

## LETTER TO THE EDITOR

# MELIORATE CARDIO-PULMONARY REHABILITATION UP-TO THE INTERNATIONAL STANDARDS

To the Editor,

The basic aim of cardiopulmonary rehabilitation (CPR) is to improve the cardiac fitness and enhance the quality of life<sup>1</sup>. World-wide enormous number of patients has been suffering from cardiopulmonary problem show ever, seek appropriate care. CPR is considered an important component of care for the patients suffering with cardiac problems<sup>1</sup>. For past few years I have been observing the lack of awareness and unavailability of facilities creating a major obstacle in progress of CPR in the country. Pakistani researchers and professionals need to pay attention on the aspect of CPR especially in the tertiary care hospitals where the facilities can easily be provided.

Cardiac diseases are the leading cause of deaths for Whites, Blacks, Asians, American Indians, and Hispanics<sup>2</sup>. Different studies suggest that prevalence of patients with Hypertrophic Cardiomyopathy (HCM) is about 25%<sup>3</sup>, Coronary Artery Bypass Graft (CABG) 12.4%<sup>4</sup> and 12.5% for Atrial Fibrillation (AF)<sup>5</sup>. Moreover, patients with different cardiopulmonary complications experience psychological stress, anxiety and depression<sup>6</sup>.

In Pakistan, only a few hospitals entertain patients and implicate CPR but unfortunately they only consider standard Phase I and II<sup>7</sup> while the rest of the phases are neither applied nor available in most of the tertiary care hospitals. Moreover, among all the cardiac patients; particularly females' dropouts from the rehabilitation plan when compared with the males<sup>6</sup>.

Different modalities, exercise and rehabilitative strategies are used to treat the patients with cardiopulmonary diseases. Professionals, those who are working in the field of rehabilitation need improve their skills and vigilance on the advancement of CPR for its appropriate application. Another positive aspect of CPR is to provide home-base intervention which increases the physical activity throughout the day and patient can perform moderate intensity physical activity<sup>8</sup> and increase functional capacity to meet the requirement of life.

To improve the scope of CPR in the tertiary care hospitals; awareness, availability, promotion, expertise and evidence base practices are required. Moreover, the team work of cardiac clinician's and physical therapists can improve the quality of practice of CPR. I would recommend the readers of this letter to encourage patients who have gone through and are at the risk of cardiopulmonary conditions to corporate and ask for better rehabilitation to improve quality of life.

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