

# Research highlights cost effectiveness of cardiac rehabilitation

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Rehabilitation programmes help heart failure patients to take control of their condition and improve their quality of life. Credit: University of York

The study, carried out in partnership with the British Heart Foundation and the National Institute for Health Research, adds to the significant evidence base that underscores the benefits and cost effectiveness of CR.

As highlighted in the NHS' Long Term Plan, CR should be seen as a priority and receive the appropriate investment, the authors of the study say.

The research, published in the *European Journal of Preventive Cardiology*, showed that CR can benefit somebody who has had a significant [heart](#) event regardless of socioeconomic inequalities such as profession, income and the neighbourhood in which they live.

However, the research showed that despite its cost effectiveness, CR uptake is consistently poor, with figures ranging from 10% to 60% globally.

## Tailored support

Professor Patrick Doherty, from the Department of Health Sciences at the University of York, said: "These findings show that socioeconomic status needs to be taken into account when thinking about funding for CR.

"We know that these programmes are effective, but we also know that not enough people are accessing them. Whether it is the comfort of their own home or at a centre, we must now work to ensure that everybody who is eligible for CR takes the opportunity."

CR is a comprehensive intervention recommended by NICE for people after they have a significant heart event, such as a heart attack, heart surgery or heart failure. It is also available to some people who have angina. Programmes aim to help patients to understand their conditions and recover from their experience by providing tailored lifestyle support and advice—such as on diets, exercise and [mental health](#)—to enable effective management of their condition over the long term to improve heart and circulatory health.

## Life saving

Programmes, delivered in centres or a patient's home, have been proven to reduce a person's chances of further complications after a heart or circulatory event. This research supports previous evidence that CR improves quality of life and further reduces mortality, morbidity, and unplanned hospital admissions.

Jacob West, Head of Healthcare Innovation at the British Heart Foundation, said: "Put simply, cardiac rehabilitation saves lives. But there is a worryingly low uptake.

"This evidence supports the need for investment and a new approach to how we reach out to encourage people to attend CR programmes, especially groups of people where uptake is low.

"While there are some services that are already beginning to think outside the box to make CR more attractive, we need to go the extra mile to think about how we can use new innovations to remove barriers.

"Making use of technologies, such as [smart phones](#) and online programmes, could help ensure that more people eligible for CR can access it. We should also consider where are the best places in [local communities](#) to offer services by working with leisure and community services."

**More information:** Rod S Taylor et al. The cost effectiveness of REACH-HF and home-based cardiac rehabilitation compared with the usual medical care for heart failure with reduced ejection fraction: A decision model-based analysis, *European Journal of Preventive Cardiology* (2019). [DOI: 10.1177/2047487319833507](https://doi.org/10.1177/2047487319833507)

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