

'Lung at Heart'

The transition of exercise rehab groups from healthcare settings to independent gym settings

Mark Tran Exercise Rehab Physiotherapist St Vincent's Hospital Melbourne

UNDER THE STEWARDSHIP OF MARY AIKENHEAD MINISTRIES



Physical Activity Guidelines

- Australian Guidelines for 65+: 30mins daily @ moderate intensity (aerobic, strength, flexibility, balance ex's) (2005)
- Australian Guidelines for 18-64: 2.5 to 5hrs weekly @ moderate intensity, strengthening x2 (2014)
- "[symptom] improvements are moderately large and clinically significant. Rehabilitation forms an important component of COPD." (Lacasse et al. 2007)
- "Existing interventions generally fail to maintain the benefits derived from pulmonary rehab programs" (Busby et al, 2014)

Lacasse, Martin, Lasserson, Goldstein (2007): Meta-analysis of repiratory rehabilitation in COPD. A Cochrane systematic review. Europa Medicophysical 43(4): 475 Busby, Reece, Simon (2014) Pulmonary Rehabilitation Maintenance Interventions: a systematic review. American Journal of Health Behavior 38(3): 321.





Lung at Heart Project

- Subsidised gym membership during study period
- Guided transition by a hospital-trained staff member
- Networking between hospital and local gym staff
- Professional development provided for gym staff



Client Gym Induction Protocol

- Individualised gym exercise prescription (cardiovascular endurance and muscle strength)
- Posture and exercise technique correction, and safe exercise intensity
- Safety briefing
- Checking clients' awareness of their selfmanagement of their medical condition
- Education about appropriate gym attire and gym etiquette
- Basic hydration and food intake principles
- Introduction to a gym instructor and their role



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Gym Staff Training



- Observation of hospital rehab programs
- Courses regarding the basic disease processes of common chronic illnesses
- Practical demonstrations: exercise prescription and progression, breathing techniques
- Appropriate referral to health professionals
- Mentoring
- Accredited courses e.g.
 www.lungsinaction.com.au



Examples

Aerobic Activities

- Treadmill
- · Exercise Bike
 - Watch for stiff hips!
- Arm Cycle (limit to 5-10mins)
- LLLS groups or other groups for the older population





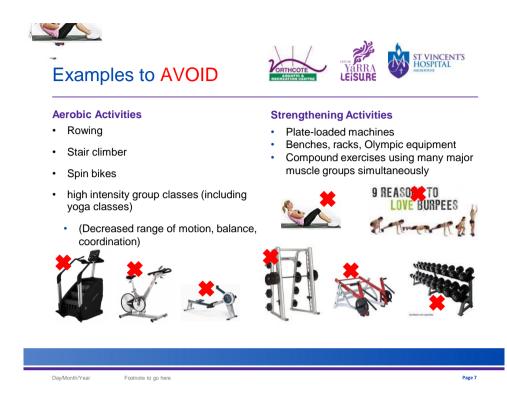
Strengthening Activities

- Fixed Ranges of Motion
 - pin-loaded or cable-loaded machines
 - Circuit style machines
- Light dumbbell training (<5-10kg)



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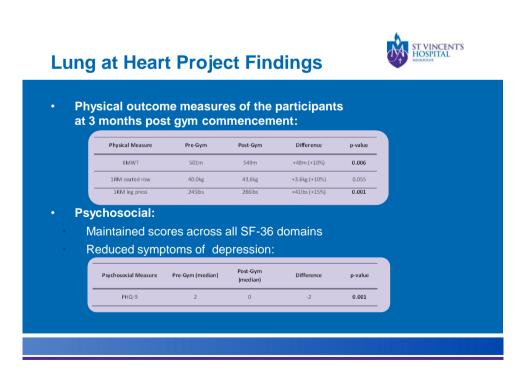
Lung at Heart Project Findings

- Approx 80 patients (=30% of those who completed hospital rehab)
- Mean age 66yo (hospital cohort 70yo)
- 38% female (hospital cohort 33% female)
- High success rate of client transition to a gym setting
- Zero safety incidents
- Average independent gym attendance was 4 times per month
- Very high patient satisfaction

Quotes from participants included:

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- "My mental health has improved"
 - "Friends say to me you look better now"
 - "My GP was shocked that I've improved so much."
- Other benefits that clients reported:
 - "It helped me to lose weight"
 - "Exercise has given me a lot of confidence"
 - "I looked forward to coming"
 - "I go 3-4 times a week and I walk an hour every day"
 "I would have been in hospital, I think, if I didn't come"





Benefits for the hospital

- Achieve zero-waitlist status for our rehab programs
- 10-20% reduction of ED/hospital admissions
- Improved outpatient clinic attendances



Benefits for gyms

- More client memberships
- Offer more diverse exercise group programs
- Better utilisation of the gym floor during off-peak times
- Better engagement with this section of the community
- Professional development for gym staff



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Future Directions

- Improve networking between hospital staff and gyms (e.g. physios, EPs, AHAs with gym staff)
 - Site visits to gyms
 - Collaborative exercise programming
 - Client telephone support/check up post discharge
 - Know membership costs, class types
 - Negotiate free visits
- Hospital rehabilitation programs being run in gym settings

