Title: Beneficial role of integrated approach of pharmacological plus non pharmacological therapy in severe chronic heart failure patients

Category: Heart Failure and Cardiomyopathies

Abstract

Background: Studies revealed non pharmacological therapy consisting of yoga, meditation, exercise and education training, in combination with diet counselling, stress management, Enhanced external counter pulsation machine (EECP) have good role to prevent worsening heart failure.

Aim: Integrative program with focus on Integrated Medicine with lifestyle intervention in patients with severe chronic heart failure and beneficial outcome of integrated approach.

Methods: The Observational study a 3-year outpatient: A total of 202 middle-aged men and women, chronic heart failure with Hypertension, dyslipidemia, type 2 Diabetes mellitus and obesity were enrolled. The usual care (routine allopath medicines) group A (n=106) and the integrated approach (allopathy plus non pharmacological) with lifestyle interventional group B (n=96). For Group B-Education, Exercise: supervised endurance and yoga, meditation with restricted diet and aerobics: three times a week for three months with Enhanced external counter pulsation machine (EECP) four cycle weekly for 5 months.

Results: Proposed lifestyle improved after year 3 in the group A over group B. There were significant differences between groups, mean changes (and their 95% confidence intervals, CI) in waist circumference (p<0.001), in waist–hip ratio (p<0.01), decrease in HR (p<0.01), systolic BP (p<0.01) and diastolic BP (p<0.05) blood cholesterol and sugar, HBA1C level. Recurrent hospitalization with congestive heart failure (CHF) in group A =23/106, group B =7/96 (p<0.03). Atrial fibrillation in group A =12/106, group B =3/96 (p<0.08). Ventricular tachycardia in group A =8/106, group B =3/96 (p<0.23). Death in group A =18/106, group B =6/96 (p<0.36). Post MI-CHF in group A =9/106, group B =3/96 (p<0.36). Post CABG-CHF in group A = 8/106, group B =2/96.

Conclusion: Regular 3-year follow-up improvements in quality of life, decrease stress, decrease incidence of cardio-vascular events, improve Exercise Score, better reduction of heart rate, blood pressure, weight, waist circumference, three to four time decrease episodes of recurrent hospitalization, Cardiac Arrhythmias and 33% reduction of cardiovascular mortality in integrated group as compare to usual group.