

Press Release

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Researchers Find Lower-Cost, Community-based Cardiovascular Risk Reduction Program Comparable To Formal, Cardiac Rehabilitation Programs

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Research published in the June issue of the *American Journal of Cardiology* concludes that INTER_xVENT, an innovative community-based risk reduction program offered in the Atlanta area through an affiliation with Emory HealthCare, can substantially reduce the cost of rehabilitation care for heart attack patients while achieving similar health benefits as costlier, formal cardiac rehab programs.

"Cardiac rehabilitation programs are specifically designed to help people make needed lifestyle changes and reduce their future risk for heart problems after they have suffered a heart attack or undergone heart surgery. But as many as 80 percent of individuals who experience a cardiac event never participate in a formal cardiac rehabilitation program," says the study's lead author Neil Gordon, M.D., Ph.D., of the Center for Heart Disease Prevention, St. Joseph's/Candler Health System in Savannah. "Cost and accessibility are believed to be two of the most important reasons for the low participation rates in cardiac rehabilitation programs."

To assess the health results of several different approaches to cardiac risk reduction programs for heart patients, Dr. Gordon and his research team, which included scientists from Stanford University and William Beaumont Hospital in Detroit, Michigan, followed 155 heart disease patients who had previously suffered a heart attack or undergone bypass surgery or angioplasty. The research subjects participated in either a formal cardiac rehabilitation program, a special program supervised by physicians and administered by nurses, or the INTER_xVENT program (administered primarily by exercise physiologists working in a shopping mall with a special computer system).

INTER_xVENT, which was founded by Dr. Gordon, is an individualized lifestyle management and cardiovascular risk reduction program that uses state-of-the-art behavior change techniques to provide participants with a comprehensive program including exercise, nutrition, weight management, stress management, and smoking cessation. Participants communicate with "mentors" either by telephone, the Internet or during personal counseling sessions and receive

individualized advice, instruction and encouragement to help them meet health goals. Using the guidelines of national expert groups, such as the American Heart Association, mentors refer participants to their personal physicians for medication changes aimed at optimizing cardiovascular disease risk factors.

After 12 weeks, participants in all three programs derived substantial improvements in multiple cardiovascular disease risk factors, including blood pressure, cholesterol levels, weight, and cardiorespiratory fitness. With the exception of cardiorespiratory fitness, which increased most in the patients in the cardiac rehabilitation program and the INTER_xVENT program, no significant differences were observed among the three programs.

However, there was a substantial difference in the cost of the programs. At the time the study was conducted, the cardiac rehabilitation program charged up to \$3,600 for 12 weeks of participation; the special physician/nurse program was approximately \$410 for 12 weeks of participation; and the INTER_xVENT program was \$360 for a full year of participation. "This landmark study demonstrates that the physician/nurse program and, especially, the INTER_xVENT program have the potential to substantially reduce the cost of care for heart patients while achieving similar benefit," says Dr. Gordon.

He points out that all patients should be referred to a formal cardiac rehabilitation program after a heart attack, bypass surgery or angioplasty. "However, if an individual patient is unable to participate in a formal cardiac rehabilitation program because it costs too much or they live too far from the program, our study shows that the physician supervised/nurse case managed program and the INTER_xVENT program are excellent alternatives," says Dr. Gordon. "Because the INTER_xVENT program can be administered in a variety of medical as well as non-medical settings, it may help reduce costs and increase accessibility to clinically effective lifestyle management and cardiovascular disease risk reduction intervention."