers should be the predominant target group of initiatives to reduce occupational sitting. However, our results indicate that blue-collar workers also have moderate occupational sedentary exposure. Because the current guidelines regarding occupational sedentary activity predominantly target desk-based workers²³⁾, our results suggest that blue-collar workers may not be sufficiently protected against occupational sedentary exposure.

A greater number of prolonged SB bouts were observed in white-collar workers during working hours. Thorp et al. reported that overweight/obese office workers who alternate sitting and standing every 30 min while remaining productive experience a significant reduction in fatigue levels and lower back discomfort, as well as modest beneficial effects on postprandial glucose^{24,25)}. Moreover, an experimental study by Dunstan et al. found that interrupting periods of sitting with even a short bout of LPA every 20 min lowers postprandial glucose and insulin levels²⁶⁾. Our results indicate that white-collar workers are more exposed to the risks of uninterrupted periods of sitting time than blue-collar workers, and that interventions are needed to prevent prolonged SB in white-collar workers. For example, a multi-component intervention combining individual, organizational, and environmental factors, including the use of sit-stand workstations, could mitigate prolonged SB²⁷⁾.

This study has several strengths. First, we sampled participants across all business sectors within the studied plant, which enabled us to compare office and non-office workers. Previous studies have generally only focused on office workers⁹⁻¹²⁾. Second, we measured SB, LPA, and MVPA levels with a validated accelerometer^{15,16)} rather than self-reporting. Measurement of LPA is difficult to capture through questionnaires, and recall bias may affect the accuracy of results due to the difficulty in recalling specific sitting times and durations for workers who frequently change their posture (i.e., sitting to standing, and vice versa). Third, all participants simultaneously wore accelerometers for exactly the same period of time. Since businesses may have different busy seasons, measurements of workplace SB, LPA, and MVPA may change throughout the year, even within the same business department. Finally, we classified each worker as either white- or blue-collar through direct observation in a systematic way.

Nevertheless, this study also has limitations. First, it was performed at a single plant with a relatively small sample size. Second, we designated the end of routine work at 5:09 PM, regardless of overtime hours. Although we confirmed that there were no differences between white- and blue-collar workers in the amount of overtime work per month, overtime periods could have increased the amount of SB time observed during leisure hours, especially among white-collar workers. Finally, we categorized SB, LPA, and MVPA by activity intensity measured with the accelerometer; however, the accelerometers used in this study could not measure posture. Therefore, quiet standing, which should be defined as non-SB, might have been counted as SB in this study. Quiet standing may be more frequent in blue-collar workers, therefore the SB time in blue-collar workers may be overestimated compared to that measured by using an inclinometer, which assesses both intensity and posture^{18,28)}.

Conclusions

In the workplace, white-collar workers exhibited significantly more SB, including prolonged sedentary bouts, than blue-collar workers. Additionally, white-collar workers did not compensate for their excessive SB at work by reducing SB during their leisure time. Occupational health professionals or practitioners should be mindful that white-collar workers tend to spend more time in SB than blue-collar workers throughout a work day. Further studies are needed to evaluate the health impact of differences in SB time among occupations, and to determine the optimal length of SB time for prevention of chronic diseases among workers.

Acknowledgments: The authors wish to thank all of the workers who participated in the survey. This work was supported by a Grant-in-Aid for Young Scientists (B): 25860450 from the Japanese Society for the Promotion of Science (N.F).

Conflicts of interest: Dr. Tanaka received consigned re-

search funds from Omron Healthcare Co., Ltd. The remaining authors declare that they have no conflicts of interest.

References

- Tudor-Locke C, Leonardi C, Johnson WD, et al. Time spent in physical activity and sedentary behaviors on the working day: the American time use survey. Journal of Occupational and Environmental Medicine 2011; 53(12): 1382-1387.
- Gebel K, Ding D, Chey T, et al. Effect of Moderate to Vigorous Physical Activity on All-Cause Mortality in Middle-aged and Older Australians. JAMA Internal Medicine 2015; 175(6): 970-977.
- Samitz G, Egger M, Zwahlen M. Domains of physical activity and all-cause mortality: systematic review and dose-response meta-analysis of cohort studies. International Journal of Epidemiology 2011; 40(5): 1382-1400.
- 4) Biswas A, Oh PI, Faulkner GE, et al. Sedentary time and its association with risk for disease incidence, mortality, and hospitalization in adults: a systematic review and meta-analysis. Annals of Internal Medicine 2015; 162(2): 123-132.
- 5) de Rezende LF, Rodrigues Lopes M, Rey-López JP, et al. Sedentary behavior and health outcomes: an overview of systematic reviews. PLoS One 2014; 9(8): e105620.
- 6) Healy GN, Dunstan DW, Salmon J, et al. Breaks in sedentary time: beneficial associations with metabolic risk. Diabetes Care 2008; 31(4): 661-666.
- Healy GN, Matthews CE, Dunstan DW, et al. Sedentary time and cardio-metabolic biomarkers in US adults: NHANES 2003-06. European Heart Journal 2011; 32(5): 590-597.
- Healy GN, Dunstan DW, Salmon J, et al. Objectively measured light-intensity physical activity is independently associated with 2-h plasma glucose. Diabetes Care 2007; 30(6): 1384-1389.
- 9) Clemes SA, O'Connell SE, Edwardson CL. Office workers' objectively measured sedentary behavior and physical activity during and outside working hours. Journal of Occupational and Environmental Medicine 2014; 56(3): 298-303.
- 10) Thorp AA, Healy GN, Winkler E, et al. Prolonged sedentary time and physical activity in workplace and non-work contexts: a cross-sectional study of office, customer service and call centre employees. International Journal of Behavioral Nutrition and Physical Activity 2012; 9: 128.
- Parry S, Straker L. The contribution of office work to sedentary behaviour associated risk. BMC Public Health 2013; 13: 296.
- 12) Smith L, Hamer M, Ucci M, et al. Weekday and weekend patterns of objectively measured sitting, standing, and stepping in a sample of office-based workers: the active buildings study. BMC Public Health 2015; 15: 9.
- 13) Ryan CG, Dall PM, Granat MH, et al. Sitting patterns at work: objective measurement of adherence to current recommendations. Ergonomics 2011; 54: 531-538.
- Tigbe WW, Lean ME, Granat MH. A physically active occupation does not result in compensatory inactivity during out-

of-work hours. Preventive Medicine 2011; 53(1-2): 48-52.

- 15) Oshima Y, Kawaguchi K, Tanaka S, et al. Classifying household and locomotive activities using a triaxial accelerometer. Gait Posture 2010; 31(3): 370-374.
- 16) Ohkawara K, Oshima Y, Hikihara Y, et al. Real-time estimation of daily physical activity intensity by a triaxial accelerometer and a gravity-removal classification algorithm. British Journal of Nutrition 2011; 105(11): 1681-1691.
- 17) Sedentary Behaviour Research Network. Letter to the editor: standardized use of the terms "sedentary" and "sedentary behaviours". Applied Physiology, Nutrition, and Metabolism 2012; 37(3): 540-542.
- Pate RR, O'Neill JR, Lobelo F. The evolving definition of "sedentary". Exercise and Sport Sciences Reviews 2008; 36 (4): 173-178.
- Norton K, Norton L, Sadgrove D. Position statement on physical activity and exercise intensity terminology. Journal of Science and Medicine in Sport 2010; 13(5): 496-502.
- 20) Jans MP, Proper KI, Hildebrandt VH. Sedentary behavior in Dutch workers: differences between occupations and business sectors. American Journal of Preventive Medicine 2007; 33 (6): 450-454.
- 21) Arem H, Moore SC, Patel A, et al. Leisure time physical activity and mortality: a detailed pooled analysis of the doseresponse relationship. JAMA Internal Medicne 2015; 175(6): 959-967.
- 22) Matthews CE, Keadle SK, Troiano RP, et al. Accelerometermeasured dose-response for physical activity, sedentary time, and mortality in US adults. American Journal of Clinical Nutrition 2016; 104(5): 1424-1432.
- 23) Buckley JP, Hedge A, Yates T, et al. The sedentary office: an expert statement on the growing case for change towards better health and productivity. British Journal of Sports Medicine 2015; 49(21): 1357-1362.
- 24) Thorp AA, Kingwell BA, Owen N, et al. Breaking up workplace sitting time with intermittent standing bouts improves fatigue and musculoskeletal discomfort in overweight/obese office workers. Occupational and Environmental Medicine 2014; 71(11): 765-771.
- 25) Thorp AA, Kingwell BA, Sethi P, et al. Alternating bouts of sitting and standing attenuate postprandial glucose responses. Medicine & Science in Sports & Exercise 2014; 46(11): 2053-2061.
- 26) Dunstan DW, Kingwell BA, Larsen R, et al. Breaking up prolonged sitting reduces postprandial glucose and insulin responses. Diabetes Care 2012; 35(5): 976-983.
- 27) Neuhaus M, Healy GN, Dunstan DW, et al. Workplace sitting and height-adjustable workstations: a randomized controlled trial. American Journal of Preventive Medicine 2014; 46(1): 30-40.
- 28) Gibbs BB, Hergenroeder AL, Katzmarzyk PT, et al. Definition, measurement, and health risks associated with sedentary behavior. Medicine & Science in Sports & Exercise 2015; 47 (6): 1295-1300.