

PRESS RELEASE

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Can Patients with Chronic Heart Failure Benefit from Tai Chi?

October 5, 2004 – Tai Chi, a mind-body movement therapy with origins in Chinese martial and healing arts, is experiencing increased popularity in the United States. Can this therapy benefit patients with chronic heart failure? In a paper published in the current issue of *The American Journal of Medicine*, researchers conducted a randomized controlled trial of this technique with 30 patients and found that Tai Chi might be a beneficial adjunct to standard medical treatment.

Patients with heart failure experience progressively deteriorating function. Although many studies have shown that exercise can have numerous positive effects on quality-of-life and survivability, there are no specific American Heart Association guidelines for patients with heart failure.

Tai Chi differs from conventional workouts because it includes meditative elements, in addition to non-strenuous, low-impact physical efforts. In this study, a group of randomly assigned patients attended 1-hour classes held twice weekly for 12 weeks, in addition to standard pharmacologic therapy, dietary counseling, and general exercise advice per American College of Cardiology/American Heart Association guidelines. The control group followed only the standard guidelines.

Writing in the article, Gloria Y. Yeh, MD, MPH, of the Division for Research and Education in Complementary and Integrative Medical Therapies and Division of General Medicine and Primary Care, Harvard Medical School, states, "We found that Tai Chi enhanced the quality of life and functional capacity in patients with chronic heart failure who were already undergoing standard cardiac

care. These patients demonstrated improvements in 6-minute walk distances and quality-of-life scores compared with patients who did not practice Tai Chi. In addition, patients who practiced Tai Chi had reduced B-type natriuretic peptide (BNP) levels, suggesting an improvement in cardiac filling pressures."

While there were positive effects demonstrated in the study, it is not clear which aspect of the Tai Chi program is responsible. In an editorial in the same issue, researchers from the University of Vermont suggest that while the observed improvements may relate to physical aspects of the Tai Chi program, they also could be rooted in psychological effects. Philip A. Ades, MD, writes that furthermore, "A concern in the study design is that the Tai Chi group had roughly 24 hourly contact sessions with Tai Chi/health care personnel over 3 months, along with social contact with co-participants, compared with almost no contact in the usual-care control group. Thus, one can question whether the improvements in self-reported quality of life were a result of the physical and meditative aspects of the Tai Chi program or the benefits of social contact with participants and health care personnel. Finally, a placebo effect could have occurred in patients who enjoyed participation in Tai Chi and the contact with the persons running the program." Nonetheless, the decrease in BNP is particularly intriguing.

The Tai Chi study is reported in "Effects of Tai Chi Mind-Body Movement Therapy on Functional Status and Exercise Capacity in Patients with Chronic Heart Failure: A Randomized Controlled Trial" by Gloria Y. Yeh, MD, MPH, Malissa J. Wood, MD, Beverly H. Lorell, MD, Lynne W. Stevenson, MD, David M. Eisenberg, MD, Peter M. Wayne, PhD, Ary L. Goldberger, MD, Roger B. Davis, ScD, and Russell S. Phillips, MD. The editorial is "Benefits of Tai Chi in Chronic Heart Failure: Body or Mind?" by Philip A. Ades, MD, and Ge Wu, PhD.

These articles appear in *The American Journal of Medicine*, Volume 117, Number 8 (October 15, 2004), published by Elsevier.

Full text of the articles mentioned above is available upon request. Contact ajmmedia@elsevier.com to obtain a copy or to schedule an interview.

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