BEST POSTERS AWARDS

SAFETY OF EXERCISE TRAINING AFTER ELECTIVE CORONARY STENTING IN PATIENTS WITH STABLE ANGINA

ACC Poster Contributions
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Background: Early exercise after coronary stenting is considered to have a risk of stent thrombosis (ST). We investigated the influence of exercise on ST for 1-year.

Methods: This study was a prospective observational study. We enrolled 2351 patients (68 years, 78% male) who underwent successful coronary stenting. We divided into two groups: patients who participated in exercise training (n=865) or not (n=1486). Submaximal exercise training based on Borg scale was performed after stenting and continued after discharge. Outcome measures were incidence of ST and major adverse cardiovascular event (MACE; included death, myocardial infarction and stroke).

Results: Of the 865 patients in the Ex-group, 800 (92.5%) underwent exercise training by the ergometer. No serious complication developed during and after exercise training. Follow-up was completed in 93% of cases. There was no significant difference in the incidence of ST (0.58% vs. 0.47%, p=0.73 at 30-day, 1.2% vs. 0.9%, p=0.52 at 1-year), MACE (1.4% vs. 1.3%, p=0.72 at 30-day, 4.9% vs. 4.5%, p=0.75 at 1-year) and postoperative complication rate (6.9% vs. 7.3%, p=0.72). Independent predictors of clinical ST were left ventricular dysfunction (Ejection fraction <35%) and chronic kidney disease. Exercise habit was not a predictor of ST.

Conclusions: Early submaximal exercise training based on Borg index after coronary stenting does not increase the incidence of ST and MACE.

Cumulative Incidence of MACE and ST