

What is the Most Serious Obstacle to Participation in Outpatient Cardiac Rehabilitation Programs among Iranian Patients?

Dear Editor,

Cardiac rehabilitation programs (CRs) are among the most important third-level prevention services that can have positive health outcomes and reduce cardiac death.^[1] Despite the numerous evidences that indicate the usefulness of CRs, few patients – especially in developing countries – participate in these programs.^[2] Compared to developed countries with over 70% participation in CRs,^[3] less than 15% of Iranian patients participate in the programs.^[2]

Various studies have pointed to the role of many barriers such as the lack of knowledge about the benefits of CRs, the distance and lack of easy access, costs, transportation problems, and socioeconomic status.^[4] Nevertheless, one of the most important obstacles is the financial problems of patients and the lack of insurance coverage.^[2] International standard protocols recommend various delivery formats of one to five sessions per week for 2–38 weeks.^[5] Insurance companies cover all sessions according to these protocols. Although these protocols are universally accepted and implemented in all countries, including Iran, insurance companies to their own taste cover a small number of sessions. Despite the high rate of initial registration, patients generally refuse to participate after being informed about the lack of insurance coverage. Considering the main format of delivery of these services in Iran is hospital-based approach, the patients need to exercise 26–40 sessions. However, only the insurance of the Imdad Committee (Komeeteh-e-Emdad) covers 90% of the entire sessions. Other insurances including treatment services (Khadamat-e-Darmani), social security (Tamin-e-Ejtemaei), and armed forces medical services (Khadamat-e-Darmani Neurohaye Mosalah), respectively, cover 70% 10 sessions, 70% 26 sessions, and 90% 20 sessions.

Based on the above considerations, in developing countries such as Iran, unlike developed countries, insurance companies do not follow from the standard medical guidelines. This problem confronts patients with many challenges to participating in CRs and benefits from its advantages. In the first place, the deficit threatens the health of this vulnerable group. On the other hand, a lot of financial burden in the near future will be imposed on the health system of the country. Thus, it is recommended that health policymakers, especially in Iran, interact with insurance companies to find the right strategies to solve the challenge.

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Conflicts of interest

Nothing to declare.

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