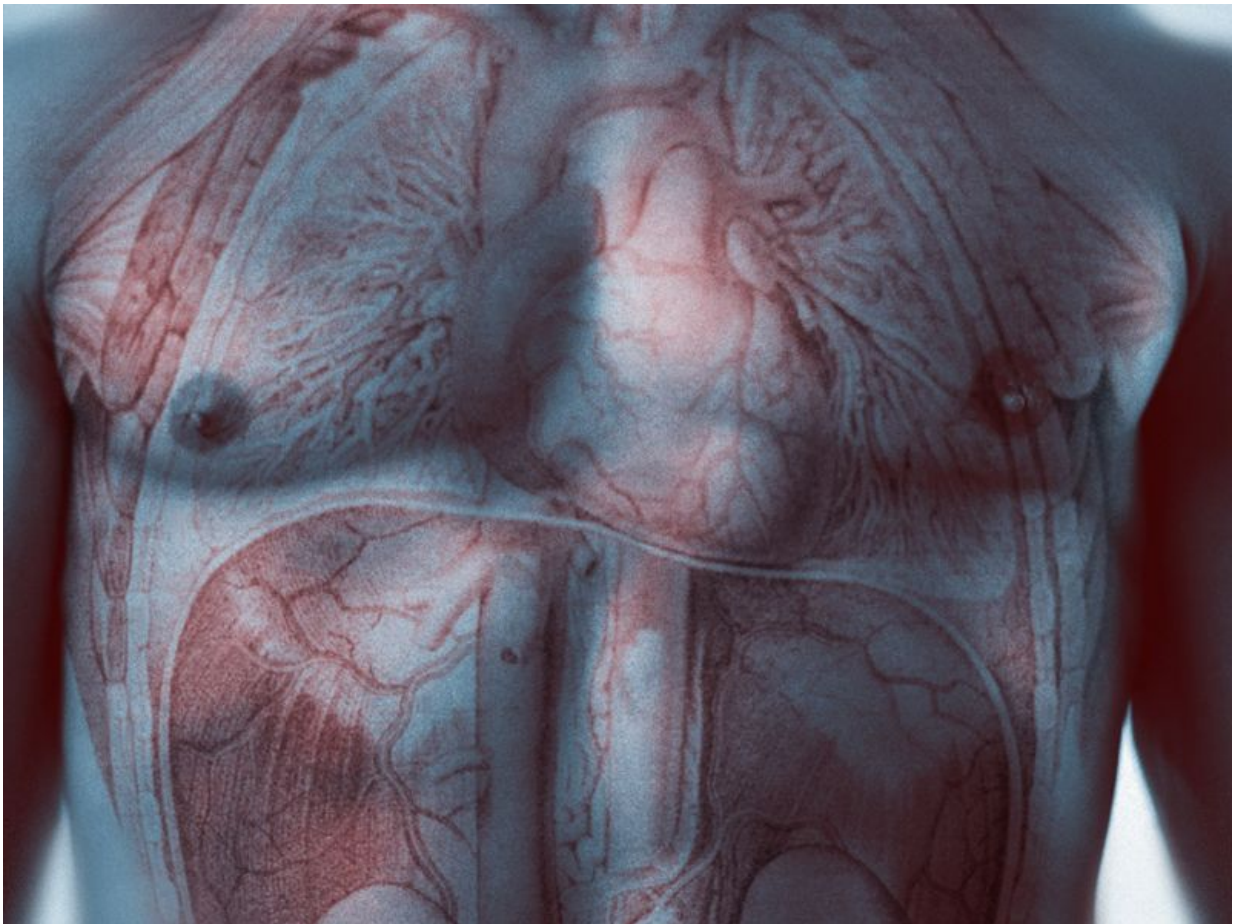


# Exercise capacity prognostically beneficial for patients

April 10 2017

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(HealthDay)—Cardiopulmonary exercise testing, unless contraindicated,

should be performed to obtain an overall view of cardiac and pulmonary patients' clinical status, according to a review published online March 31 in the *Annals of the American Thoracic Society*.

Stefania Paolillo, M.D., Ph.D., from IRCCS SDN, and Piergiuseppe Agostoni, M.D., Ph.D., from Centro Cardiologico Monzino, both in Italy, address the role of cardiopulmonary exercise for risk stratification in the care of cardiac and pulmonary disorders.

The researchers note that the cardiopulmonary exercise test is a useful prognostic tool for evaluation of several pathological conditions. A cardiopulmonary test should always be performed if not contraindicated; to better stratify patient risk, it should be integrated with clinical, laboratory, and hemodynamic parameters. The cardiopulmonary exercise test is important in all stages of patient management in heart failure, from diagnosis to risk assessment. When included in a multiparametric [risk stratification](#) methodology, the prognostic role of cardiopulmonary exercise test in [heart failure](#) is amplified. Cardiopulmonary exercise test parameters may help assess the risk of adverse events in respiratory disorders and pulmonary hypertension. The cardiopulmonary exercise test may also help identify the presence of concurrent cardiac and respiratory disorders.

"An integrated multiparametric approach also taking into account cardiopulmonary exercise test variables should always be considered, as long as it is not contraindicated, to stratify the risk of [adverse events](#) and to provide measures of survival improvement in these specific populations," the authors write.

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