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Two hundred and ten men were referred consecutively to a rehabilitation program following aortocoronary bypass surgery. The program involved exercise tolerance testing 8 and 20 weeks postoperatively, with an intervening 12-week exercise program. A retrospective analysis of data showed 50% of these patients to be on no medication throughout their rehabilitation and the others on medications likely to affect cardiac performance. Factors likely to influence exercise tolerance such as age, medication and extent of revascularization were subjected to multivariate analysis in these two cohorts of patients. Age (up to 60 years) and the extent of revascularization did not appear to influence exercise tolerance. Following the 12-week exercise program, patients in both groups had improved significantly ( $P$  less than 0.01), but the initial and final performance of the cohort of patients requiring cardiac drugs was significantly poorer than those on no medication ( $P$  less than 0.01).