Chair Use Disorder: We Should Treat Excessive Chair Use as an Addiction

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Dear Editor,

In 2012, the World Health Organization raised the alarm by announcing a pandemic called physical inactivity.1 This pandemic is associated with numerous chronic diseases, about 5.3 million premature deaths worldwide every year, and an enormous economic burden.2 So far, attempts to reduce sedentary lifestyle have been largely unsuccessful.3 How do we get people out of their chairs? As an addiction medicine specialist, I (RvdG) treat patients who are addicted to the use of rewarding consumer products, such as alcohol, tobacco, ultra-processed food, or different types of drugs. Comfortable chairs are also a rewarding consumer product. Consequently, I hypothesized that individuals with excessive sedentary behavior should be regarded as being addicted to chairs. To test this hypothesis, I started treating patients with symptoms of a “chair use disorder” (based on the DSM-5 criteria of substance use disorders). The treatment consisted of cognitive behavioral therapy and was aimed to reduce total daily chair use time. Although all patients (and colleagues) initially reacted with surprise to this new “diagnosis,” preliminary findings were promising. The total daily chair use time reduced substantially. Patients experienced withdrawal symptoms, such as increased tiredness, irritability, and an uncomfortable feeling or pain in the lower limbs, buttocks, lower back, shoulders, and neck in the first 2 to 4 weeks. Patients started to view chairs as a potentially harmful and addictive consumer product, and motivation to use chairs decreased. Interestingly, they also reported a chair time reducing effect in their social networks, indicating an effect beyond the treated patient, which is similar with other addictions. The next step is to generate more robust scientific evidence of the effectiveness of framing excessive chair use as an addiction and treating it accordingly. In addition to individual (or group) therapy, preventive public health strategies to reduce sedentary behavior should also be based on the potential addictiveness of chairs, which are attractive consumer products developed and sold by an industry that we (like “Big Tobacco,” “Big Alcohol,” and “Big Food”) should call “Big Chair.”

References