

Notice of retraction. Hodkinson et al. Accelerometer-and pedometer-based physical activity interventions among adults with cardiometabolic conditions: a systematic review and meta-analysis. JAMA Netw Open. 2019;2(10):e1912895

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**Letter****Notice of Retraction. Hodkinson et al. Accelerometer- and Pedometer-Based Physical Activity Interventions Among Adults With Cardiometabolic Conditions: A Systematic Review and Meta-analysis. *JAMA Netw Open*. 2019;2(10):e1912895.**

To the Editor We write to report a decision to retract the article "Accelerometer- and Pedometer-Based Physical Activity Interventions Among Adults With Cardiometabolic Conditions: A Systematic Review and Meta-analysis,"¹ published in *JAMA Network Open* on October 9, 2019, based on our mistake in applying the intervention definition, which has affected the inclusion criteria for 9 of the 36 studies included in this systematic review and meta-analysis.

Our study objective was to assess the association of accelerometer- and pedometer-based interventions with increased activity and other improved health outcomes in adults with cardiometabolic conditions and to examine characteristics of the studies that could influence the association of both interventions in improving physical activity (PA). As we reported in the article, "Randomized clinical trials or cluster randomized clinical trials evaluating the use of wearable technology devices such as pedometers and accelerometers as motivating and monitoring tools for increasing PA were included." In our systematic review, searches retrieved 5762 references, and following abstract and title screening of 1439 references and full-text screening of 107 studies, we reported that 36 randomized trials, comprising 5208 patients, met our inclusion criteria. However, as we reported in our PROSPERO registered protocol, "Step counters, accelerometers and pedometers used for monitoring walking speed (for example, steps per minute) or solely for assessing the effects of a lifestyle program on physical activity will be excluded."²

This was a complex scenario in which these devices had to be used as motivating tools within the intervention arms as well as monitoring tools for the primary outcome (PA) in both arms of trials to be eligible for this analysis. In 9 of these trials,³⁻¹¹ comprising 2911 patients, devices were only used as monitoring tools of PA in both arms and were not randomly assigned within the intervention arm as a motivating tool for physical activity, and these trials should not have been included in the analysis.

Thus, at the request of the editors, we are retracting our article. We apologize for this error. We aim to reconduct this meta-analysis without the data from these 9 trials and will prepare a new manuscript for consideration.

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