GLOBAL HEART

Abstracts from the World Congress of Cardiology/ Brazilian Congress of Cardiology 2022

THE EDITORIAL TEAM (ON BEHALF OF THE WORLD HEART FEDERATION)

ABSTRACT

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These are the abstracts from the combined 77th Brazilian Congress of Cardiology, together with the World Congress of Cardiology, held in October 2022. From 1950 to today, the World Heart Federation's World Congress of Cardiology (WCC) has been a key event on the cardiovascular calendar, offering a global perspective on cardiovascular health and bringing together thousands of cardiology professionals from all over the world with one common goal: to reduce the global burden of cardiovascular disease and help people live longer, healthier lives.

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KEYWORDS:

Cardiology; Global Health; Heart Health; Cardiovascular Disease; Conference

TO CITE THIS ARTICLE:

The Editorial Team (on behalf of the World Heart Federation). Abstracts from the World Congress of Cardiology/Brazilian Congress of Cardiology 2022. *Global Heart*. 2023; 18(1): 10. DOI: https://doi.org/10.5334/gh.1165

Global Heart
DOI: 10.5334/gh.1165

Modality: E-Poster Researcher – Non-case Report

Category: CARDIOLOGY OF SPORTS, EXERCISE, ERGOMETRY AND CARDIOVASCULAR REHABILITATION

EXERCISE TRAINING ON QUALITY OF LIFE IN PATIENTS WITH CHRONIC CHAGAS CARDIOMYOPATHY: FROM THE PEACH STUDY

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Introduction: Physical exercise has been described as an efficient and safe strategy to improve quality of life (QoL) in heart failure (HF). However, there is a lack of information about its influence on the QoL of patients with chronic Chagas cardiomyopathy (CCC).

Objective: The present study aimed to investigate the effect of physical exercise training on the QoL of patients with CCC.

Methods: PEACH study was a single center, superiority randomized parallel-group clinical trial of exercise training versus a control group with no exercise training. The sample comprised Chagas disease patients with CCC, left ventricular ejection fraction <45% or HF symptoms (CCC stages B2 or C). QoL was assessed at baseline, after three months, and at the end of follow-up (six months) using SF-36 questionnaire. Patients randomized for the intervention group performed physical exercise (aerobic exercise, strength training and stretching exercises) for 60 minutes, three times a week, for a period of six months. Patients in the control group were not provided with a formal exercise prescription. During the study, patients from both groups underwent monthly appointments with the same cardiologist, and with other specialists, if necessary. In addition, patients in both groups received identical nutritional and pharmaceutical counseling during the study. Longitudinal analysis of the effects of physical training on QoL, considering the interaction term (group × time) to estimate the rate of changes between groups in the outcomes (represented as beta coefficient), was performed using mixed linear models. Analyses were adjusted to the baseline QoL values.

Results: There were significant improvements in physical functioning ($\beta = +10.7$; $p = 0.02$), role limitations due to physical problems ($\beta = +25.0$; $p = 0.01$) and social functioning ($\beta = +19.2$; $p < 0.01$) scales during the first three months in the exercise group compared to control group. No significant differences were observed between groups after six months of follow-up.

Conclusion: Exercise training was associated with short-term improvements in physical and social aspects of QoL and should be incorporated as a treatment strategy for patients with CCC.