

Poster presentation: 109

Relationship between angina and physical activity to the Quality Of Life (QOL) of patients following Coronary Artery Bypass Graft (CABG)

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Coronary artery disease has been identified as the most common cardio vascular disease. Prevalence of coronary artery disease is on the rise in Sri Lanka resulting in high hospital admission, morbidity and mortality. Coronary artery bypass graft surgery is one of the major treatment procedures in coronary revascularization. The main goals of coronary artery bypass graft include improving chance of survival, improving quality of life to resume an active life style and reducing angina. An individual's quality of life is defined as general wellbeing and negative and positive features of life. This study was conducted to find out the relationship between angina and physical activity to the quality of life in patients after coronary artery bypass graft. This was a descriptive cross sectional study of 90 patients after coronary artery bypass graft 9 to 15 months following the surgery who attended cardiology and cardiothoracic clinics at Sri Jayawardhanapura General Hospital. Data was collected via quality of life questionnaire, six-minute walk test and Canadian cardiovascular society grading of angina pectoris. Quality of life was measured by using self-administered Nottingham Health Profile questionnaire and the Canadian cardiovascular society grading of angina was used to evaluate the angina grade of the patient. Six-minute walk test was performed by each patient under close observation of the interviewer. Patients with angina grade I had a good quality of life (Nottingham health profile score 0-0.26) in 61.2% and poor quality of life (Nottingham health profile score ≥ 0.27) in 38.8%. Patients with angina grade II had a good quality of life in 36.6% and poor quality of life in 63.4%. Hence there is a significant association between poor quality of life and angina grade II ($p=0.02$). The physical activity after the coronary artery bypass graft was measured through the performance of average percentage of six-minute walk test ($\leq 50\%$ poor performance and $\geq 51\%$ good performance). Patients with good physical activity ($\geq 51\%$ performance in six-minute walk test) had good quality of life in 54.2% and poor quality of life in 45.8%. Patients with poor physical activity ($\leq 50\%$ performance in six-minute walk test) had good quality of life in 33.3% while poor quality of life in 66.7%, even though the six-minute walk test was found not to be significantly associated with quality of life ($p=0.114$). Furthermore, a relationship was found between angina grade and physical activity ($p=0.002$).

Keywords: Angina grade, coronary artery bypass graft, physical activity, quality of life