

Argument for coverage of cardiac rehab, counseling for stable CHF

November 7 2013



(HealthDay)—Cardiac rehabilitation (CR) exercise training and chronic heart failure self-care counseling provide significant clinical benefits to individuals with stable chronic heart failure, according to a review published Oct. 30 in the *Journal of the American College of Cardiology: Heart Failure.*

Philip A. Ades, M.D., from the University of Vermont College of Medicine in Burlington, and colleagues reviewed current evidence on the benefits and risks of CR exercise training and self-care counseling in patients with <u>chronic heart failure</u>.

The researchers identified consistent improvements in chronic <u>heart</u> <u>failure</u> symptoms in addition to reductions in cardiac mortality and the number of hospitalizations in systematic reviews and meta-analyses of CR exercise training alone (without counseling). However, individual



trials have been less conclusive regarding reductions in <u>cardiac mortality</u> and hospitalizations. The Heart Failure: A Controlled Trial Investigating Outcomes of Exercise Training, the largest single trial, showed a reduction in the adjusted risk for the combined end point of all-cause mortality or hospitalization (hazard ratio: 0.89; P = 0.03) as well as improvements in quality of life and mental depression. Clinical outcomes were improved and chronic heart failure-related hospitalizations reduced with chronic heart failure-related counseling, whether provided in isolation or in combination with CR exercise training.

"Third-party payers should provide medical insurance coverage for supervised CR for appropriately-selected patients with stable chronic heart failure," the authors write.

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Citation: Argument for coverage of cardiac rehab, counseling for stable CHF (2013, November 7) retrieved 6 May 2024 from https://medicalxpress.com/news/2013-11-argument-coverage-cardiac-rehab-stable.html

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