

Heart needs work after heart attack: Study challenges the notion that the heart must rest

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A new study by researchers at the University of Alberta shows that for best results in stable patients after a heart attack, early exercise as well as prolonged exercise is the key to the best outcomes.

Study co-authors Mark Haykowsky, researcher in the Faculty of Rehabilitation Medicine, and Alex Clark, researcher in the Faculty of Nursing, along with fellow U of A researchers Don Schopflocher in the School of Public Health and Ian Paterson in the Faculty of Medicine & Dentistry, as well as colleagues from Duke, Stanford and UBC, reviewed more than 20 years of trials. The team found that stable patients who have suffered heart attacks get more benefits for heart performance when starting an [exercise program](#) one week after the heart attack, than waiting a month or longer to begin rehabilitation.

“While it’s been shown that exercise has a favourable effect on heart function, it’s also important to dispel the idea that what the heart needs is rest,” said Haykowsky.

The study shows that, in fact, the heart will become better with exercise sooner and with continued exercise over a longer period of time.

“In the past, patients in Canada and the US have been told to wait for one month before beginning their exercise treatment and this treatment typically only goes on for about three months,” said Clark.

Patients who begin an exercise program one week after their heart attack

were found to have the best heart performance. For those who waited to begin their exercise rehabilitation program, the results showed that “for every week that a patient delayed his or her exercise treatment, he or she would have to train for the equivalent of one month longer to get similar benefits,” said Clark. “Our findings suggest that at least six months of exercise is the most beneficial.”

Exercise in this study is defined as aerobic exercise in a group setting to build up exercise capacity.

The researchers reviewed both benefits and harms of exercise. The authors say there was no evidence in the study to suggest that beginning an exercise program earlier than the typical waiting period had any detrimental effects.

“In the 70’s, health-care professionals were telling patients not to move for three months after a heart attack. Our findings suggest that stable patients need not wait a month to start exercising in a cardiac-rehabilitation setting,” said Clark.

Given that, in Canada, only one third of patients are referred to rehabilitation after a [heart attack](#) and then only 20 per cent then attend, Haykowsky says the key to the best outcome is for patients to not only get referred to rehabilitation, but to be referred early, participate and stick with it.

“[Exercise](#) is a wonder drug that hasn’t been bottled,” he said.

More information: The study was recently published in the online journal *Trials*.

Provided by University of Alberta

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