HEALTH PROMOTION

SHOULD A TREADMILL EXERCISE TEST BE DONE BEFORE SEDENTARY SUBJECTS EXERCISE VIGOROUSLY?

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Introduction
Before embarking on an exercise programme, a stress test is often recommended for people with sedentary lifestyles. The purpose of this study was to determine whether such a test is necessary.

Methodology
Healthy subjects aged 45 and over who had been leading a sedentary lifestyle and volunteered to participate in a vigorous exercise programme 3 times per week were enrolled, provided they had written clearance from their General Practitioner. They underwent an exercise stress treadmill test using the Bruce protocol. Those with abnormal results were referred to their GP for further management.

Results
A total of 297 subjects (211 females, 86 males) were enrolled: 57, 112, 110, and 18 aged 45-54, 55-64, 65-74, and ≥75 years, respectively. Fifty-four subjects had an abnormal test and were referred to their GPs: because of an abnormal ST depression (42), a grossly elevated systolic BP (4), and significant arrhythmias (8). The four with high BP were appropriately treated, and a subsequent stress test was normal. Cardiologists cleared 17 subjects without further testing; 25 underwent a thallium test, which was normal in 20 and abnormal in 5. Three of the 5 underwent cardiac catheterization, and only 1 was advised not to enroll in the exercise programme. One subject underwent cardiac catheterization without prior thallium testing and was cleared; 6 refused further testing. Of the 54 subjects who had an abnormal stress test, only 2 were not cleared for participation in the exercise programme.

Conclusion
This data suggests that an exercise stress test need not be recommended routinely before enrolling asymptomatic healthy sedentary people in an exercise programme. It is nevertheless prudent to have a note from the subject’s GP to ensure that some medical condition is not overlooked.

PATIENT INFORMATION LEAFLETS FOR THE ELDERLY: IS LOCALLY PRODUCED LITERATURE EASY TO READ AND UNDERSTAND?

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Introduction
Information leaflets are increasingly being used to improve patients’ understanding of their illness and its treatment, and to help them in accessing appropriate services. However, if leaflets are to be useful they must be easy to read and understand. We set out to evaluate the literature being produced locally, either by our own hospital trusts or by local voluntary organisations.

Methodology
In a single search of wards and outpatients we found 40 leaflets; 14 were locally produced, and 26 published by the government or a major charity. We assessed each against the Royal National Institute for the Blind (RNIB) recommendations for typeface (no less than 12 point) and font (not italics). We also assessed the text’s comprehensibility using the Gunning FOG index; a reading score that it is recommended should not exceed 12.

Results
24 of 40 leaflets (60%) used acceptable print. The proportion of locally produced documents (86%) that met the RNIB standard was significantly (p = 0.02 on χ² testing) greater than that of national publications (46%). Overall the leaflets had a mean FOG index of 11.8 (range 7.5 to 16.1); 22 (55%) had an acceptable result. The proportion of locally produced documents that met the standard for FOG index (64%) was slightly, but non-significantly, higher than that of national publications (50%).

Conclusion
Local organisations may have more limited resources than their national counterparts, but show a greater awareness that their elderly readers may be visually impaired, and appear at least as successful in their use of "Plain English".

INFLUENZA VACCINATION IN ELDERLY PEOPLE: WHO HAS IT AND WHY?

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Introduction
During the winter months many elderly and medically compromised patients suffer from influenza and influenza related illnesses which may be avoided or reduced in severity by appropriate vaccination. The aim of this study was to investigate a cohort of elderly in-patients to determine whether they had been vaccinated against influenza during the winter of 1996/97 and to identify any factors which influenced the patient’s uptake of vaccination.

Methods
During February and March 1997 all patients on acute care of the elderly wards in Mersey Region were approached and asked about influenza vaccination.

Results
Of the 649 patients seen 209 (32%) were excluded on the basis of a mental test score <7. A further 108 patients were either unconscious or too ill to be interviewed, 15 refused interview and 38 had severe communication difficulties. The remaining 279 patients were assessed of whom 171 had not been vaccinated and 108 had (a 39% uptake). Of those who were not vaccinated 32% had refused it, 48% were concerned about side effects and only 25% felt that vaccination worked. In the group of patients who were vaccinated only 14% were worried about side effects and 93% considered that vaccination was efficacious. Overall less than half of those patients with medical coexisting diseases were appropriately vaccinated.