No racial difference in prognostic value of cardiorespiratory fitness

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Cardiorespiratory fitness (CRF) predicts all-cause mortality, with no racial differences in its prognostic value, according to a study published in the May 1 issue of The American Journal of Cardiology.

Mouaz H. Al-Mallah, M.D., from the Henry Ford Hospital in Detroit, and colleagues analyzed data from 53,876 patients from the Henry Ford Exercise Testing project without established coronary disease or heart failure who completed a maximal exercise test from 1991 to 2009. Participants were followed for a mean of 11.5 years for all-cause mortality and for a mean of 6.2 years for incident myocardial infarction.

The researchers found that the 16,725 black patients were younger but had higher prevalence of obesity and hypertension (all P mortality risk was seen with decreasing CRF. In multivariate analysis, CRF predicted both myocardial infarction and mortality; there was no significant interaction for race, fitness, and outcomes (all interaction terms, P > 0.10).

“CRF is a strong predictor of all-cause mortality in both white and black patients, with no significant interaction observed between race, fitness, and outcomes,” the authors write.

More information: Abstract
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