



**Antonio Cardarelli**  
AZIENDA OSPEDALIERA DI RILIEVO NAZIONALE



U.O.C. Cardiologia Riabilitativa

# La Fase della Riabilitazione

Eduardo Bossone, MD, Ph.D

U.O.C. Cardiologia Riabilitativa

A.O.R.N. ‘ Antonio Cardarelli’, Napoli



# Riabilitazione Cardiologica: Processo Multifattoriale

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“ Processo multifattoriale, attivo e dinamico che ha il fine di favorire la stabilità clinica, ridurre le disabilità conseguenti alla malattia e supportare al mantenimento e alla ripresa di un ruolo attivo nella società con l’obiettivo di ridurre il rischio di successivi eventi cardiovascolari, di migliorare la qualità della vita e di incidere complessivamente in modo positivo sulla sopravvivenza”.



World Health Organization



# Riabilitazione Cardiologica: Perché?



Cardiac Rehabilitation Matters Group : A Abreu (PT), M Ambrosetti (IT), A Castro Conde (SP), A Cohen-Solal (FR), R Dalmau (SP), F Edelmann (GE), D Gaita (RO), P Lancellotti (BE), M Mendes (PT), P Meurin (FR), M F Piepoli (IT).

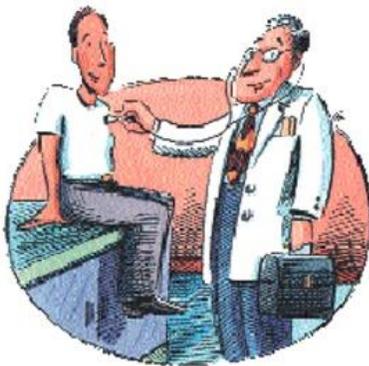


# Riabilitazione Cardiologica : Le Fasi

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- **Fase I:** Riabilitazione Cardiologica «**intensiva**» in regime di **ricovero ordinario**.



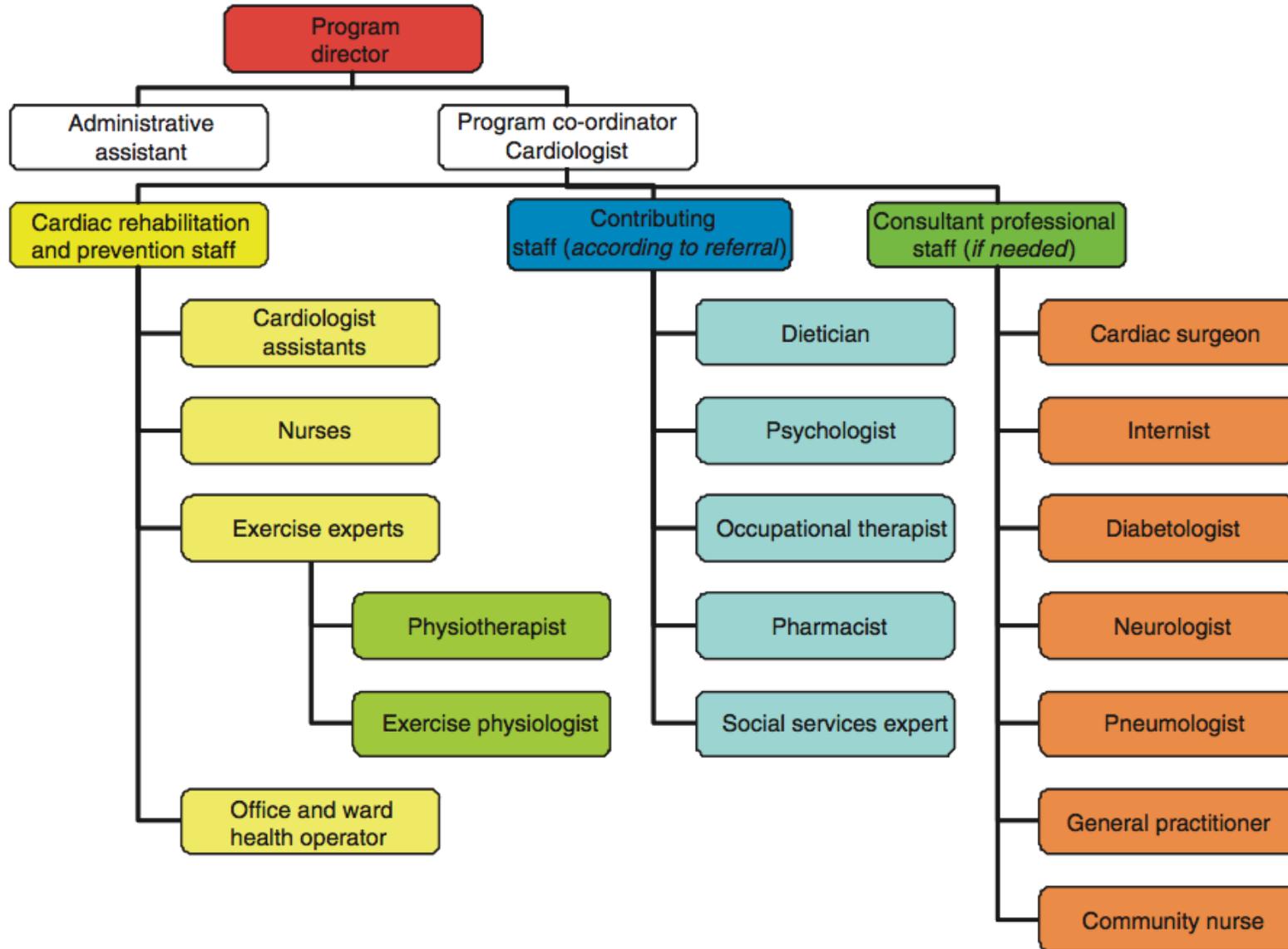
- **Fase II:** Riabilitazione Cardiologica «**intensiva**» in regime di **ricovero ordinario/DH**.



- **Fase III:** Riabilitazione Cardiologica «**estensiva**» in regime **ambulatoriale**.



# CR: Team Multidisciplinare





# Le Evidenze Scientifiche

Bossone E, et al. Aging and functional decline: The prevention's clock is ticking.  
Eur J Prev Cardiol. 2018;25:802-803.



# The New England Journal of Medicine

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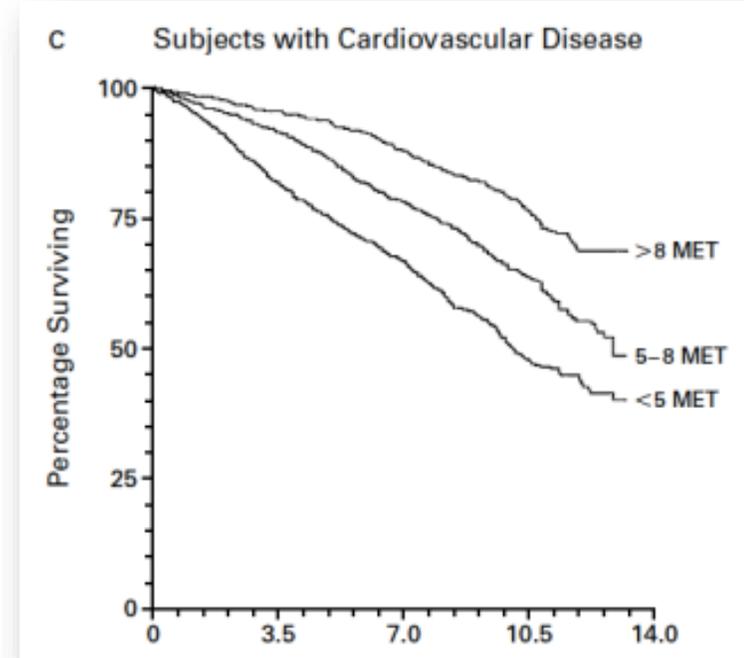
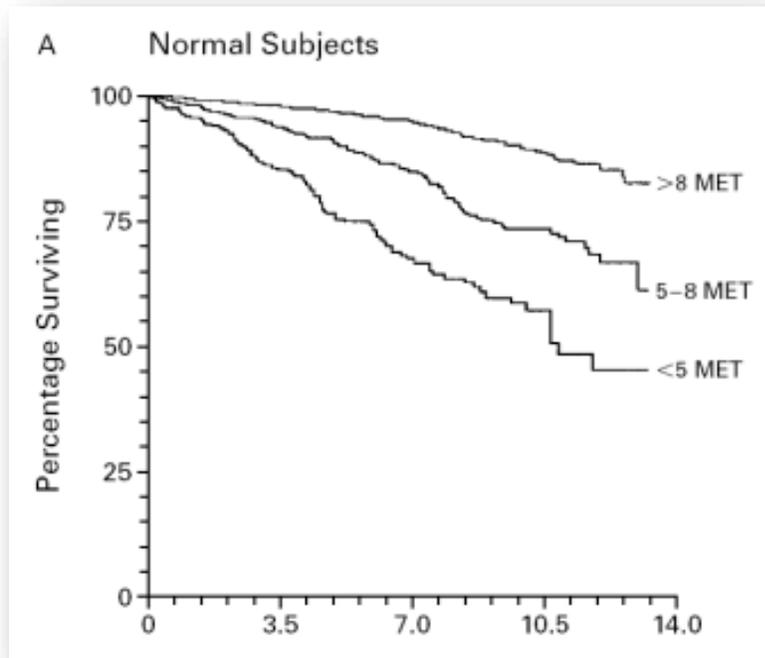
MARCH 14, 2002

NUMBER 11



## EXERCISE CAPACITY AND MORTALITY AMONG MEN REFERRED FOR EXERCISE TESTING

JONATHAN MYERS, PH.D., MANISH PRAKASH, M.D., VICTOR FROELICHER, M.D., DAT DO, M.D., SARA PARTINGTON, B.SC.,  
AND J. EDWIN ATWOOD, M.D.

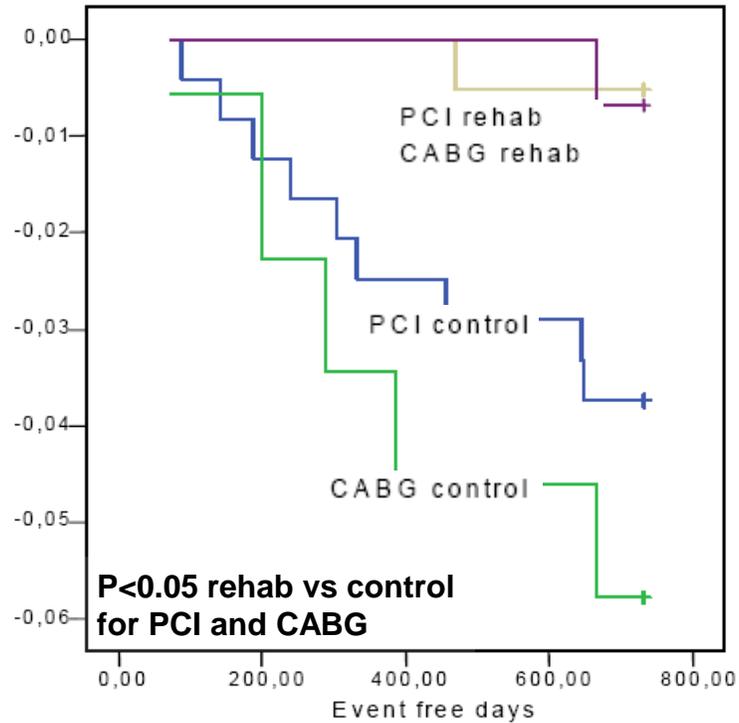




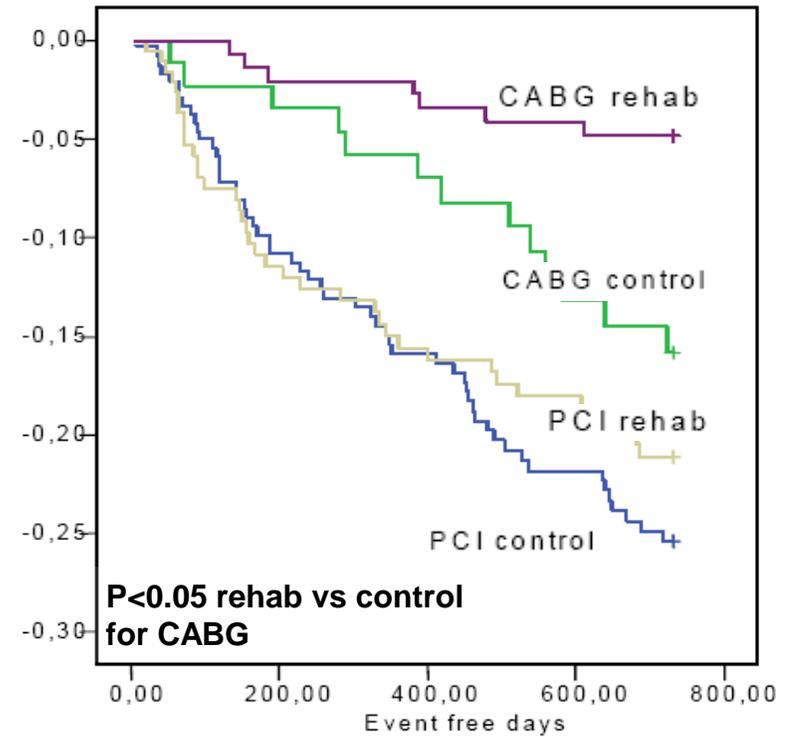
# Reduction of event rate after cardiac rehabilitation: comparison between PCI and CABG patients

Hansen D. et al. Acta Cardiologica 2009

Kaplan-Meier curve:  
mortality



Kaplan-Meier curve: total  
cardiovascular event rate





# ESC GUIDELINES



EUROPEAN  
SOCIETY OF  
CARDIOLOGY®

Classes of recommendations	Definition	Suggested wording to use
<b>Class I</b>	Evidence and/or general agreement that a given treatment or procedure is beneficial, useful, effective.	Is recommended/is indicated
<b>Class II</b>	Conflicting evidence and/or a divergence of opinion about the usefulness/efficacy of the given treatment or procedure.	
<i>Class IIa</i>	<i>Weight of evidence/opinion is in favour of usefulness/efficacy.</i>	Should be considered
<i>Class IIb</i>	<i>Usefulness/efficacy is less well established by evidence/opinion.</i>	May be considered
<b>Class III</b>	Evidence or general agreement that the given treatment or procedure is not useful/effective, and in some cases may be harmful.	Is not recommended

Level of evidence A	Data derived from multiple randomized clinical trials or meta-analyses.
Level of evidence B	Data derived from a single randomized clinical trial or large non-randomized studies.
Level of evidence C	Consensus of opinion of the experts and/or small studies, retrospective studies, registries.



# Riabilitazione Cardiologica: Linee Guida ESC

## 2015 ESC guidelines for the management of acute coronary syndromes in patients presenting without persistent ST-segment elevation

Participation in a well-structured cardiac rehabilitation programme to modify lifestyle habits and increase adherence to treatment should be considered.

IIa	A
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## 2016 ESC Guidelines for the diagnosis and treatment of acute and chronic heart failure

It is recommended that regular aerobic exercise is encouraged in patients with HF to improve functional capacity and symptoms.

I	A
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It is recommended that regular aerobic exercise is encouraged in stable patients with HFrEF to reduce the risk of HF hospitalization.

I	A
---	---

It is recommended that patients with HF are enrolled in a multidisciplinary care management programme to reduce the risk of HF hospitalization and mortality.

I	A
---	---

## 2017 ESC Guidelines for the management of acute myocardial infarction in patients presenting with ST-segment elevation

Participation in a cardiac rehabilitation programme is recommended.<sup>4,309,328</sup>

I	A
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## 2018 ESC/EACTS Guidelines on myocardial revascularization

After CABG or PCI for AMI, participation in a cardiac rehabilitation programme is recommended to improve patient outcomes.<sup>777</sup>

I	A
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## 2019 ESC Guidelines for the diagnosis and management of chronic coronary syndromes

Exercise-based cardiac rehabilitation is recommended as an effective means for patients with CCS to achieve a healthy lifestyle and manage risk factors.<sup>151–153</sup>

I	A
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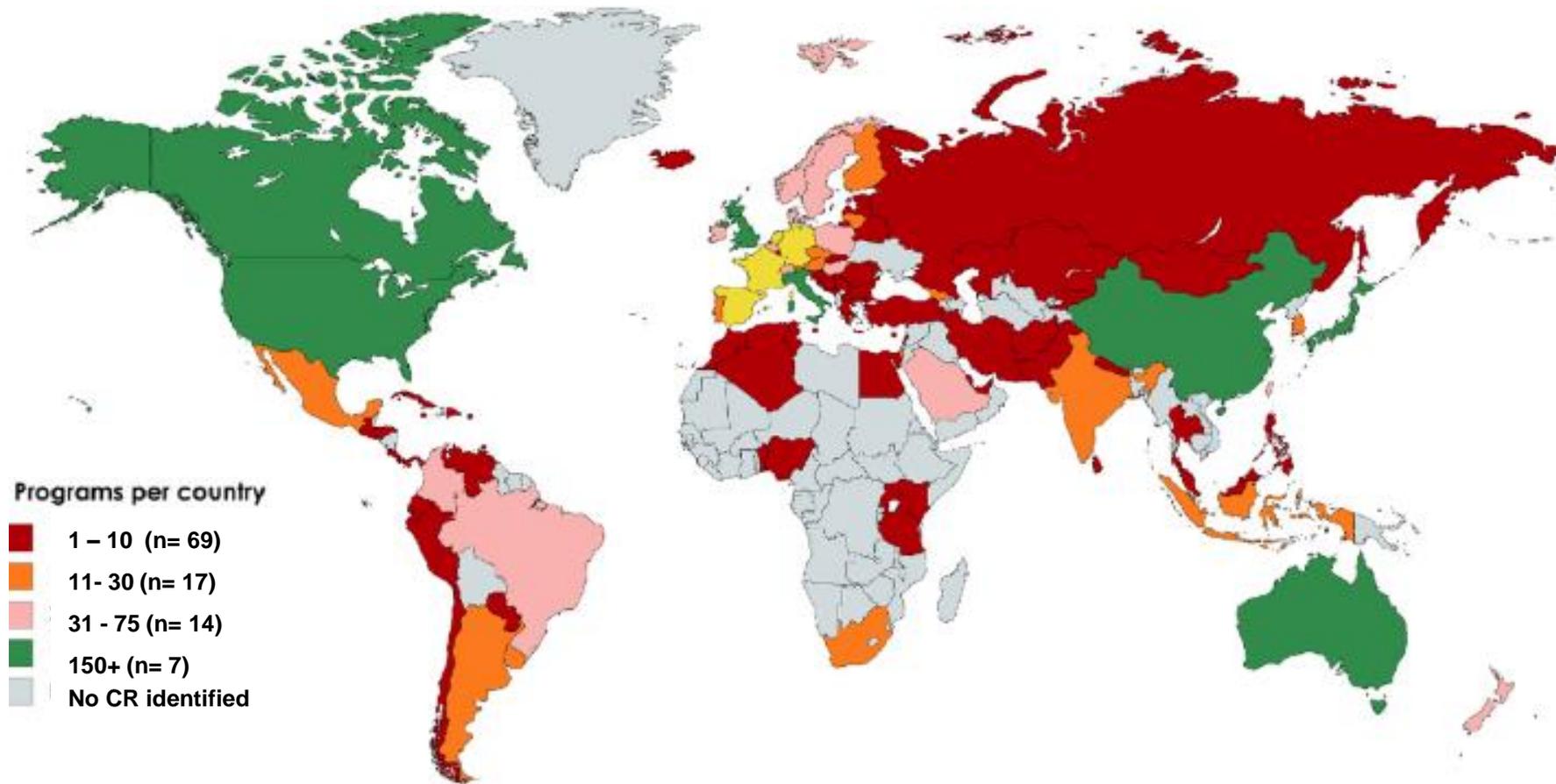




# Status Quo



# Total Number of CR Program *per* Country



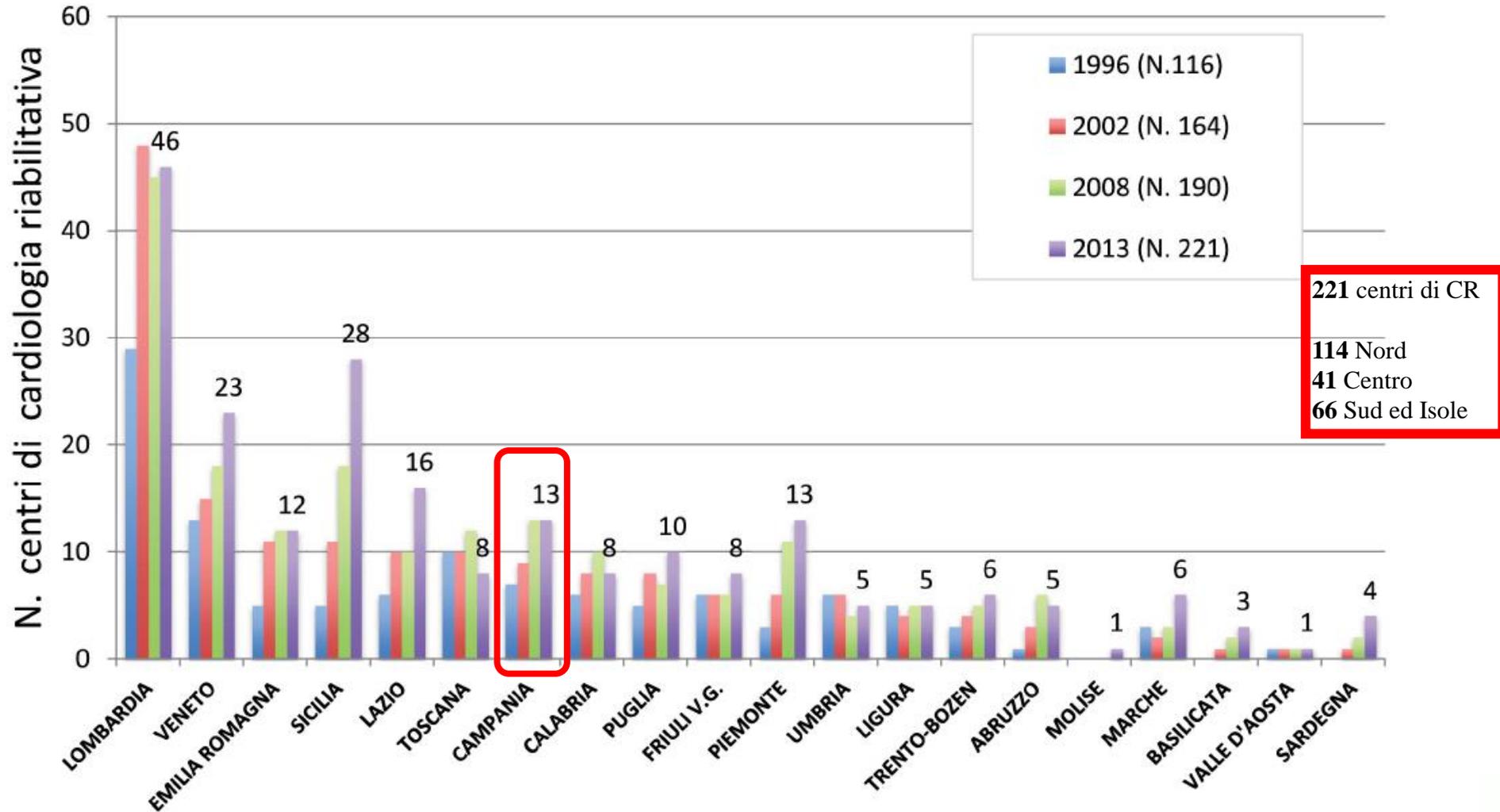
Turk-Adawi et al. EClinMed. 2019;13:31-45.



**International Council of  
Cardiovascular Prevention  
and Rehabilitation (ICPR)**



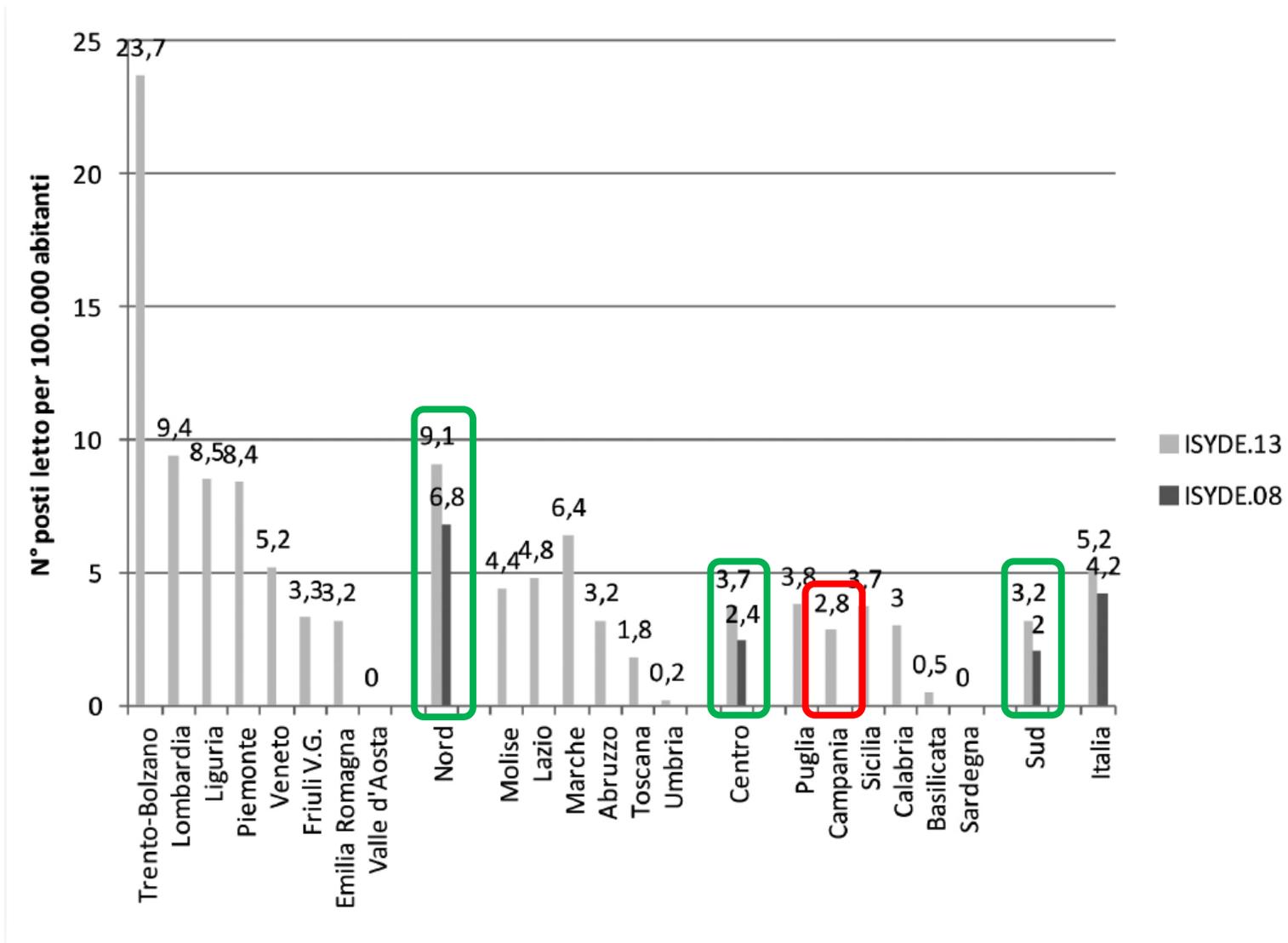
# Italian Survey *on* Cardiac Rehabilitation [ISYDE.13]



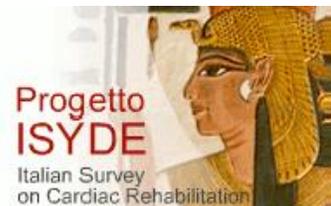
Griffo R et al. G Ital Cardiol 2016;17:217-224.



# Italian Survey *on* Cardiac Rehabilitation [ISYDE.13]



Griffo R et al. G Ital Cardiol 2016;17:217-224.



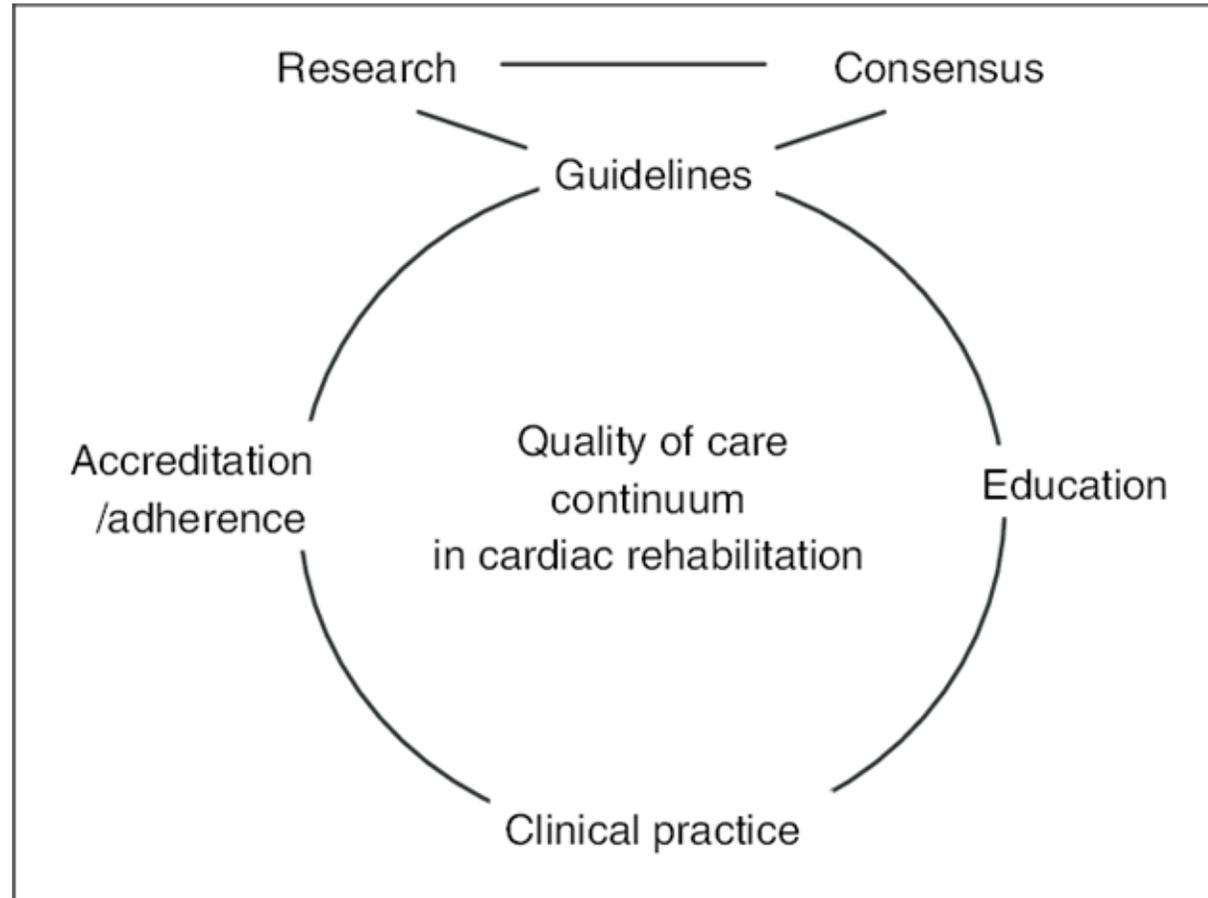


# Visione Olistica della Salute

Community health and prevention: It takes a village to reduce cardiovascular risk! Let us do it together!  
Bossone E, et al. Eur J Prev Cardiol. 2019:1840-1842.



# Continuum Cardiovascolare

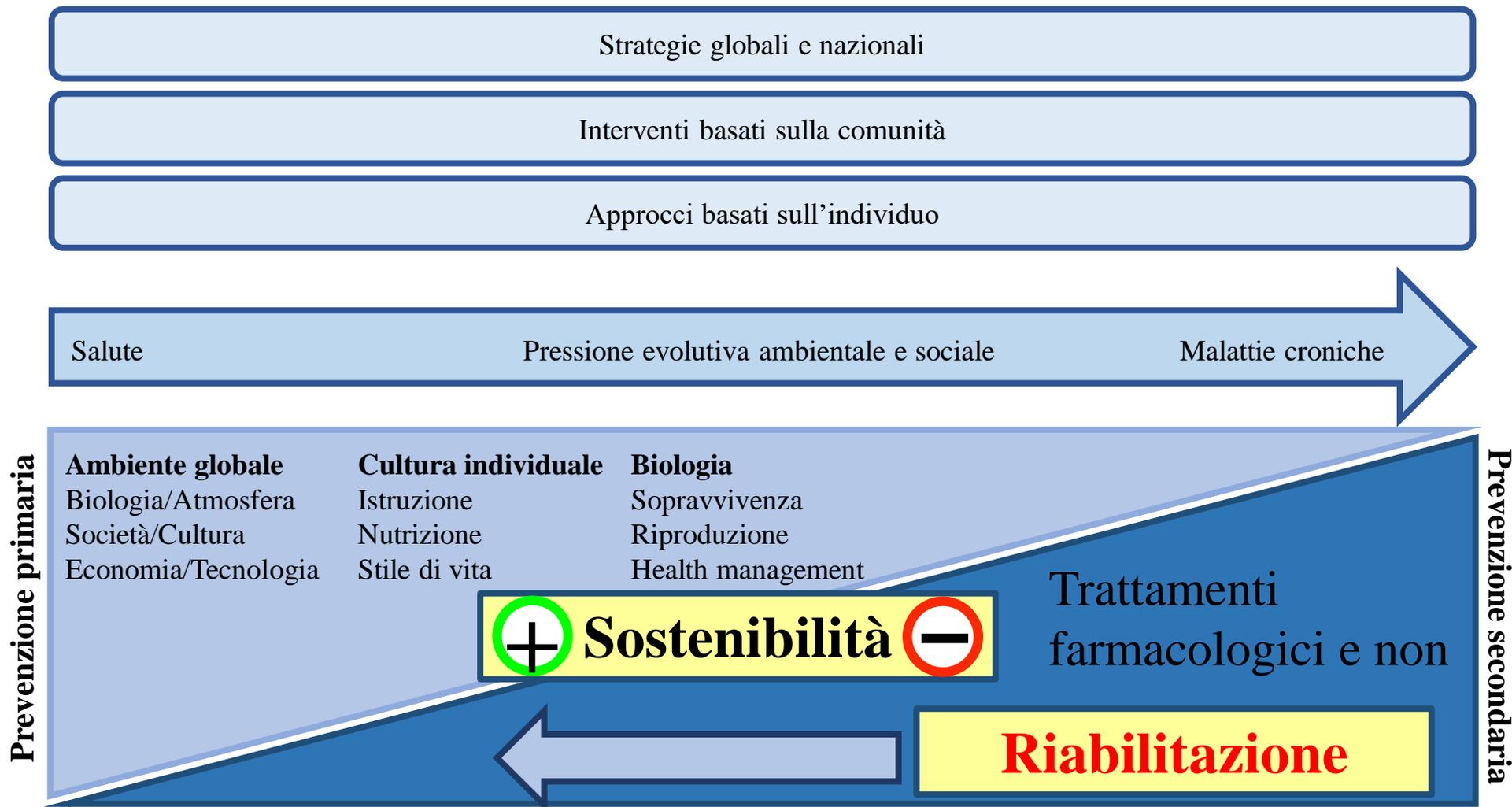


Ann-Dorthe Zwisler et al, European Journal of Preventive Cardiology;19(2) 143–150.





# Visione Olistica della Salute



Volpe M., et al. G Ital Cardiol (Rome), 2018.

Bossone E., et al. Eur J Prev Cardiol, 2019.



# Conclusioni

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- Disegno ed implementazione di programmi multidisciplinari di riabilitazione cardiologica.
- Rete integrata di riabilitazione cardiologica in Regione Campania in una visione olistica della salute.



Grazie

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