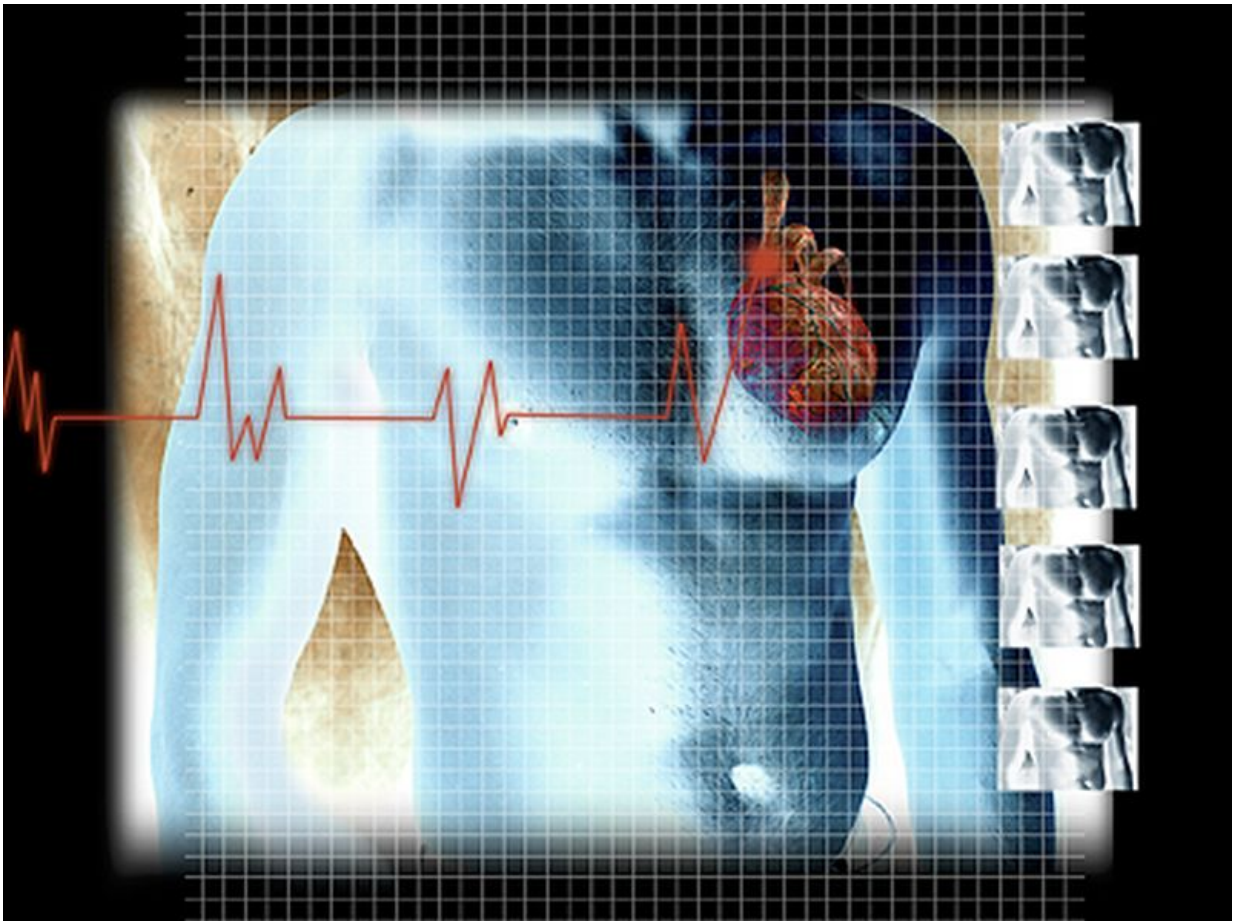


Cardiac rehabilitation does not up health status after AMI

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(HealthDay)—Participation in cardiac rehabilitation (CR) does not

improve reported health status during the year following acute myocardial infarction (AMI); however, participation in CR does confer a significant survival benefit, according to a study published online Oct. 19 in *JAMA Cardiology*.

Faraz Kureshi, M.D., from Saint Luke's Mid America Heart Institute in Kansas City, Mo., and colleagues examined the correlation between participation in CR with health status outcomes after AMI in a [retrospective cohort study](#) of patients enrolled in two AMI registries. The analytic cohort was restricted to 4,929 patients.

The researchers found that the 2,012 patients participating in CR and the 2,894 who did not participate had similar mean differences in the Seattle Angina Questionnaire and 12-Item Short-Form Health Survey at six and 12 months. For all-cause mortality associated with CR participation the hazard ratio was 0.59.

"In a cohort of 4,929 patients with AMI, we found that those who did and did not participate in CR had similar reported health status during the year following AMI; however, participation in CR did confer a significant survival benefit," the authors write. "These findings underscore the need for increased use of validated patient-reported outcome measures to further examine if and how health status can be maximized for patients who participate in CR."

One author disclosed holding a copyright of the Seattle Angina Questionnaire; the study was funded by CV Therapeutics.

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