



HF ACTION

Exercise Training Program to Improve Clinical Outcomes in Individuals With CHF

BACKGROUND: Although exercise training improves several clinical measures in individuals with CHF (e.g., peak VO₂, heart rate variability, and plasma norepinephrine levels), it is not known whether exercise training reduces mortality in individuals with CHF.

PURPOSE: To assess the effect of exercise training on the clinically relevant end points of mortality and hospitalization.

DESIGN: Randomized, open parallel assignment to either 1) supervised exercise training program or 2) exercise 30 minutes minimum three times per week.

Primary Endpoint: All-cause mortality + hospitalization

Secondary Endpoint: CV mortality + CV hospitalization & CV mortality & HF hospitalization

Results: **Primary:** HR (95% CI) 0.93 (0.84 – 1.02) p = 0.13

Adjusted: HR (95% CI) 0.89 (0.81 – 0.99) p = 0.03

Secondary: CV Mortality & Hospitalization: HR (95% CI) 0.92 (0.83 – 1.03) p = 0.14

Adjusted: HR (95% CI) 0.91 (0.82 – 1.01) p = 0.09

CV Mortality & HF Hospitalization: HR (95% CI) 0.87 (0.75 – 1.0) p = 0.06

Adjusted: HR (95% CI) 0.85 (.74 - .89) p = .03

Conclusion: A structured exercise training program is supported for use in pts with reduced LV function & HF symptoms in addition to evidence-based therapy.