



# Will Exercise Prescription via Metabolic Equivalents Improve Six-Minute Walk Distance of Patients Undergoing Cardiac Rehabilitation?

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Research

**Clinical Care** 

Education



### **Benefits of Cardiac Rehabilitation**









### **Frequency**

## Intensity





# Intensity

Intensity	%HRR	%HR <sub>max</sub>	RPE (6 – 20 scale)	METs
Light	30 – 39	57 – 63	9 — 11	2.0 – 2.9
Moderate	40 – 59	64 – 75	12 – 13	3.0 – 5.9
Vigorous	60 – 89	76 – 95	14 – 17	6.0 – 8.7

American College of Sports Medicine. (2013). ACSM's guidelines for exercise testing and prescription. Baltimore, MD: Lippincott Williams and Wilkins.

# **Participants/Methods**

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> "This treadmill is so high-tech, you burn 100 calories just selecting your workout program!"

### Participants





# Participants





- Percutaneous Coronary Intervention
- Coronary Artery Bypass Graft
- Valve Surgery



### Methods

Intervention Group	Control Group
Prescribed individual aerobic exercise via Metabolic Equivalents (METs)	Prescribed individual aerobic exercise via maximum Heart Rate (HRmax)

Primary outcome measure was the Six-Minute Walk Test (6MWT) conducted on the first and twelfth session.







### Methods





# Methods











	Intervention Group	Control Group	
Age (years)	57 ± 10	58 ± 10	
<b>BMI</b> (kg⋅m⁻²)	26.0 ± 4.7	22.8 ± 3.7	
Male	16		
Female	3		

# Results

- Significant improvement (*p* = 0.0005) in pre and post-6MWT within intervention and control group.
- Exercise prescription via METs led to similar 6MWT distance improvements when compared with exercise prescription via HRmax (p = 0.86).



### Results

SF36v2	Pre CR Scores	Post CR Scores	p-value
Physical Function	45.45 ± 6.66	52.60 ± 2.95	0.001
Role-Physical	44.04 ± 10.08	47.58 ± 7.74	0.11
Bodily Pain	$50.39 \pm 7.49$	52.77 ± 8.20	0.09
General Health	50.41 ± 8.58	55.66 ± 7.85	0.001
Vitality	50.25 ± 8.02	56.66 ± 7.68	0.01
Social Functioning	44.94 ± 7.35	50.48 ± 7.88	0.004
Role-Emotional	45.36 ± 11.37	46.46 ± 9.75	0.92
Mental Health	51.28 ± 7.81	53.07 ± 9.68	0.43

## Results

• CR resulted in improvements in physical component score (p = 0.001) but not mental health score (p = 0.32).



 Improvement in 6MWT distance was similar when exercise was prescribed via HRmax or METs.

- Moderate inverse correlation between initial 6MWT distance and distance improved post Cardiac Rehabilitation
- Lower physical function = greater improvement in 6MWT distance
- Ceiling effect' may occur in participants with higher pre-6MWT distance

Currently using Heart Rate Walking Speed Index (HRWSI) to explain improvement

#### **Improvement of HRWSI: 1.60 to 1.40**

 Compare METs value to estimated energy requirements for tasks of daily living or sports.



### **Improved METs from 4 to 6.5**



- Cardiac Rehabilitation improves Physical but not Mental Health-Related Quality of Life.
- Modest correlation between relative distance improved in 6MWT and relative improvement in Physical Component Score
- Availability of normative scores in Singapore
- Early identification and justification of psychosocial assistance



## Summary

Metabolic Equivalents

### Maximum Heart Rate



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# Questions







### Thank you for your attention



