

Cardiac Rehab – The Gym & Health Benefits for Your Heart



Adapted by Personal Safety Nets® from “For Seniors, an Underused Heart Therapy: the Gym” in The New York Times by Paula Span.

www.PersonalSafetyNets.com or 206-659-0665

For years, doctors have known that cardiac rehabilitation programs — incorporating not only regular exercise but nutritional counseling, stress management and smoking cessation — can speed patients’ recovery and extend their lives.

But the experts didn’t know whether, in research jargon, there was a “dose-response relationship.” In other words, said Bradley Hammill, a biostatistician at Duke University School of Medicine, “Do we see that increasing the number of sessions you go to leads to a better outcome?”

Now, thanks to a broad study led by Mr. Hammill, they know the answer: yes. **When it comes to cardiac rehab, more is better.** Just published in the journal *Circulation*, the study shows that **patients who had suffered heart attacks, undergone coronary bypass graft surgery or been hospitalized for chronic stable angina (chest pain accompanying exertion) lived longer and had fewer subsequent heart attacks when they had more rehab sessions.**

After sampling five percent of all Medicare beneficiaries who attended at least one session and following them for four years, the researchers found that 12 sessions improved survival and reduced future heart attacks; 24 sessions had still greater impact, and 36 sessions — the number that Medicare covers — showed the greatest effect of all.

Patients, who came to 36 sessions, usually three times a week, lowered their risk of death by nearly half and their risk of a heart attack by nearly a third, compared to those who attended just one session. They also had a 14 percent lower risk of death and a 12 percent lower risk of a heart attack than those who attended 24 sessions, and substantially lower risk than those who came to just 12. “It keeps improving,” Mr. Hammill said. “Every session helps.”

So why aren’t more people on the Rehab Plan? Medicare covers cardiac rehab after a variety of heart-related procedures and ailments, including those mentioned above, plus heart valve surgery, stent implantation and angioplasty. Yet only about 20 percent of eligible patients ever take advantage of rehab, and many of those don’t stay with it long enough to maximize its benefits.

“The main reason,” said Dr. David Prince “is that physicians don’t refer eligible patients.” Rehab doesn’t involve a drug or device, he noted, so pharmaceutical firms and reps don’t promote it. Patients may also have trouble making the time commitment, arranging transportation to rehab centers or, in rural areas, even finding a cardiac rehab program. And non-Medicare patients often struggle with the \$10 to \$50 insurance co-pays.

What doesn’t seem true, Dr. Prince said, is the common assumption that patients aren’t motivated to exercise and just won’t go, even if their doctors urge them to. “That’s just projection,” he scoffed. **“I’ve found most patients are very interested in taking care of themselves.” He hopes that**

physicians get the message that cardiac rehab works but, even more important, that patients come to understand the benefits and ask their doctors about it.

After 36 monitored sessions paid for by Medicare, he noted, patients can continue to exercise independently. “They can walk. They can dance. They can do workouts at home or at community centers,” he said. “They can take control of their disease and feel better than they have in years.”

Another reason, not mentioned in this article is that people forget that finding someone else to exercise with will increase the chances of sticking with a plan. Personal Safety Nets recommends teaming up with 1 or more buddies:

1. See your doctor as one resource; get her/him to prescribe rehab. This will give you up to 36 visits.
2. Ask a friend, colleague, or someone you want to get to know, to walk/bike/swim with you 1-3 times per week – and put it on your calendar!
3. Visit (meetup.org) or other similar websites to find groups to join.
4. Share other ideas with us.