

Decline in number of people receiving lifeenhancing cardiac rehabilitation in pandemic

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The number of people engaging with life-enhancing cardiac rehabilitation clinics has declined during the pandemic, according to a *BMJ* clinical update which makes the case for more home-based and virtual alternatives.

Before the COVID-19 pandemic, 100,000 people were admitted to



hospital with heart attacks and approximately 200,000 were diagnosed with heart failure annually in the UK. There was a 40% decline in the number of patients admitted with heart attacks (acute coronary syndromes) in 2020.

Cardiac rehabilitation is crucial to helping people who have encountered a heart attack or heart failure have a better quality of life. Now, a new review, undertaken by cardiac rehabilitation experts based at the Universities of Exeter, Glasgow and York and published in the *BMJ*, reports that the number of people with heart failure attending UK clinics dropped from an already low ten percent (4,969 patients) of those eligible pre-pandemic, to just five percent (1,474). The review attributes the drop to many vulnerable people shielding, and many rehabilitation clinics closing during this period because of staff redeployment to respond to the pandemic.

A British Heart Foundation (BHF) National Audit of Cardiac Rehabilitation COVID-19 analysis published in 2020 mirrored other cardiac audits, showing a 30-40 percent decrease in use of cardiology and <u>rehabilitation services</u> due to the pandemic compared with a similar period in 2019.

However, the number of people taking up home-based rehabilitation options has more than trebled over the same <u>time period</u>, rising from 22 to 74 percent—strengthening the case for the use of more evidence-based programs in this field to be rolled out.

Dr. Hasnain Dalal, of the University of Exeter, co-authored the review. He said: "Cardiac rehabilitation can enhance quality of life and reduce unplanned hospital admissions, yet uptake has been low, and has plummeted throughout the pandemic, creating a backlog. We know that home-based cardiac rehabilitation can work well for patients, and COVID-19 has provided an opportunity to reimagine how we delivery



rehabilitation. Offering patients a choice of <u>rehabilitation</u> in clinics or at home—or a combination of both could help improve the numbers who can participate in the future".

Provided by University of Exeter

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