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Exercise Intensity Prescription in Cardiac Rehabilitation: A Narrative Review Comparing High-Intensity Interval Training Versus Moderate Continuous Training

CONFERENCE ABSTRACT

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Abstract

Cardiac rehabilitation is a critical component of secondary prevention for cardiovascular disease, with exercise prescription playing the central role in improving patient outcomes. Moderate continuous training (MCT) is the standard approach; however, high-intensity interval training (HIIT) has emerged as a potential alternative to MCT. This narrative review aims to compare HIIT and MCT in cardiac rehabilitation, focusing on physiological effectiveness, clinical outcomes, safety considerations, adherence, and clinical decision-making. This narrative review synthesizes current literature examining HIIT and MCT within cardiac rehabilitation settings. Peer-reviewed studies were identified, with emphasis on adult cardiac populations; specifically individuals post-myocardial infarction, coronary artery bypass grafts, stents, and heart failure. Articles were selected based on relevance to key subtopics, including cardiovascular adaptations, functional outcomes, adverse events, and patient adherence. The findings were analyzed to identify consistent themes and differences between training modalities. Current evidence suggests that, while maintaining a safe environment when appropriately

prescribed and supervised, HIIT may obtain greater improvements in aerobic capacity and cardiovascular function compared to MCT. Additionally, HIIT may enhance patient adherence due to its time efficiency and variability. However, considerations regarding patient risk stratification and program design remain crucial. Understanding the benefits and limitations of HIIT and MCT can help improve individualized exercise prescription and optimize outcomes in cardiac rehabilitation, particularly for younger or previously active patients.

Keywords: HIIT, high-intensity interval training, MCT, moderate continuous training, rehabilitation