

CARDIAC REHABILITATION

Prescribed and supervised resistance training has been accepted as a component of rehabilitation program for person with or without cardiac disease. Resistance training, which is properly implemented based on individual medical supervision, has been proved that it does not bring higher risks for the patient than aerobic endurance training.

The appropriate resistance training methods for the cardiac patients are dependent on each patient's clinical status and cardiac stress tolerance. Taking this into consideration, a number of guidelines and recommendations of resistance training method for cardiac patients has been published. The practical implication of the resistance training method has been put forward and recently training prescriptions and recommendations including major muscle groups, resistance adjustment and repetition setting for training has been tested and analyzed.

All the major muscle groups for cardiac rehabilitation are able to be trained with HUR training equipment, which are designed for enhancing muscle performance and muscle mass. As the determinant for training intensity, heart rate monitor function should be contained in the equipment. Resistance is able to be set based on 1 repetition maximum (1RM); however, the primary concern in choosing the exercise, setting the resistance and repetition should always be the safety of the patient. The pain during and after the training possibly indicates that the patients have exceeded the individual limitation in terms of muscle capacity and cardiovascular stress tolerance.

In addition to medical supervision, equipment use for resistance training requires the knowledge of physiotherapy for posture and performance monitoring. Properly instructed resistance training enhances not only muscular strength and endurance but also functional capacity and quality of life.

