Abstracts

THE IMPACT OF CO-MORBIDITIES ON CARDIAC REHABILITATION OUTCOMES AT THE ROYAL WOLVERHAMPTON NHS TRUST

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Background The 2019 UK NACR reported that approximately 50% of all 6,502 patients referred for cardiac rehabilitation (CR) had two or more comorbidities. Patients with multiple co-morbidities are at higher risk of dying prematurely, hospital admissions, increased length of stay in hospital, and poor health-related quality of life than patients with only one chronic medical condition.

Aim To explore the efficacy of exercise rehabilitation in patients with coronary heart disease plus multimorbidity attending a CR programme in an area of deprivation.

Methods Using a repeated-measures t-test, and an independent t-test, retrospective 2021/22 data from 72 patients completing a phase 3 CR exercise programme was analysed to compare outcome measures pre and post an 8-week course of supervised exercise in patients with zero to one comorbidity (Group 1; n = 36) with patients with two or more comorbidities (Group 2; n = 36).

Results Both groups had a significant improvement in METS post exercise (Table 1). However, Group 2 had significantly lower METS on submaximal exercise tolerance test (SETT) at baseline and post exercise (Table 1). There was a significant improvement in Duke Activity Status Index scores in both groups (Group 1: A1 21.10, A 2 35.30, p < .001; Group 2: A1 19.80, A2 31.10, p < .001) post exercise intervention. There were no differences between groups. Group 2 had significantly higher BMI pre (Group 1 28.0 kg/m², Group 2 31.1kg/m²; p = .036) and post (Group 1 28.1kg/m², Group 2 30.8g/m²; p = .048) exercise intervention.

Conclusion Patients with multiple co-morbidities had a lower baseline for functional capacity and less favourable body composition, but still benefited from CR. Although multimorbidity may be a challenge for traditional CR services, referral to CR should be encouraged for all patients, either with or without comorbidities.

PATIENT MOTIVATIONS TO ATTEND EXERCISE BASED CARDIAC REHABILITATION IN NORTH EAST WALES

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Background The physical benefits of exercise based cardiac rehabilitation (EBCR) are well documented within research. In addition to improvements in cardiovascular (CV) and muscular-skeletal (MSK) fitness; EBCR aims to improve patient confidence in performing safe and effective exercise and provide education around correct monitoring of exercise intensity.

Aim To review motivations for EBCR attendance in our catchment area with the aim to develop the exercise component of cardiac rehabilitation (CR) and improve patient-centred care.

Methods Patients (n=40) of mixed demographics and varied cardiac diagnoses were asked to voluntarily complete a questionnaire at the end of their eight-week EBCR; between the months of April and September 2023. The questionnaire, designed by CR staff included five questions to be scored using a Likert scale. The aim was for patients to rate in order of priority; their main reasons for attending EBCR. They were then asked if they saw improvements in their CV and MSK fitness, confidence, exercise knowledge and if they felt their exercise programme had catered to their personal goals.

Results Data collected showed that improving health was the main priority for 80% patients attending EBCR. Improving CV fitness and MSK strength were the second and third priority followed by increasing energy levels and improving self-confidence. The least commonly selected were socialising and improving sleep quality. 86% patients agreed that their confidence around performing safe and effective exercise was improved. 90% of patients agreed that their knowledge around the benefits of exercise and correct monitoring of intensity were improved. All patients agreed that their exercise programme catered to their individual goals.

Conclusion EBCR can have positive improvements on patients’ health and self-confidence, not only improvements in physical fitness. Data shows us that our current EBCR is patient-centred and effective in improving patient’s confidence and knowledge around exercise.