Women attend less than half of cardiac rehab sessions even with tailored programs: York U – UHN study

TORONTO, December 9, 2015 — Even with cardiac rehab (CR) programs tailored to their needs, women heart patients miss more than half of the sessions prescribed to them, according to a joint study by York University and the University Health Network (UHN).

“However, they may adhere more to a CR program and benefit from it, if they are able to make their own choice on which model of program they attend,” says Professor Sherry L Grace in the Faculty of Health at York U.

Cardiac rehab is an outpatient program that educates participants on their medical condition as well as requires them to do structured exercise, to better manage their disease. Traditional programs are co-ed, but home-based models are also offered, and more recently women-only programs have been developed.

“Participating in a cardiac rehab program greatly reduces death and hospitalization, as well as helps in improving the quality of life for heart patients,” says Grace, who is also a senior scientist at the UHN. “Unfortunately, many patients do not use these proven services, and women are much less likely than men to access them, and to fully participate once they do.”

To test what might improve female heart patients' adherence to cardiac rehab, Grace and her colleagues compared women's participation in one of the three program models offered. Study participants were randomly assigned to in a mixed-sex (co-ed) program, women’s only program or home-based program model. The researchers recruited women from six cardiac care facilities in Ontario and referred them to one of these three most-commonly available CR models.

The study, CR4HER, published in Mayo Clinic Proceedings, assessed adherence to the program as well as improvements in exercise capacity, which is strongly linked to better survival.

The researchers found that women only attended just over half of the 24 sessions offered, regardless of the model they were assigned to. However, the participants achieved significant improvements in their exercise capacity.

“The results suggest that women should be encouraged to participate in cardiac rehab, offering them the program model of their choice,” says Liz Midence, lead author and PhD candidate at York U. “We should inform women of the benefits of cardiac rehab and use all the tools at our disposal to promote their full participation”

Midence notes that women might have limitations such as taking time off from caregiving responsibilities and access to transportation. “They may be more likely to fully participate in a home-based program, where they can be supported by the cardiac rehab staff by phone at a convenient time for them, to make the changes they need to manage their heart condition.”

However, some women may also feel they need to go in to the centre to stay motivated in making the changes needed to improve their heart health, but feel uncomfortable exercising
with men. For these patients, being able to access a women-only program may mean they are more likely to keep coming back and achieve the greatest gains in their heart health, according to the researchers.

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