

Cardiac Rehabilitation in Spain. EUROACTION: An Alternative Model

To the Editor:

As always, I was very interested to read the special issue of *Revista Española de Cardiología*, "Current Topics in Cardiology, 2008," and I was particularly interested in the article on cardiovascular prevention and rehabilitation signed by León Latre et al¹ representing that branch of the specialty.

The section on cardiac rehabilitation corresponding to physical exercise provides and comments wisely on the latest data in the literature. On the contrary, the brief paragraphs dedicated to cardiac rehabilitation units only provide provisional (unpublished) data from the survey sponsored by the European Association for Cardiac Prevention and Rehabilitation. In those paragraphs, the authors call our attention to Spain's deficiencies in this field, as we can see in the accompanying table, and which have not changed in decades.

For that reason, I would like to supplement that information with a reference to the European cooperative study named EUROACTION, published in *The Lancet* in 2008.²

The objective of EUROACTION³ was to determine if an outpatient, multidisciplinary, family-based and nursing staff-coordinated preventative cardiology programme for both coronary patients and high-risk individuals in local centres could show favourable results when meeting objectives compared with conventional management.

The study included more than 3000 coronary patients and 2300 high-risk individuals from 8 European countries, including Spain, who were assigned to intervention and control groups. The

methodology and the objectives are listed in the cited publication.²

After a year of follow-up, the authors observed a statistically significant drop in the number of smokers, a significant reduction in saturated fat consumption, and an increase in the consumption of fruits and vegetables and fatty fish, all in coronary patients. At-risk individuals and family members only showed a significant increase in fruit and vegetable consumption. Arterial pressure goals were also met in a statistically significant way for both coronary patients and at-risk individuals. Lowered cholesterol was similar in both groups, although in at-risk individuals the difference was significant. The increase in prescription of statin drugs was also significant for both groups, and the prescription of angiotensin converter enzyme inhibitors (ACE inhibitors) also increased among the at-risk group.

The EUROACTION authors conclude² that this cardiovascular prevention model can easily be used in daily medical practice, and on this subject they literally claim that in order to equal their results, it will be necessary to set up local preventative cardiology programmes, properly adapted to each country's medical, cultural, and economic conditions, in addition to having specialised cardiac rehabilitation centres.

In a much-cited "Update" on preventive policies that was recently published in *Revista Española de Cardiología*, Kotseva⁴ calls our attention to the fact that scant available resources are dedicated to those with the highest probability of benefiting from them, and indicates that since cardiovascular risk is a continuous challenge, the difference between secondary prevention and prevention in high-risk individuals could be considered artificial.

To summarize, we feel that programs like EUROACTION can constitute a valid alternative to improve Spain's current deficiencies in cardiac rehabilitation which we all know and lament.

José A. de Velasco

Coordinador Nacional del Estudio EUROACTION, Servicio de Cardiología,
Hospital General Universitario, Valencia, Spain.

3. Wood DA, Kotseva K, Jennings C, on behalf of the EuroAction Study Group. EUROACTION: a European Society of Cardiology demonstration project in preventive cardiology. *Eur Heart J* 2004;6 Suppl J:J3-15.
4. Kotseva K. Políticas preventivas globales. Estrategias a escala europea y mundial. *Rev Esp Cardiol*. 2008;61:960-70.

REFERENCES

1. León Latre M, Mazón Ramos P, Marcos E, García Porrero E. Temas de actualidad en prevención cardiovascular y rehabilitación cardíaca. *Rev Esp Cardiol*. 2009;62 Supl 1:4-13.
2. Wood DA, Kotseva K, Connolly S, Jennings C, Mead A, Jones J, et al; on behalf of EUROACTION Study Group. Nurse-coordinated multidisciplinary, family-based cardiovascular disease prevention programme (EUROACTION) for patients with coronary heart disease and asymptomatic individuals at high risk of cardiovascular disease: a paired, cluster-randomised controlled trial. *Lancet*. 2008;371:1999-2012.