

An Evaluation on the Clinical Outcomes of Cardiac Rehabilitation Program (Phase 2) for Moderate Risk Patients in an Integrated Hospital-based and Community-based Model of Care

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BACKGROUND:

Cardiac rehabilitation program with triage of patients with reference to the risk factors provide a more comprehensive management. We pioneered the integrated hospital-based and community-based model of care for patients with moderate risk according to American Association of Cardiovascular and Pulmonary Rehabilitation (AACVPR) Risk Stratification Criteria.

OBJECTIVE:

This study was to evaluate the effectiveness of the integrated cardiac rehabilitation program model in moderate risks patients.

METHODS:

A group of cardiac patients stratified as moderate risk according to the AACVPR Risk Stratification Criteria was recruited from Oct 2007 to Sept 2009. Patients received a hospital-based alone or together with community-based model of care, depending on patients' willingness & readiness. The training programs included aerobic and strengthening exercises, home-based exercises and educational program on preventive measures. Clinical outcomes data including 6-minute Walk Test (6MWT), exercise training intensity and exercise stress test were evaluated.

RESULTS:

72 patients (62 Male and 10 female) with moderate risk were recruited with mean age of 60 years old \pm SD9.8. They received 11 training sessions on average. Distance of 6MWT showed improvement from 410m to 505m ($p < 0.0001$). Exercise stress test result improved from 5.1 METS to 6.6 METS ($p < 0.0001$) and the exercise training intensity improved from 3.1 METS to 5.0 METS ($p < 0.0001$).

CONCLUSION:

The new hospital-based and community-based model of care demonstrated clinical effectiveness in patients with moderate risk in terms of improvement in health fitness. This model illustrated the benefits of community re-integration and collaboration between private and public counterparts for more efficient resource utilization.