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A Brief Note on Preventive Cardiology and Cardiac Rehabilitation

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Abstract

Cardiovascular disease is the major cause of death. It has reached epidemic proportions and requires to be addressed through primary and secondary interception measures. The field of preventive cardiology and cardiac rehabilitation is in its developing stages in India and these assistances require to expand widely for the country to effectively manage this epidemic. The aspect focusses on the various aspects of cardiac rehabilitation, including cardiovascular disease risk factor reduction, role of exercise in reducing cardiac morbidity and mortality, and the appropriate exercise prescription for those with heart disease.

Keywords: Cardiovascular Diseases; Risk Factors; Coronary Diseases in Children; Preventive Cardiology

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Introduction

Preventive cardiology is a subspecialty focused on lowering patients' risk for developing heart disease and having a first heart attack or stroke while also preventing further issues in people who already have cardiovascular disease. Cardiac rehabilitation (rehab) is a program designed to assist develop the overall health by recognizing and decreasing the risk factors that may cause to cardiovascular disease. The program uses lifestyle change and medicaments as needed to: Prevent cardiovascular disease or retain breathing disease from came by worse. Coronary heart disease is the leading cause of death. It is also a major cause of physical disability, particularly in the rapidly growing population of elderly people. The obstruction of subsequent coronary events and the prolongation of physical functioning in such patients are major challenges in precautionary care. Cardiac rehabilitation (CR) programmes were first developed in 19th century. Benefits of ambulation during prolonged hospitalization for coronary events have been recognized. After hospital discharge, the process of physical

reconditioning was continued at home. Programmes for administered highly structured exercise regimes have been improved due to scrutinize over the safety of unsupervised exercise. The center of attention of the programmes was almost exclusively on exercise. During the past 2 decades it has been increasingly acknowledged that most patients in cardiac rehabilitation programmes suffer from the complications of atherosclerosis and that this condition is a lifelong activity in patients likely to be affected by cardiovascular risk factors and are not hereditarily protected against it. At the same time, the physical condition of patients after cardiac operations and coronary interventions developed considerably. It is therefore still an important goal of cardiac rehabilitation to prevent disability resulting from coronary heart disease, particularly in older people and those with occupations involving physical exertion. The primary goal of current cardiac rehabilitation programmes is to prevent subsequent cardiovascular events, hospitalization, and death from cardiac conditions.

Programs help patients make lifestyle changes and determine the best medical treatment is as follows.

Manage existing cardiovascular disease and inhibiting progression of disease.

- Reduce the risk rate of heart attack or stroke or developing cardiovascular disease.
- Reduce the need for surgery.
- Developing your quality of life by decreasing symptoms.
- Manage grinding to treat blood pressure or cholesterol.
- Assist with tobacco cessation.

- Help manage anxiety, depression, other behavioral health conditions.

Provide specialized treatment for those with diabetes, pre-diabetes, and insulin resistance, who overweight heart disease

Conclusion

The Cardiac and Rehabilitation Program was founded in 19th century. The program helps encourage health and wellness for patients with cardiac and vascular disease while they are in hospital during their recovery and throughout their lives.