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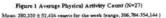
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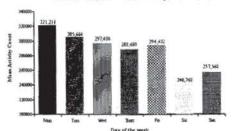
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patterns of transplant recipients, especially women. We conducted this study to 1) describe levels and types of physical activity using actigraphy and self-report; and 2) assess the relationship between physical activity, quality of life, and relevant health indicators (hypertension, hyperlipidemia, and obesity) among female heart transplant recipients. METHODS: Twenty-seven women (average age, 57 ± 13 years, primarily Caucasian [82%], retired [89%], married [67%], average time since transplant 2.1 ± 1.3 years), were asked to report amount and types of physical activity and quality of life and wear an actigraph for one week to measure physical activity level. RESULTS: Average physical activity counts for the week are illustrated on Figure 1. Self-reported physical activity level on a 0 to 10 scale was 4.3 ± .37 (range, 0-7). The actigraph and self-reported measures were significantly correlated (r = . 661, p = . 000), We found that women were more likely to engage in household tasks and family activities than occupational activities or sports. Higher levels of physical activity were associated with better quality of life. A negative correlation was found between levels of physical activity and presence of hypertension, hyperlipidemia, and obesity. CONCLUSION: We found that a majority of female transplant recipients remains sedentary. Therefore, measures to enhance physical activity are recommended and may be beneficial in improving overall outcomes in this patient population.





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Physical Activity Patterns in Heart Transplant Women

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BACKGROUND: Maintaining regular, long-term physical activity is critical to achieve favorable effects of heart transplantation, yet, at present little is known about the physical activity