

The Heart Manual Quarterly at a glance...

- Fond Farewells
- Key dates
- Accessibility Tools
- Humour in cardiac rehabilitation
- Exercise and depression
- PIHM meeting and newly published!

PIHM Group Meeting

We were delighted to meet with our PIHM Group in Edinburgh, last December 2023. We discussed updates to the Heart Manual, particularly getting their valued thoughts and opinions on our new cartoons, which will be released soon! Our PIHM group provide us with invaluable feedback - thank you again to those involved! If anyone would be interested in joining the group please do email us!

Upcoming Key Dates

Please email our team at heart.manual@nhs.scot to reserve a place or order for your team members for:

1. **Heart Manual Training:** we still have space available on our HM training on **23rd and 24th April**

Look out for REACH-HF training dates for next year, which will be released for 2025 soon!

Accessibility Tools

On the Post MI Digital Manuals you can now access the REACH Deck accessibility tools.

Tools include:

- **Read Aloud Tool**
- **Tool Focus Tool**
- **Simplification Tool**



And so much more...

If you would like some more information or support using the accessibility tools we have digital reboot sessions for facilitators. Please email heart.manual@nhs.scot to reserve a place!

The Power of Humour in Cardiac Rehabilitation

In recent years, humour has emerged as a promising tool in cardiac rehabilitation. Previous studies suggest that humour-based interventions can serve as a cost-effective and beneficial alternative treatment for individuals with cardiovascular disease (CVD). For instance, a randomized controlled trial (Saffi et al., 2023) implemented laughter therapy in cardiac rehabilitation programs for patients with coronary artery disease. The study concluded that laughter therapy is effective in cardiac rehabilitation.

Measuring Humour: Many studies have adopted a straightforward approach, incorporating comedy shows tailored to each patient's preferences. These shows are typically implemented once or twice a week.

The Power of Humour: Humour may be an accessible and cost-effective tool that requires minimal facilitator training. Research has shown that it can lead to decreased blood pressure, heart rate, and cortisol levels. As we continue to explore its impact, humour remains a valuable asset in promoting cardiovascular health and well-being.

Fond Farewells

We give a fond farewell to both Anna, assistant psychologist and Sharon our specialist nurse practitioner at the Heart Manual who have both done amazing work and hope you pop into to see us soon! You will both be missed!

Is exercise an effective treatment for depression?

In a comprehensive systematic review and network meta-analysis, researchers sought to determine the optimal exercise dose and modality for the treatment of depression.

Results

In terms of the most effective form of exercise this review found the following as the most effective:

- Walking or jogging (moderate reduction in depression)
- Yoga
- Strength Training

The modalities of exercise and publication bias surrounding the studies can be seen in the table below.

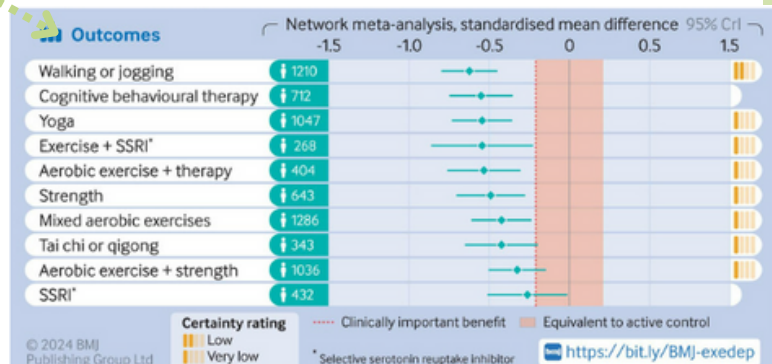
Intensity mattered:

- Effects of exercise were proportional to the **prescribed intensity**.
- Strength training and yoga were well-tolerated compared to other treatments.
- Exercise found to be just as beneficial for those with and without comorbidities and with varying baseline degrees of depression.

Conclusions

1. Exercise is an effective treatment for depression and should be considered alongside psychotherapy and antidepressants.
2. Walking or jogging, yoga, and strength training stand out as particularly effective.
3. Intensity plays a crucial role in outcomes.

Further research and tailored exercise recommendations can enhance depression management.



Home-based self-management multimodal cancer interventions & cardiotoxicity: a scoping review

We are happy to announce our scoping review on home-based, self-management multimodal cancer interventions and cardiotoxicity has been published by Springer Nature! This scoping review highlighted the need for multidimensional cardiac rehabilitation to be offered for patients with cancer and beyond, which has yet to be successfully translated into practice.

Check it out at:

<https://doi.org/10.1186/s40959-024-00204-6> or as a PDF here

<https://link.springer.com/content/pdf/10.1186/s40959-024-00204-6.pdf>.

RESEARCH Open Access

Home-based self-management multimodal cancer interventions & cardiotoxicity: a scoping review

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Abstract

Background Due to advancements in methods of cancer treatment, the population of people living with and beyond cancer is dramatically growing. The number of cancer survivors developing cardiovascular diseases and heart failure is also rising, due in part to the cardiotoxic nature of many cancer treatments. Guidelines are being increasingly released, emphasising the need for interdisciplinary action to address this gap in survivorship care. However, the extent to which interventions exist, incorporating the recommendations of cardio-oncology research, remains undetermined.

Objective The aim of this scoping review is to assess the nature, extent and remit of existing cancer care interventions and their integration of cardio-oncology principles.

Methods The review was conducted in accordance with the PRISMA Extension for Scoping Reviews Guidelines. Databases were independently searched for articles from 2017 to 2022, by two members of the research team. Data were charted and synthesised using the following criteria: (a) the focus of the intervention (b) the medium of delivery (c) the duration (d) the modalities included in the interventions (e) the research articles associated with each intervention (f) the type of studies conducted (g) key measures used (h) outcomes reported.

Results Interventions encompassed six key modalities: Psychological Support, Physical Activity, Nutrition, Patient Education, Lifestyle and Caregiver Support. The focus, medium of delivery and duration of interventions varied significantly. While a considerable number of study protocols and pilot studies exist documenting HSMIs, only 25% appear to have progressed beyond this stage of development. Of those that have, the present review did not identify any 'feasible' interventions that covered each of the six modalities, while being generalisable to all cancer survivors and incorporating the recommendations from cardio-oncology research.

Conclusion Despite the substantial volume of research and evidence from the field of cardio-oncology, the findings of this scoping review suggest that the recommendations from guidelines have yet to be successfully translated from theory to practice. There is an opportunity, if not necessary, for cardiac rehabilitation to expand to meet the needs of those living with and beyond cancer.

Keywords Cardiotoxicity, Cardio-Oncology, Cancer Interventions, Self-Management, Home-Based, Multimodal

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Contribute to the Heart Manual Quarterly! Is there a Heart Manual story or memory you would like to share via the newsletter? Please submit to: heart.manual@nhs.scot

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