

PAD PATIENTS WALK TO BETTER HEALTH

A new study published in *Circulation* indicates that functional decline in patients with lower-extremity peripheral artery disease (PAD) can be slowed simply by increasing their physical activity in daily life. This is welcome news for patients with limited or no access to supervised exercise rehabilitation programs.

Compared with individuals with no PAD, patients with lower-extremity PAD have increased functional impairment, faster functional decline and, in line with these traits, substantially less physical activity in their daily life. Although supervised treadmill programs are known to improve walking performance in patients with PAD, many patients do not have access to this sort of program because of cost—these rehabilitation programs are not usually covered by medical insurance. Garg and colleagues set out to determine if higher levels of physical activity in daily life are also associated with slower functional decline in patients with PAD.

Physical activity was measured continuously over 7 days in 203 patients with PAD using vertical accelerometers. Patients' functional status was then assessed annually for up to 4 years (mean 33.6 months). Patients with higher levels of physical activity at baseline had less average annual functional decline than those with lower baseline activity.

According to Mary McDermott, the senior author on this study, “these results suggest that patients with PAD should be encouraged to increase their walking activity during daily life, particularly if they do not have access to a supervised treadmill exercise program.” Given the association between higher daily physical activity and slower functional decline of patients with lower-extremity PAD, clinical trials assessing the benefits of increasing levels of physical activity in the daily life of these patients are warranted, she suggests.

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Original article Garg, P.K. *et al.* Physical activity during daily life and functional decline in peripheral arterial disease. *Circulation* **119**, 251-260 (2009).