"Survival of the fittest?" The evolving case for physical

The evolving case for physical activity in the prevention and management of CVD

Professor Andrew Maiorana
Clinical Exercise Physiologist
Fiona Stanley Hospital &
Curtin University

Email: A.Maiorana@curtin.edu.au





CSANZ New Zealand
Annual Scientific Meeting

Energy Events Centre, Rotorua | 23-25 May 2025

www.csanzasm.nz



Disclosures

The following presentation will NOT include discussion on any commercial products or service and that there are NO financial interests or relationships with any of the Commercial Supporters of this year's ASM.



Wadjuk Noongar Boodjar



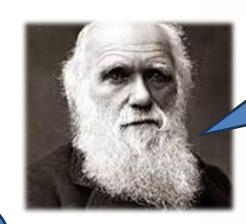


Exercise Physiology 101

- **Physical activity** any bodily movement produced by skeletal muscles that requires energy expenditure. Includes exercise, but also activities daily living, like walking, playing, working, or household chores.
- **Exercise** activity that is planned, structured, and repetitive, with a specific goal of improving or maintaining fitness.
- Cardiorespiratory fitness maximal oxygen consumption (VO₂max) measured or estimated during an exercise test.
- METS metabolic equivalent. 1 MET = 3.5ml/kg/min of oxygen consumption.



Survival of the fittest?



Charles Darwin:

"...the species that survives is the one that is able best to adapt and adjust to the changing environment..."

Hippocrates
"Walking is Man's
best medicine!"



Bob Marley"Only the fittest of the fittest shall survive"



What are the health benefits of being active?

Inactivity contributes to

1 in 10

premature deaths















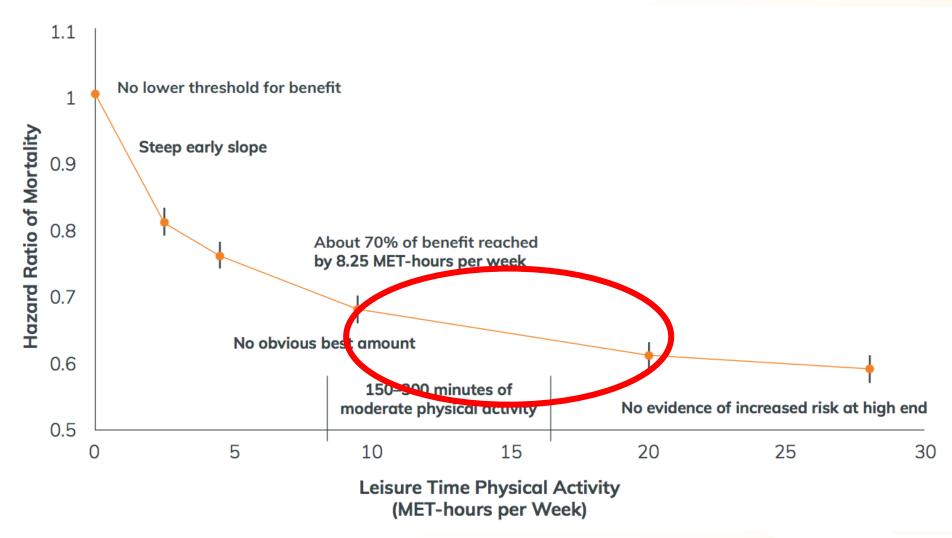








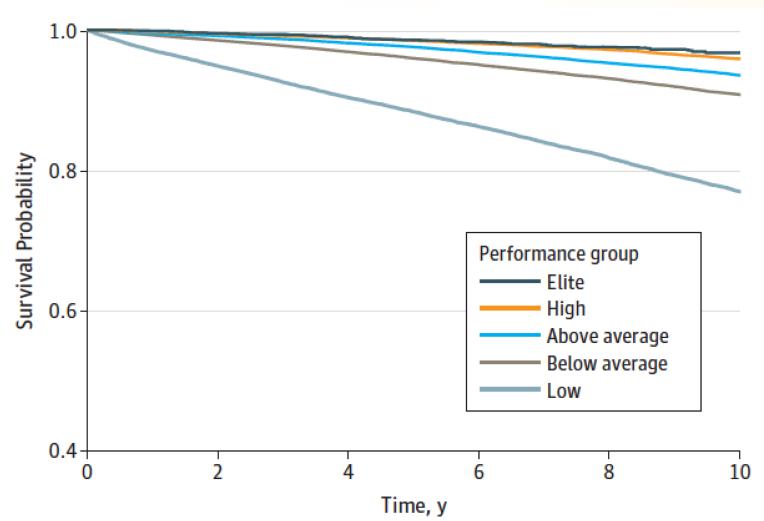
Physical activity and survival





Fitness and survival

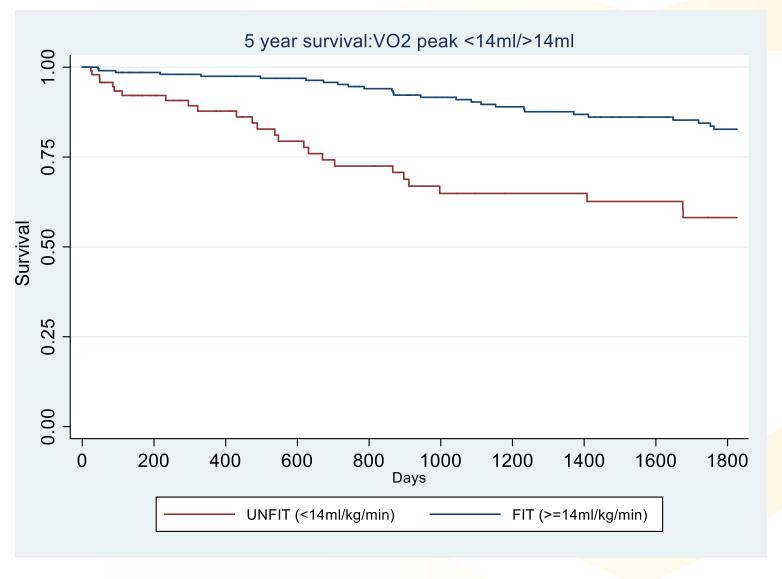
N= 120,000, 10 year follow-up





Fitness and survival: patients with HF

 312 patients with HF (82% males, NYHA Class I-IV), CPET between 1998 and 2015



Maiorana et al. Eur J Prev Cardiol 2020; 27: 2095-2098.



Does improving fitness improve survival?

0.1 - 2.0

>2.0 METs

0.1-2.0

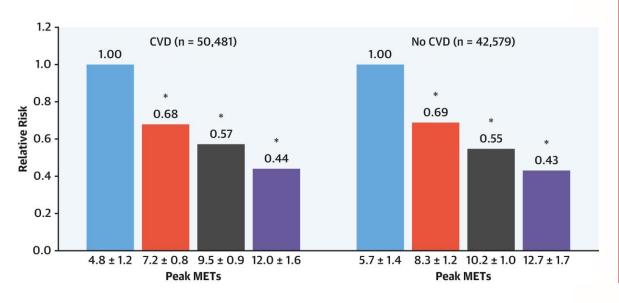
Kokkinos P, et al. J Am Coll Cardiol. 2023;81(12):1137-1147.

>2.0 METs

0.1-2.0 METs >2.0 METs 0.1-2.0 METs >2.0 METs

Methods:

- $N = 93,060, 30-95 \text{ years (mean } 61.3 \pm 9.8 \text{ yrs)}.$
- 2 treadmill exercise tests, mean 5.8 ± 3.7 yrs apart
- Participants assigned to age-specific fitness quartiles based on peak METS on the baseline test.
- 18,302 participants died during follow-up



CENTRAL ILLUSTRATION: Mortality Risk According to Changes in Cardiorespiratory Fitness Categories Q1 (Least-Fit) Q2 (Low-Fit) 2.0 -2.0 1.60 1.5 € 1.0 € 1.0 0.86 0.67 0.64 0.5 Increase Increase Decrease No Change Increase Increase Decrease 0.1-2.0 METs >2.0 METs 0.1-2.0 METs >2.0 METs >0.1-2.0 >2.0 METs 0.1-2.0 METs >2.0 METs METS Q4 (High-Fit) Q3 (Moderate-Fit) 2.0 1.55 1.5 1.5 **또** 1.0 0.96 0.90 **至** 1.0 · 0.79 0.61 0.57 0.5 No Change Increase Decrease Decrease No Change Increase Increase Increase



Does improving fitness improve survival?

- Changes in fitness of ≥1.0 MET (increases or decreases) are associated with progressive changes in mortality risk (Kokkinos et al, JACC, 2023).
- In patients with heart failure: even modest improvements were associated with mortality benefits 6% ↑ in VO₂peak confers 7% ↓ in mortality (HF Action Trial) O'Conner et al. JAMA, 2009)

Interim summary...

- Greater levels of physical activity and higher fitness are associated with better survival
- Increasing fitness results in improved survival
- Benefits can be achieved with relatively modest changes!

What can we do to help people improve their fitness?

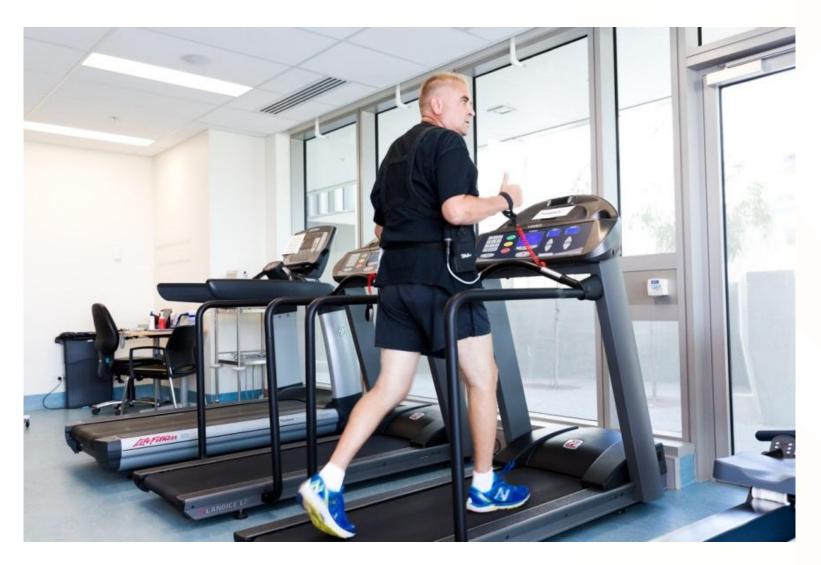


CSANZ New Zealand Annual Scientific Meeting

Energy Events Centre, Rotorua | 23-25 May 2025

www.csanzasm.nz

Supporting people to improve fitness: cardiac rehabilitation









Aussie-FIT (Fans in Training) for men with or 'at risk' of CVD

- ~50% education, 50% physical activity
- Delivered by trained football coaches in footy clubs supported by an Exercise Physiologist
- Draws on appeal of sport
- Uses behaviour change, motivation and education strategies







Co-designing culturally appropriate exercise with First Nations communities



"Build it and they will come" Heart Health: for our people, by our people



Dimer et al. Aust Health Review. 2013 Feb;37(1):79-82.

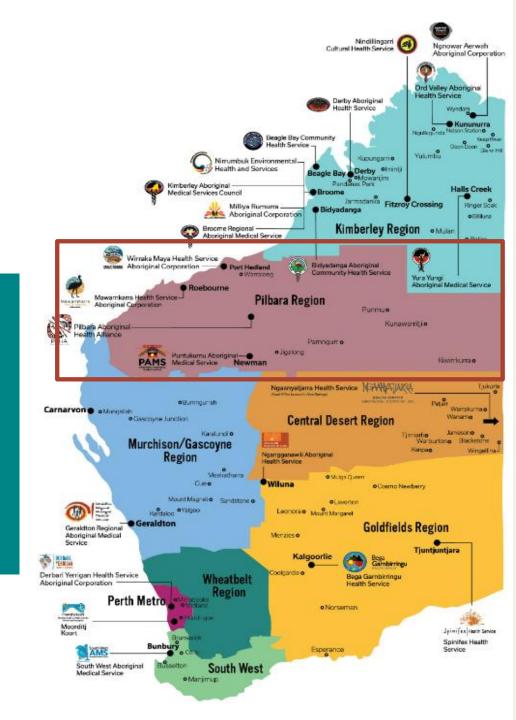


Co-designing culturally appropriate exercise programs

- Community-led
- Programs must be consistent with community priorities, cultural protocols and methodologies
- Strength-based approach
- Embrace Aboriginal ways of knowing, being and doing, acknowledging both traditional and western concepts of health

Challenges facing Martu communities

- Geographical distance
- Cultural and linguistic barriers
- Health workforce instability
- Lack of facilities
- Extreme environment



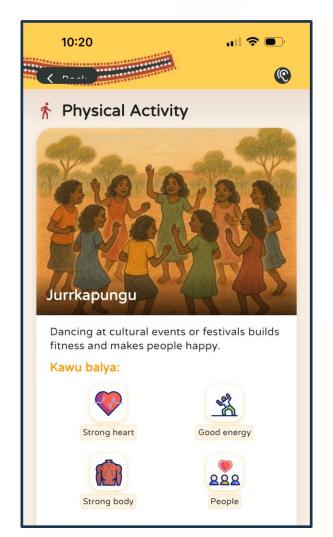
Healthy Connections Mobile Medi-Kit:





Kawu Balya: "Your health, your story"







"The Martu were last out of the desert... but that doesn't mean we can't be leaders with technology"

Martu Elder



Summary

- Increasing physical activity and fitness are important public health objectives.
- Need to ensure equity of access to health and lifestyle programs to build active communities for all.
- Working with diverse communities to develop activity programs that meet their needs and expectations.



Survival of the fittest???

Survival of the fortunate!



Thanks for listening

Professor Andrew Maiorana
Clinical Exercise Physiologist
Fiona Stanley Hospital &
Curtin University

Email: A.Maiorana@curtin.edu.au



CSANZ New Zealand
Annual Scientific Meeting

Energy Events Centre, Rotorua | 23-25 May 2025

www.csanzasm.nz