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Cardiac Rehabilitation of Arrhythmia Patient with Remained Symptoms after Intervention

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Medication or therapeutic interventions such as radiofrequency catheter ablation (RFCA) could improve Quality of life and exercise capacity in arrhythmia patients. However, some patients complain of cardiopulmonary symptoms or the fear of exercise even after medical management. We report our therapeutic experience of cardiac rehabilitation (CR) in an arrhythmia patient with remained symptoms in spite of the therapeutic intervention. A 52-year-old woman with palpitation and dyspnea in daily life visited cardiovascular center. She was diagnosed as paroxymal atrial tachycardia by electrophysiological study and underwent RFCA. However, her symptoms did not disappear. She was referred to our CR center for the exercise prescription. She received symptom-limited exercise tolerance test (ETT) and was prescribed aerobic exercise of 60% intensity of maximal exercise capacity. She completed the hospital-based CR (twice a week, for 7 months, treadmill walking and running, electrocardiography and blood pressure monitored by physiatrist and physical therapist), and then she has been continuing the home-based CR for 2 months now. During the whole CR period, ETT was conducted 4 times. There was significant improvement of exercise capacity including peak oxygen consumption and exercise duration. Fatigue scale also improved markedly. She does not complain of any symptoms such as palpitation or dyspnea in daily life, and she will return to work soon. CR could improve the exercise capacity and safely relieve the remained symptoms in medically controlled arrhythmia patients.

Table 1. Exercise capacity, duration and fatigue scale at each ETT.

	2017.06.12.	2017.08.03.	2017.11.09.	2018.03.06.
Maximal METS	4.9	5.5	6.0	6.8
Exercise duration	11 min 15 sec	12 min 54 sec	12 min 4 sec	13 min 31sec
Peak VO ₂ (mL/kg/min)	1.17	1.32	1.5	1.65
FSS	59	30	18	18
VAFS	2	7	8	10

METS: Metabolic equivalents; VO2: Oxygen consumption FSS: Fatigue severity scale; VAFS: visual analog fatigue scale; W