



WOMEN-ONLY CARDIAC REHABILITATION DELIVERY AROUND THE WORLD

Poster Contributions
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Background: Women utilize cardiac rehabilitation (CR) significantly less than men. Gender-tailored CR improves adherence and mental health outcomes when compared to traditional programs. This study ascertained the availability of women-only (W-O) CR classes globally.

Methods: In this cross-sectional study, an online survey was administered to CR programs globally, assessing delivery of W-O classes, among other program characteristics. Univariate tests were performed to compare provision of W-O CR by program characteristics.

Results: Data were collected in 93/111 countries with CR (83.8% country response rate); 1,082 surveys (32.1% program response rate) were initiated. Globally, 38 (40.9%; range from 1.2-100.0% of programs/country) countries and 110 (11.8%) programs offered W-O CR. W-O CR was offered in 55 (7.4%) programs in high-income countries, versus 55 (16.4%) programs in low- and middle-income countries (p less than .001); it was offered most commonly in the Eastern Mediterranean region (n=5, 55.6%; p=.22). Programs that offered W-O CR were more often located in an academic or tertiary facility, served more patients/year, offered more components, treated more patients/session, offered alternative forms of exercise, had more staff (including cardiologists, dietitians, and administrative assistants, but not mental healthcare professionals), and perceived space and human resources to be less of a barrier to delivery than programs not offering W-O CR (all p less than .05).

Conclusion: W-O CR was not commonly offered. Only larger, well-resourced programs seem to have the capacity to offer it, so expanding delivery may require exploiting low-cost, less human resource-intensive approaches such as online peer support.