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Racial Disparities in Cardiac Rehabilitation Attendance After Percutaneous Coronary Intervention

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Cardiac rehabilitation (CR) is a program designed to improve a patient's cardiovascular health through exercise, nutrition and education. Although there are many benefits to CR, it is an underutilized service. Furthermore, there has been evidence of racial disparities in referrals to and enrollment in CR programs. This leads to a significantly lower rate of initiation and participation in CR in minority patients.

PURPOSE The current study aims to compare demographic data of those patients who are referred to CR after a percutaneous coronary intervention (PCI) at a local hospital from 1/1/2017-1/31/2021 with the demographic data of those patients who engaged in at least one session of CR within the same timeframe.

METHODS Data regarding gender, age, race, medical insurance, cardiac diagnosis and CR attendance were provided by the hospital. The information obtained was limited to patients referred to CR after a percutaneous coronary intervention (PCI) procedure between January 1, 2017-January 31, 2021. A Chi-square test of independence was used to determine any associations of characteristics between participants and non-participants of CR. Participants were grouped into white (W) vs non-white (NW), males vs females, attended vs not attended, referred vs not referred, types of insurance (none, one type, more than one type), and pre-COVID (1/1/2017-2/29/2020) vs post-COVID (3/1/2020 – 1/31/2021).

RESULTS There was no effect of race on those referred to CR. Of those that attended CR, race was found to be a significant factor with W comprising 91.9% of those attending vs. 8.1% of NW ($p < 0.001$). Those who possessed either 1 (49.5%) or more (50.3%) types of insurance were significantly more likely to attend than those who had no insurance (0.02%) ($p < 0.001$). Also, W participants were more likely to have more than one type of insurance (49.2%) compared to NW participants (38.8%) ($p = 0.003$). There was more CR attendance pre-COVID (55.9%) compared to post-COVID attendance (48.0%; $p = 0.025$). There was no effect of gender on attendance ($p = 0.379$). **CONCLUSION** More whites than non-whites attend CR after a PCI at this particular hospital, which may, in part, be due to differences in insurance.