CHARACTERIZATION OF PATIENTS ADMITTED TO CARDIAC REHABILITATION PROGRAM

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INTRODUÇÃO
Cardiovascular disease (CVD) is the leading cause of death in Europe, including Portugal. In Portugal, only 10% of patients with post-acute coronary syndrome (ACS) are admitted to cardiovascular rehabilitation program (CRP) (1). Referral to CRP is a class I recommendation for all patients with coronary artery disease based on findings that participation can reduce cardiovascular and all-cause mortality, as well as improve functional capacity and quality of life (2).

PURPOSE
To characterize the patients who participated in the first three years of Hospital Garcia de Orta's cardiac reconditioning program in terms of key demographic variables and the prevalence of common risk factors.

METHODS
A transversal, descriptive study of patients admitted to CRP during the first three years of existence in Hospital Garcia de Orta. The following parameters were analyzed: age, gender, admission diagnosis and risk factors for CVD - hypertension, diabetes mellitus, dyslipidemia, increased body mass index, smoking and family history of CVD. This study follows all the principles of the Declaration of Helsinki.

RESULTS
Fifty-seven patients were admitted with a mean age of 53 (32-79) years old, predominantly male (74%). Fifty-five were admitted after ACS (fifty-three status after PCI and two status after CABG), one after valvular replacement surgery and one with heart failure class III (NYHA). The following diagrams illustrate the distribution of gender, blood pressure, body mass index, admission diagnosis, CVD family history, diabetes, lipid profile, smoking habits, and LDL, HDL, total cholesterol, triglycerides levels.

DISCUSSION
During this period only 57 patients were admitted, mainly due to a lack of staff, resources and infrastructures. Our CRP is expanding, foreseeing a greater admission of eligible patients in the future.

In spite of the small sample size we observe a high prevalence of CVD risk factors among our patient which is consistent with the data from literature. Thus referral to CRP is crucial as they include several strategies which aim to reduce CVD risk factors and therefore the reduce of cardiovascular disease morbi-mortality.

REFERENCES