



## Home-based walking program eases clogged leg arteries

### American Heart Association Rapid Access Journal Report

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#### Study Highlights:

- A home-based exercise program helped people with clogged leg arteries walk farther and faster.
- Supervised exercise for PAD (peripheral artery disease) is not usually covered by insurance and is inaccessible for many people with this painful condition.
- Physicians should recommend walking even if their patients don't have access to a supervised exercise program.

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DALLAS, May 21, 2014 — A home-based exercise program helped people with clogged leg arteries walk farther and faster, according to new research in the *Journal of the American Heart Association*. The program was beneficial even 12 months after participants started the program.

Previously, studies have shown that supervised exercise can improve walking and lessen the symptoms of [peripheral artery disease](#) (PAD), but this is the first to document the long-term benefits of a home-based walking program.

“The problem with supervised exercise is that it takes many visits to a cardiac rehabilitation center or other exercise facility, and it is not covered by Medicare,” said Mary McGrae McDermott, M.D., lead author and the Jeremiah Stamler professor of medicine at the Northwestern University Feinberg School of Medicine in Chicago. “Our results should encourage physicians to recommend walking even if their patients do not have access to a supervised-exercise program.”

The study compared walking ability in patients and controls a year after the end of a six-month program that encouraged home-based walking. For the first six months, 81 patients participated in weekly meetings to provide support and skills training to help them adhere to the home exercise program. They also received phone calls to encourage continued walking during months 7-12.

Eighty-seven controls participated for a year in weekly educational meetings and received phone contact on unrelated PAD topics such as managing hypertension, cancer screening and vaccinations.

At 12 months, participants in the home-based program had increased the distance they could walk in six minutes from 355.4 to 381.9 meters, an improvement of about 87 feet. In contrast, the distance covered by the controls fell slightly, from 353.1 to 345.6 meters.

According to McDermott, walking exercise is the most effective non-invasive treatment for PAD, but a program must take into account that walking may cause a cramp-like pain in leg muscles that don't get sufficient oxygen. By alternating walking and rest, patients can build up the amount of time they can walk before pain occurs.

In the home program, patients were instructed to try to walk at least five days a week, building up to 50 minutes. When leg pain occurred, they were to stop and rest until legs were comfortable again and then resume walking.

"The results emphasize the importance of recognizing and treating PAD, a common condition that often remains undiagnosed and can become life-threatening as it restricts circulation to the legs, arms, feet, and kidneys," McDermott said. "Patients with PAD are also at heightened risk for heart attack and stroke."

"Don't think walking problems are a normal part of aging. If you have leg pain, weakness, tingling or other difficulty walking, report it to your doctor and ask about the possibility you may have PAD. Diagnosing PAD is important because therapies can improve your health."

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#### **Additional Resources:**

- **May is American Stroke Month.** For tools and resources visit [American Stroke Month](#).
- [About Peripheral Artery Disease](#)
- Photos and walking video are available on the right column of this news release link <http://newsroom.heart.org/news/home-based-walking-program-eases-clogged-leg-arteries?preview=18af4336ee6a7520a3db8edff5a70f6f>.