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PRESS RELEASE

April 4, 2011

Referrals to cardiac rehabilitation could save lives

Winnipeg—Healthcare providers should refer heart patients to cardiac rehabilitation to help reduce the risk of death and improve quality of life, say researchers from the Canadian Association of Cardiac Rehabilitation (CACR) and Canadian Cardiovascular Society (CCS).

Participating in cardiac rehabilitation after a cardiac illness, such as a heart attack, can reduce a patient's risk of death by approximately 25 per cent. This risk reduction is similar to that of other standard therapies, such as cholesterol-lowering medications (statins) and aspirin. In spite of this evidence, only 20 to 30 per cent of patients are referred to a cardiac rehabilitation program after hospital discharge.

The joint policy position, *Systematizing Inpatient Referral to Cardiac Rehabilitation*, was published in the [Canadian Journal of Cardiology](#) and the [Journal of Cardiopulmonary Rehabilitation and Prevention](#).

CACR and CCS researchers reviewed evidence on multiple strategies to increase referrals to cardiac rehabilitation. These included: a discharge checklist for doctors; electronic referral in medical records; bedside-discussions with patients; and even a motivational letter for patients.

The researchers recommend a combined approach – a checklist or electronic referral and talking with patients.

“Every patient discharged from the hospital with a heart condition should be referred to a cardiac rehab program,” says Dr. Sherry Grace, of York University and University Health Network, Toronto, who chaired the Position Statement Committee.

“Our rigorous review of the evidence shows we have the tools to ensure 70 per cent of these referred patients enroll. So this is now our national target,” says Dr. Grace.

Cardiac rehabilitation offers a comprehensive approach to health by combining medical treatments and lifestyle modification. Patients are able to benefit from a variety of services, including: education sessions, nutritional assessment with a dietitian, risk factor treatment

(hypertension, cholesterol and smoking cessation) by physicians and nurses, medication review with a pharmacist, targeted exercise prescription by an exercise physiologist, and supervised exercise by kinesiologists.

Dr. Bob Reid, President of the CACR and Associate Director of the Minto Prevention and Rehabilitation Centre of the University of Ottawa Heart Institute, calls for immediate action to address the low use of cardiac rehabilitation in Canada by using proven referral strategies to increase patient enrollment.

“We look forward to implementing the recommendations in this policy position,” says Dr. Reid, “A national review of the need, supply and financing of cardiac rehab in Canada is necessary.”

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Canadian Association of Cardiac Rehabilitation

[The Canadian Association of Cardiac Rehabilitation](http://www.cacr.ca) (CACR) is the national leader of cardiovascular disease prevention and rehabilitation. The CACR creates and applies multidisciplinary knowledge to improve best practice in cardiac rehabilitation including chronic diseases. Over 50,000 people are treated annually in Cardiac Rehabilitation multi-disciplinary programs across Canada available by searching the program directory on the CACR website (www.cacr.ca). CACR is known for extensive guidelines for cardiac rehabilitation and secondary prevention. CACR's Canadian Cardiac Rehab Registry may have one of the largest impacts on the field as it is unique in its collection and analysis of real time and outcomes data that will improve patient care and aid people in their recovery from a cardiac event.

About the Canadian Cardiovascular Society

[The Canadian Cardiovascular Society](http://www.ccs.ca) (CCS) is the national voice for cardiovascular physicians and scientists and is more than 1900 members strong. The CCS mission is to promote cardiovascular health and care through: knowledge translation, including dissemination of research and encouragement of best practices; professional development; and leadership in health policy.

For more information

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