8th Cardiopulmonary Rehabilitation Workshop

Evidences from Asan Medical Center Cardiac Rehabilitation Registry

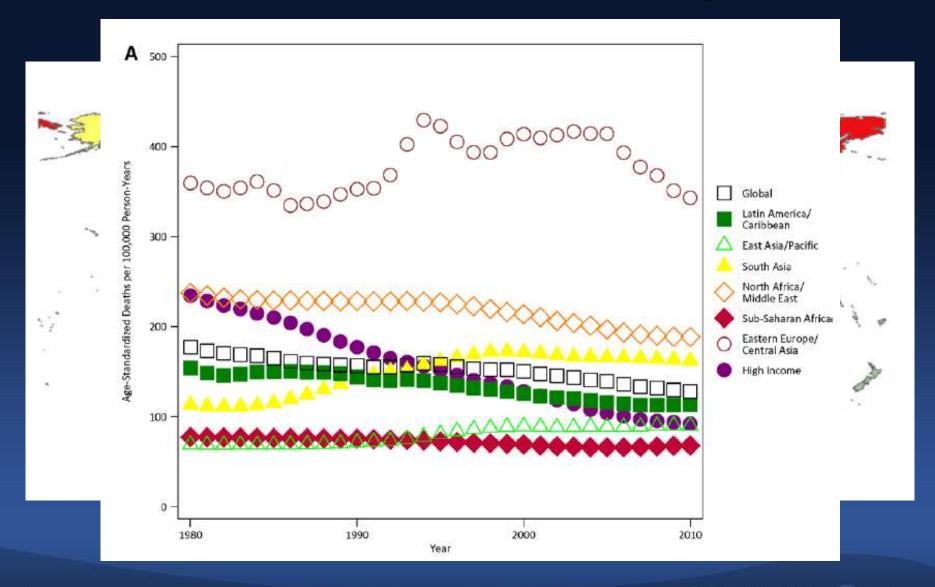
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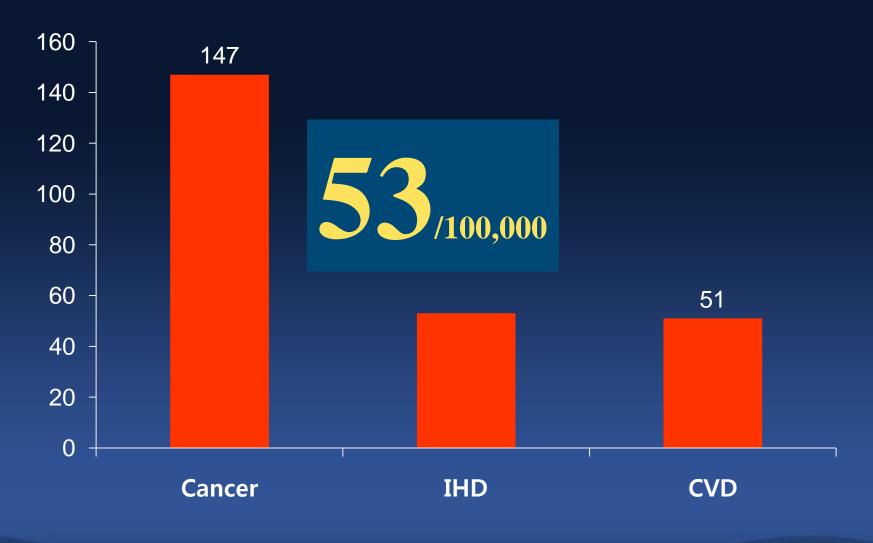
Ischemic Heart Disease Mortality in Asia



Andrew E. Moran et al. Circulation. 2014;129:1483-1492

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Ischemic Heart Disease Mortality in Korea



National Statistical Office (2012 data)





Cardiac Rehab in Korea

Only intervention or surgery is not perfect. For relieving the ischemic burden, management with comprehensive approach like cardiac rehab

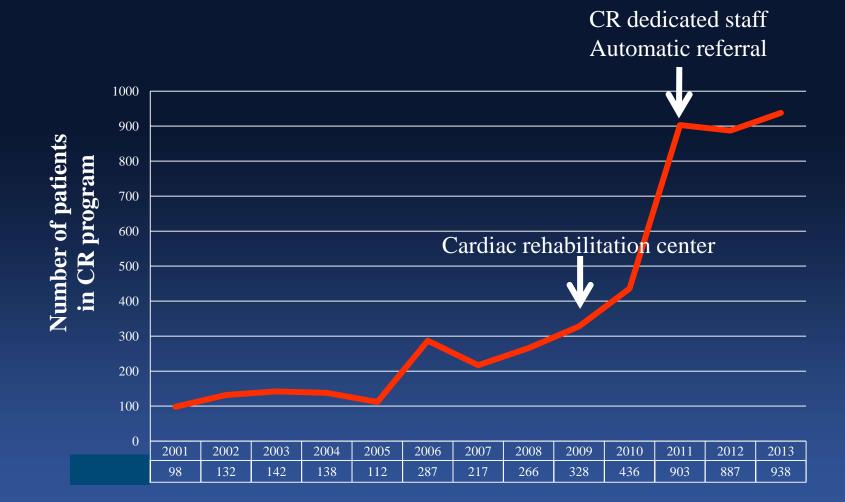
- Strongly recommended for cardiac disease as class I-A
- Under-recognized and under-utilized
- Not much interest among majority of cardiologist, especially interventionist or cardiac surgeon
- No sufficient chances to experience cardiac rehab.
- Not reimbursed by insurance policy (government)







Retrace the Course of AMC's Cardiac Rehab



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Current Candidate for Cardiac Rehab

- Ischemic heart disease (medical, PCI, CABG)
- TAVI
- Heart failure
- Pacemaker and ICD
- Primary prevention for high risk profile
- Peripheral artery disease (PTA, bypass surgery)
- Heart transplantation (pending)





Looking for Corroborative Evidences

Analysis of Asan Medical Center CR registry

• Impact of cardiac rehab, for

Drug-eluting stenting in long coronary lesions

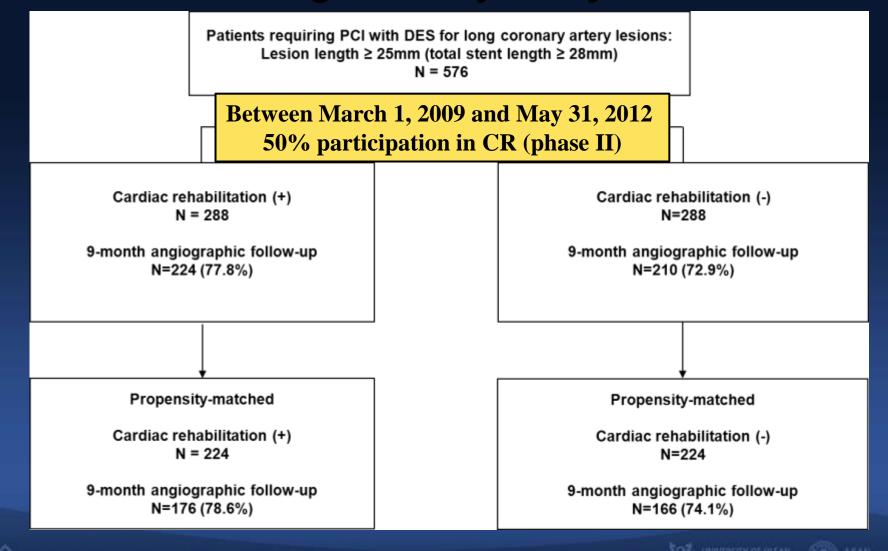
Left main coronary artery stenosis

Coronary artery bypass graft surgery

Identifying influencing factors in participation in cardiac rehab



Impact of Cardiac Rehabilitation on Angiographic Outcomes after Drug-eluting Stents in Patients with De Novo Long Coronary Artery Lesions



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JY Lee, SJ Park. Am J Cardiol. 2014; Epub ahead of print

Baseline characteristics

	Cr	ude	Propensity-matched			
	Cardiac Non-cardiac		Cardiac	Non-cardiac		
	rehabilitation	rehabilitation	rehabilitation	rehabilitation		
Characteristics	(288 Patients)	(288 Patients)	(224 Patients)	(224 Patients)		
Age (years)	60.0±9.1	61.2±9.5	60.8±8.5	60.9±9.5		
Height (cm)	164.3±9.3	163.4±12.6	164.6±8.5	163.6±8.2		
Weight (kilograms)	68.0±9.9	68.7±10.4	68.93±9.8	67.7±10.1		
Body mass index (kilogram/m ²)	25.0±2.8	25.5±2.8	25.4±2.8	25.2±2.8		
Obesity	136 (47.2%)	152 (52.8%)	112 (50.0%)	113 (50.4%)		
Male gender	217 (75.3%)	229 (79.5%)	175 (78.1%)	171 (76.3%)		
Diabetes mellitus	72 (25.0%)	79 (27.4%)	60 (26.8%)	58 (25.9%)		
Hypertension	129 (44.8%)	117 (40.6%)	129 (57.6%)	127 (56.7%)		
Hyperlipidemia	200 (69.4%)	194 (67.4%)	130 (58.0%)	114 (50.9%)		
Current smoker	74 (25.7%)	87 (30.2%)	89 (39.7%)	93 (41.7%)		
Family history of	25(12,20/)	30 (10.5%)	25(11,20/)	22(0.80/)		
coronary artery disease	35 (12.2%)	30 (10.3%)	25 (11.2%)	22 (9.8%)		
Previous coronary angioplasty	14 (4.9%)	34 (11.8%)	12 (5.4%)	16 (7.1%)		
Previous stroke	8 (2.8%)	13 (4.6%)	8 (3.6%)	6 (2.7%)		
Previous myocardial infarction	1 (0.3%)	10 (3.5%)	1 (0.4%)	1 (0.4%)		
Left ventricular ejection fraction (%)	59.9±5.4	59.8±6.9	59.88±5.5	59.6±6.5		
Multi-vessel disease	126 (43.8%)	145 (50.3%)	109 (48.7%)	105 (46.9%)		
Clinical indication						
Stable angina	105(67.70/)		156 (60 69/)	152 (69 20/)		
or silent ischemia	195 (67.7%)	209 (72.6%)	156 (69.6%)	153 (68.3%)		
Unstable angina	69 (24.0%)	57 (19.8%)	50 (22.3%)	54 (24.1%)		
Non-ST segment elevation myocardi al infarction	24 (8.3%)	22 (7.6%)	18 (8.0%)	17 (7.6%)		

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Procedural Characteristics

	Cr	ude	Propensity-matched			
	Cardiac	Non-cardiac	Cardiac	Non-cardiac		
	rehabilitation	rehabilitation	rehabilitation	rehabilitation		
Characteristics	(288 Patients)	(288 Patients)	(224 Patients)	(224 Patients)		
Lesion characteristics						
Target vessel						
Left anterior descending	194 (67.4%)	191 (66.3%)	118 (52.7%)	121 (54.0%)		
Left circumflex	26 (9.0%)	31 (10.8%)	56 (25.0%)	56 (25.0%)		
Right coronary	68 (23.6%)	66 (22.9%)	50 (22.3%)	47 (21.0%)		
Procedural characteristics						
Used drug-eluting stent						
Sirolimus-eluting stent (Cypher)	80 (27.8%)	79 (27.4%)	65 (29.0%)	61 (27.2%)		
Zotarolimus-eluting stent (Endeavor Re solute)	80 (27.9%)	78 (27.1%)	61 (27.2%)	69 (30.8%)		
Biolimus A9-eluting stent (Nobori)	65 (22.6%)	63 (21.9%)	49 (21.9%)	47 (21.0%)		
Everolimus-eluting stent (Promus Elem ent)	63 (21.9%)	68 (23.6%)	49 (21.9%)	47 (21.0%)		
Number of stents used at the target lesio						
n						
One stent	123 (42.7%)	124 (43.1%)	100 (44.6%)	102 (45.5%)		
Two stents	137 (47.6%)	129 (44.8%)	101 (45.1%)	99 (44.2%)		
Three stents	27 (9.4%)	32 (11.1%)	23 (10.3%)	20 (8.9%)		
Four stents	1 (0.3%)	3 (1.0%)	0	3 (1.3%)		
Mean	1.7±0.7	1.7±0.7	1.7±0.7	1.7±0.7		
Length of stents used at the target lesion (mm)	44.7±16.0	46.1±17.0	44.2±16.1	44.3±16.1		

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Results in physical & biochemical variables

Clinical Outcomes	Change¶	Р
	Difference (95% CI)*	
Current smoking	-7.59 (-12.62, -2.56)	0.046
Total cholesterol (mg/dL)	-6.58 (-13.77, 0.60)	0.072
Triglyceride (mg/dL)	-11.71 (-24.05, 0.64)	0.063
HDL-cholesterol (mg/dL)	2.10 (0.48, 3.71)	0.011
LDL-cholesterol (mg/dL)	-1.47 (-7.42, 4.49,)	0.629
hsCRP (mg/dL)	-0.08 (-0.16, 0.00)	0.042
HbA1C (%)	-0.93 (-1.47, -0.38)	0.001
Depression, moderate to severe	-11.16 (-17.41, -4.91)	<0.001
Body weight (kilograms)	-0.10 (-1.02, 0.82)	0.831
Obesity (body mass index >25)	-10.27 (-15.29, -5.24)	<0.001
VO ₂ max (ml/kg/min)	1.47±4.96	<0.001

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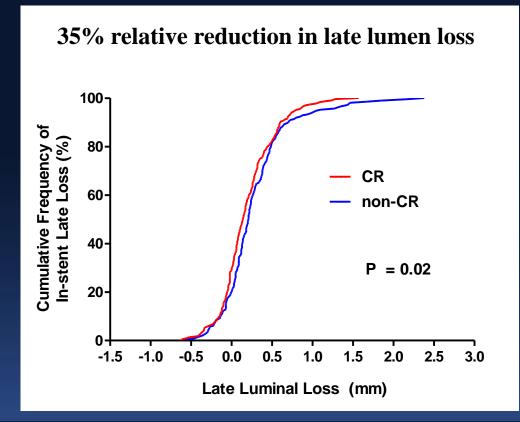
Results on angiographic outcomes

	Crude			Propensity-matched			
	Cardiac	Non-cardiac		Cardiac	Non-cardiac		
	rehabilitation	rehabilitation	Р	rehabilitation	rehabilitation	Р	
Characteristics	(288 Patients)	(288 Patients)		(224 Patients)	(224 Patients)		
Follow-up at 9 months,	224 (77.8%)	210 (72 00/)	0.21	176 (78.6)	166 (74.1)	0.26	
no. eligible patients (%)	224 (77.8%)	210 (72.9%)	0.21	1/0(/8.0)	166 (74.1)	0.20	
Late luminal loss (mm)							
In-segment	0.11±0.33	0.17±0.43	0.08	0.10±0.33	0.17±0.46	0.09	
In-stent (primary endpoint)	0.19±0.33	0.29±0.45	0.02	0.18±0.31	0.28±0.47	0.02	
Proximal margin	0.18±0.46	0.22 ± 0.42	0.45	0.19±0.48	0.21±0.41	0.69	
Distal margin	0.06 ± 0.27	0.08 ± 0.33	0.61	0.06 ± 0.28	0.07 ± 0.35	0.70	
Angiographic restenosis							
In-segment	12 (5.3%)	14 (6.6%)	0.48	8 (4.5%)	11 (6.6%)	0.47	
In-stent	8 (3.5%)	12 (5.7%)	0.24	5 (2.8%)	11 (6.6%)	0.12	
Proximal margin	4 (1.8%)	3 (1.4%)	0.82	4 (2.3%)	1 (0.6%)	0.37	
Distal margin	1 (0.5%)	2 (0.9%)	0.60	1 (0.6%)	1 (0.6%)	0.99	

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JY Lee, SJ Park. Am J Cardiol. 2014;Epub ahead of print

Cardiac Rehab. impact in long lesion



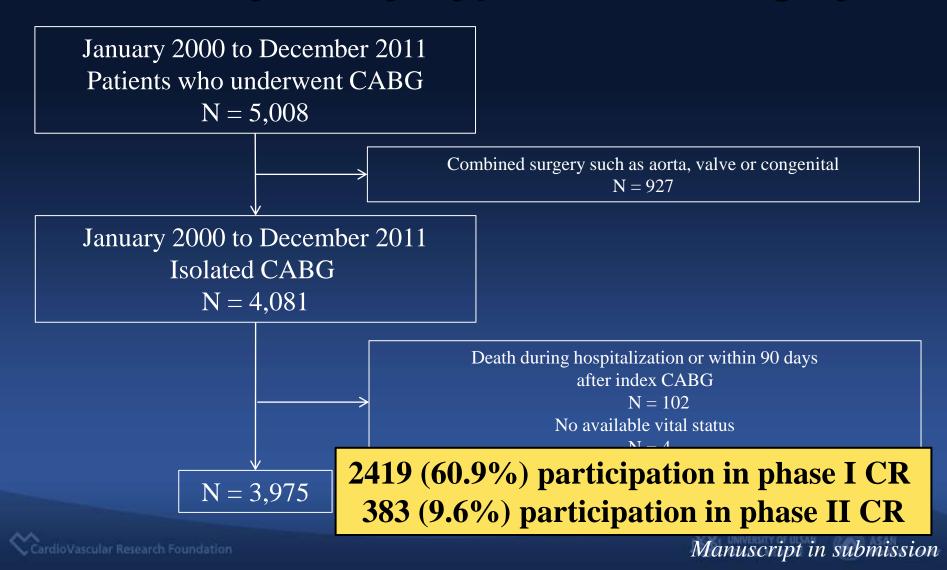
Difference, 0.10 mm; 95% confidence interval, 0.02 to 0.18; P=0.02

Outpatient cardiac rehab after PCI with DES for long lesions reduces in-stent late lumen loss while improving patient risk profile.

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JY Lee, SJ Park. Am J Cardiol. 2014; Epub ahead of print

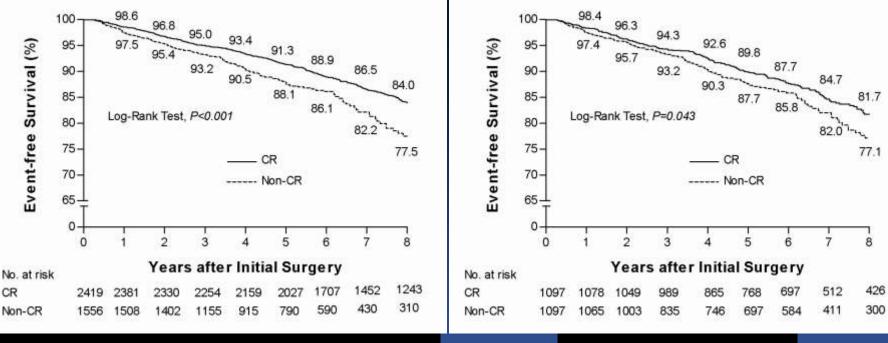
Impact of Participation in Cardiac Rehabilitation on Long-term Survival after Coronary Artery Bypass Graft Surgery



Impact of Participation in phase I CR for all-cause mortality

Crude cohort

Propensity-matched cohort



Multivariate adjusted HR 0.77 (0.64 to 0.93)

HR 0.80 (0.64 to 0.98)

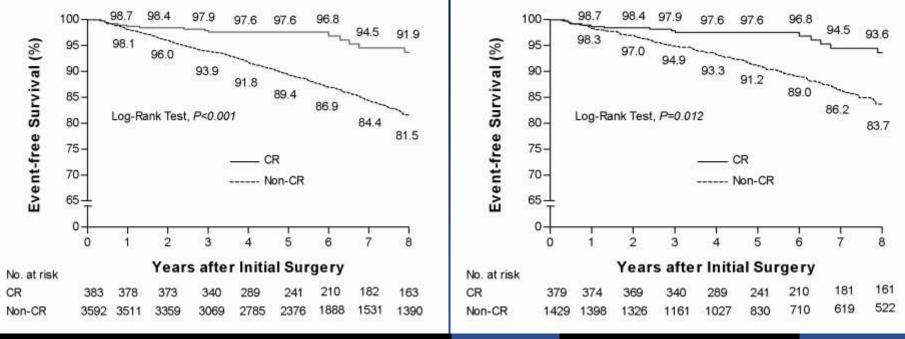
Manuscript in submission

20% of mortality reduction in phase I cardiac rehab

Impact of Participation in phase II CR for all-cause mortality

Crude cohort

Propensity-matched cohort



Multivariate adjusted HR 0.57 (0.39 to 0.84)

HR 0.60 (0.40 to 0.90)

Manuscript in submission

40% of mortality reduction in phase II cardiac rehab

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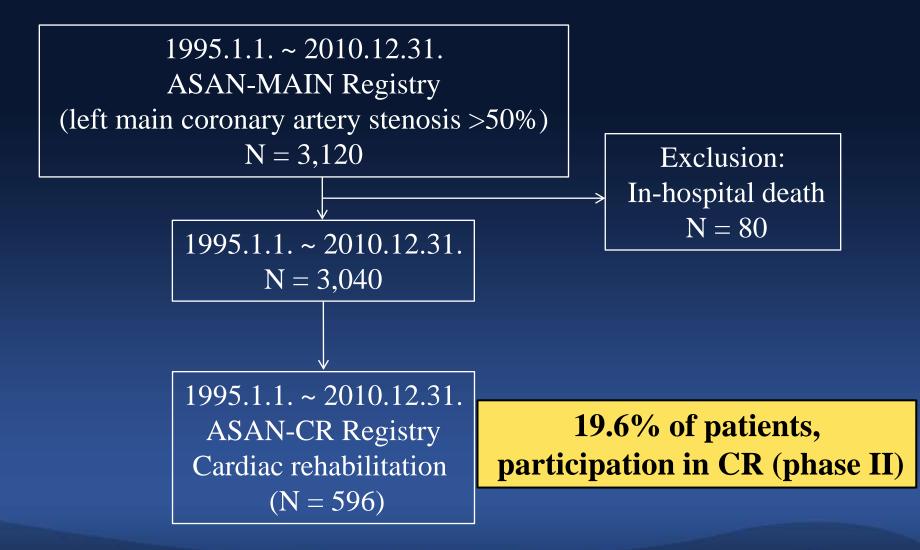
Impact of Participation in Cardiac Rehab after Coronary Artery Bypass Graft Surgery

- CR participation was significantly associated with 20% reduction in all-cause mortality after phase I CR during hospitalization and 40% reduction after phase II CR.
- Of these, 2419 (60.9%) participated in Phase I of CR while hospitalized, and 383 (9.6%) participated in Phase II of CR at an outpatient clinic.
- As well as phase II, earlier intervention in phase I CR could lead to better outcomes.





Cardiac Rehab in Left Main Coronary Artery Stenosis



Manuscript in process



Baseline Characteristics

	Overall cohort			Propensity-matched cohort		
	CR	Non CR	D	CR	Non CR	
Characteristics	(596 Patients)	(2444 Patients)	Р	(507 Patients)	(507 Patients)	
Age, years	62.8±10.3	62.4±10.5	0.47	63.0±10.2	63.3±10.4	
Body mass index, kg/m ²	24.5±2.7	24.5±2.9	0.73	24.5±2.8	24.5±2.7	
Obesity	241 (39.2)	994 (41.4)	0.32	196 (38.7)	204 (40.6)	
Male gender, number (%)	454 (76.2)	1780 (72.9)	0.11	383 (75.5)	385 (75.9)	
Diabetes mellitus, number (%)	221 (37.1)	851 (34.9)	0.34	185 (36.5)	186 (36.8)	
Hypertension, number (%)	368 (61.7)	1372 (56.3)	0.02	316 (62.3)	303 (60.0)	
Hyperlipidemia, number (%)	307 (51.5)	1034 (42.4)	< 0.001	256 (50.5)	256 (50.7)	
Current smoker, number (%)	152 (25.5)	694 (28.5)	0.15	133 (26.2)	126 (25.0)	
Family history of CAD, number (%)	55 (9.2)	243 (10.0)	0.65	47 (9.3)	53 (10.5)	
Previous coronary angioplasty, number (%)	119 (20.0)	358 (14.7)	0.002	100 (19.7)	101 (20.0)	
Previous stroke, number (%)	46 (7.7)	207 (8.5)	0.62	43 (8.5)	44 (8.7)	
Previous MI, number (%)	60 (10.1)	101 (10.5)	0.86	50 (9.9)	52 (10.3)	
Previous heart failure, number (%)	9 (1.5)	107 (4.4)	< 0.001	7 (1.4)	7 (1.4)	
Peripheral vascular disease	26 (4.4)	240 (9.9)	< 0.001	26 (5.1)	28 (5.5)	
Chronic lung disease	10 (1.7)	85 (3.5)	0.03	9 (1.8)	11 (2.2)	
Chronic renal failure	15 (2.5)	78 (3.2)	0.43	14 (2.8)	13 (2.6)	
Atrial fibrillation	41 (6.9)	170 (7.0)	0.99	36 (7.1)	27 (5.3)	
Left ventricular ejection fraction, %	59.8±8.7	59.1±10.7	0.51	59.8±8.8	59.8±9.4	
Extent of disease			< 0.001			
LM only	55 (9.2)	266 (10.9)		44 (8.7)	48 (9.5)	
LM with 1-vessel	105 (17.6)	339 (13.9)		88 (17.4)	93 (18.3)	
LM with 2-vessel	204 (34.2)	546 (22.3)		165 (32.5)	156 (30.8)	
LM with 3-vessel	232 (38.9)	1293 (52.9)		210 (41.4)	210 (41.4)	





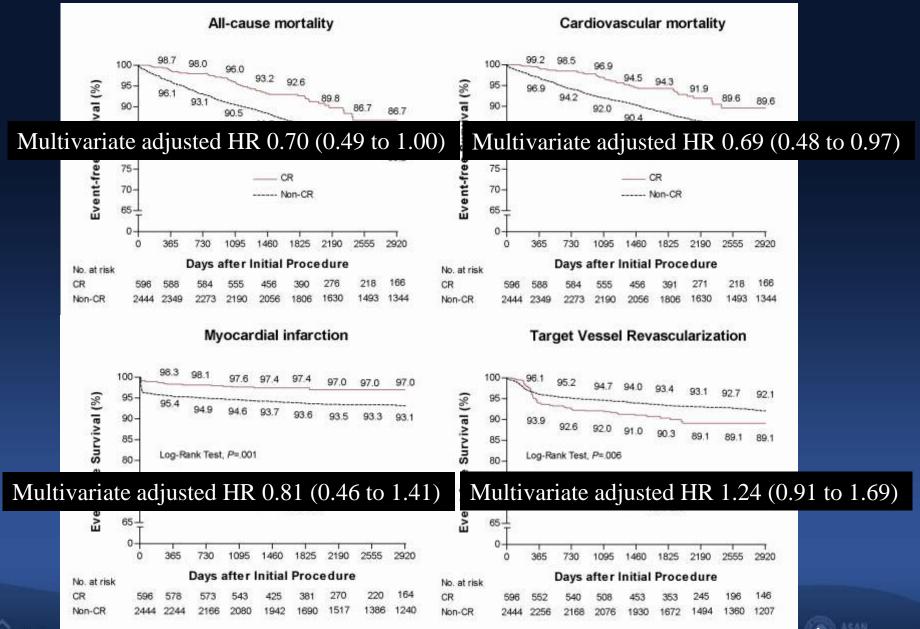
Baseline Characteristics

	Overall cohort			Propensity-matched cohort		
Characteristics	CR (596 Patients)	Non CR (2444 Patients)	Р	CR (507 Patients)	Non CR (507 Patients)	
Total number of diseased lesion	2.6±1.5	3.3±1.8	< 0.001	2.7±1.5	2.7±1.4	
Involvement of LM bifurcation	365 (61.2)	1510 (61.8)	0.81	306 (60.4)	311 (61.3)	
Clinical indication, number (%)			< 0.001			
Silent ischemia	63 (10.6)	182 (7.4)		51 (10.1)	45 (8.9)	
Stable angina	240 (40.3)	604 (24.7)		197 (38.9)	200 (39.4)	
Unstable angina	235 (39.4)	1424 (58.3)		204 (40.2)	208 (41.0)	
NSTEMI	35 (5.9)	150 (6.1)		35 (6.9)	36 (7.1)	
STEMI	23 (3.9)	84 (3.4)		20 (3.9)	18 (3.6)	
Treatment strategy			<0.001			
Medical therapy	52 (8.7)	349 (14.3)		52 (10.3)	55 (10.9)	
PCI	416 (69.8)	730 (30.0)		333 (64.5)	327 (65.7)	
drug-eluting stents	404	458		321	319	
bare-metal stents	12	273		12	9	
CABG	128 (21.5)	1365 (55.9)		128 (25.2)	119 (23.5)	
Severe calcification at LM	47 (7.9)	167 (6.8)	0.37	36 (7.1)	37 (7.3)	
Thrombus at LM	25 (4.2)	28 (1.1)	< 0.001	12 (2.4)	12 (2.4)	
Ulceration at LM	18 (3.0)	51 (2.1)	0.17	14 (2.8)	14 (2.8)	
Chronic total occlusion at LM	3 (0.5)	44 (1.8)	0.02	3 (0.6)	4 (0.8)	



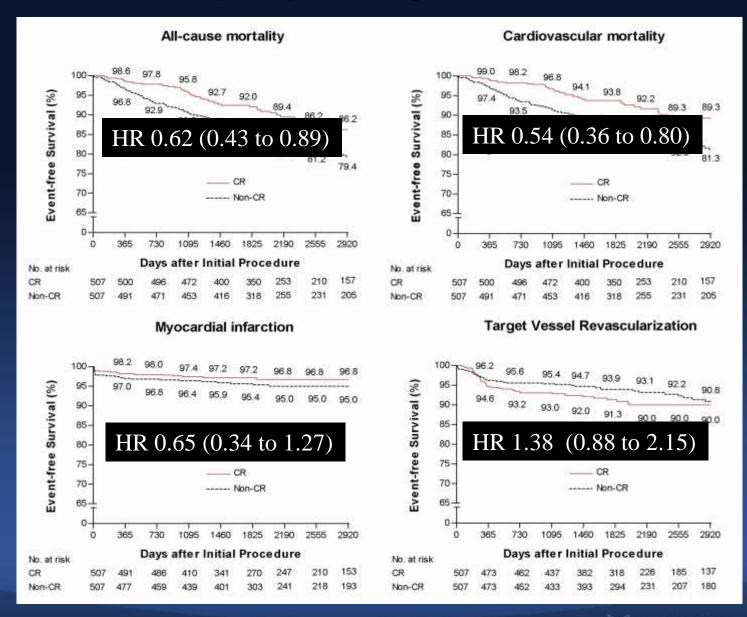


Results in total cohort



Manuscript in process

Results in propensity-matched cohort





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Cardiac Rehab in Left Main Coronary Artery Stenosis

- The overall use rate of CR was just **19.6%**.
- Participation of phase II CR in left main stenosis, regardless of treatment strategy, showed 30 to 38% lower in 7-year all-cause mortality and 31 to 46% lower in 7-year cardiovascular mortality.





Temporal trends and influencing factors in CR after PCI

Total – 10,059 patients CR in 1869 (18.6%)







Temporal trends and influencing factors in CR after PCI

Total – 10,059 patients CR in 1869 (18.6%)

Variables	Odds Ratio (95% CI)	P-value
Age	0.89 (0.82 to 0.96)	0.004
LVEF, %	0.90 (0.84 to 0.98)	0.007
Diabetes mellitus	0.85 (0.75 to 0.93)	0.015
Acute coronary syndrome	1.54 (1.03 to 1.85)	0.023
Previous stroke	1.65 (1.15 to 2.02)	0.026
Chronic renal failure	0.82 (0.65 to 0.97)	0.021
Automatic referral	2.34 (1.85 to 2.97)	<0.001



Conclusions

- The rate of participation in cardiac rehab was very low.
- Cardiac rehab is an under-utilized medicine in Korea.
- Cardiac rehab can reduce mortality tremendously, among patients with left main stenosis and CABG.
- Cardiac rehab can reduce in-stent late luminal loss after long coronary artery stenting.
- Settlement of efficacious system is very important.



