

Cardiac rehab programs are “critically important”

A therapeutic approach builds on a unique program launched in the 1960s, when doctors prescribed getting active as the key to recovering from a heart attack

By Jennifer Hough

In his mid-40s and working in a physically demanding job, Nathan Hamayda thought he was in pretty good shape. That was until his heart attack in 2001, a silent coronary, after which he underwent bypass surgery.

His recovery was difficult, so he didn't take up a cardiac rehab program that was offered to him at the time.

“My job was very physically

active. I was a set dresser, decorating movie and TV sets, so I was always lifting, and I felt strong. I thought it [rehab] would be a bunch of old men on treadmills,” he says wryly. “And I wasn't having an easy time after my operation.”

Fast forward to 2014: Mr. Hamayda was at home one day, when he got that feeling again. Not pain, just a really

uncomfortable foggy feeling, and he had difficulty breathing.

At age 60, he was having another attack.

“I lay down, hoping the feeling would pass,” he says.

It didn't, and he asked his landlord to take him to the hospital.

After some tests, doctors determined that one of his bypass grafts was blocked.

“They wheeled me up for surgery. I was fully conscious while they installed three stents in the blocked artery, and the symptoms immediately disappeared.”

Mr. Hamayda was then referred to the cardiac rehab program at the Peter Munk Cardiac Centre (PMCC). This time, he decided to at least investigate what it entailed.

“I went and got a stress test, but I told the kinesiologist that I was reluctant about the program. She said she thought I could really benefit, and get my heart rate up in a supervised manner.”

Now, having completed the program, Mr. Hamayda says it was much better than he expected.

“I started walking on the treadmill and began adjusting the speed, setting targets. It doesn't take long to notice a difference. Over the course of a few weeks, I noticed it took longer to get my heart rate up.”

The difference a cardiac rehab

“We want to induce changes in the physiology of the heart. We want to change how well the heart performs and improve central fitness, speed up metabolism and change a person's outlook long term.”

Dr. Paul Oh,
Medical Director and GoodLife Chair of the Cardiovascular Prevention and Rehabilitation Program at the Peter Munk Cardiac Centre and Toronto Rehab

program can make is “critically important” for people recovering from a wide range of heart episodes, says Dr. Paul Oh, Medical Director and GoodLife Chair of the Cardiovascular Prevention and Rehabilitation Program at the Peter Munk Cardiac Centre and Toronto Rehab.

“It's as important as anything we can do in medicine. We can cut the chance of dying by 25 to 50 per cent and reduce re-hospitalization by 25 per cent. It's as powerful as taking meds or stopping smoking,” says Dr. Oh.

The therapeutic approach embodied by the Peter Munk Cardiac Centre program goes back to the 1960s, when doctors presented the notion that the key to recovering from a heart attack was to get active, says Dr. Oh.

“This was very different to

Nathan Hamayda, left, and Dr. Paul Oh discuss the importance of being active in the PMCC prevention and rehabilitation program.

the prevailing attitude and challenged the medical norm at that point. But now, in many areas of medicine, we are embracing the fact that eating, stopping smoking and being active play a huge role in determining what happens to us long term – whether we live or die,” he says.

The PMCC program, available at two sites in Toronto – Toronto Western Hospital and Toronto Rehab's Rumsey Centre – has been established for decades, and it is one of largest and most comprehensive of about 55 in the province.

“We see people across the age spectrum and also see an expanded population of people with stroke, cancer and diabetes who have the same risk factors,” Dr. Oh explains.

“We want to induce changes in the physiology of the heart. We want to change how well the heart performs and improve central fitness, speed up metabolism and change a person's outlook long term,” he says.

The program is tailored to each individual, but “the commonality between everyone in the program is that they are learning how to get active and manage their condition in a safe, progressive and effective manner,” Dr. Oh adds.

Being supervised and having the safety net of a multidisciplinary team of experts – a psychologist, dietitian, nurse, kinesiologist, physiotherapist and occupational therapist – is what makes the cardiac rehab program so appealing and so important, says Valerie Skeffington, Manager of the Cardiovascular Prevention and Rehabilitation Program at the University Health Network (UHN).

“Our patients come here directly after hospital, typically within three weeks of an event. They aren't sure what they are in for, and there is always hesitancy and a bit of anxiety. But they start to build confidence and competency. It's about getting people back to being active, back to themselves, whether that means playing with

grandkids, getting back to work or doing the grocery shopping. Everyone leaves a very different person. There is definitely a psychological component to the program,” she says.

The nuts and bolts of the program incorporate stationary bikes, treadmills and arm bikes. There's even a 200-metre track (inside and outside) at the airy, impressive Rumsey site.

“Everyone starts off with a walking program based on their fitness level,” Ms. Skeffington explains.

“We do weight training, stretching and take an interdisciplinary approach, and we have mindfulness, eating, nutrition and stress-management education.”

The social aspect of the program cannot be underestimated.

“Peer support is very important. That person sitting beside you may have been your roommate and knows your situation,” she says.

The sessions take place in a group format once a week for 90 minutes, but participants should also exercise on their own four times a week.

This can be a new concept for many, Ms. Skeffington notes.

“We see a lot of women who were never involved in physical activities; it's a very new thing to ask them to exercise, so what we are asking has to be reasonable and realistic. For older people – we have an 88-year-old at the moment – they go at their own pace. We are not asking them to run a marathon, just asking them to get stronger within their own limitations. For some, the goal is just to live to see another day.”

Some people do end up running marathons, though, says Dr. Oh.

“People tell us they not only recover from the heart condition, but also get to a state where they are as strong as they have been in years, or ever, so it's a very exciting transition,” he says.

“People get to the stage where we can say, without being facetious, ‘Congratulations! You've had a heart attack. Now there's a chance to regain your life in a way that's under your control.’”

Continuing with some sort of exercise regime after the program ends is crucial, and for those who see it through – 70 per cent of participants do – there are a variety of options available, including a free three-month membership at GoodLife Fitness gyms across the city.

In 2012, GoodLife committed \$5-million to the PMCC in a first-of-its-kind, public-private collaboration to advance cardiac care and preventative programs.

The collaboration led to the appointment of Dr. Oh as the inaugural GoodLife Chair in cardiovascular rehabilitation and prevention.

“A tenet of the cardiac program is that people can carry on afterward,” Dr. Oh says.

“Not only does this offer a continuum for people to transition from hospital to community, but also the PMCC trains GoodLife instructors in how to deal with cardiac recovery customers.”

REHAB BY THE NUMBERS

More than **1.4 million** Canadians have heart disease.

Heart disease is one of the leading causes of death in Canada, claiming more than **33,600 lives** each year.

Cardiac rehab can **prevent death by 25 to 50%** and **reduce hospitalization by 25%**.

The Peter Munk Cardiac Centre has **two rehab sites**: Toronto Western Hospital and the Rumsey Centre, which has a **200-metre track**, inside and out.

The program sees about **2,600 people** annually.

Group sessions last for **90 minutes**, one day per week: **30 minutes** of education and **60 minutes** of exercise. Participants are expected to complete four sessions on their own.

A full **70% of participants** complete the program.

