



# Awareness of Cardiovascular Physiotherapy Among Medical Practitioners in India: A Narrative Review

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**Abstract:** Cardio-vascular diseases (CVDs) remain the leading cause of death in India, posing a major burden on the healthcare system. Cardiovascular physiotherapy, especially through structured cardiac rehabilitation (CR), has demonstrated effectiveness in reducing morbidity and improving the quality of life for patients with heart conditions. Yet, awareness and integration of such services among medical practitioners in India remain significantly inadequate. This narrative review examines the current level of physician awareness, highlights the role of cardiovascular physiotherapists, identifies key challenges in interdisciplinary collaboration, and proposes evidence-based strategies to bridge the awareness gap. Improving interprofessional education, implementing curricular reforms, and integrating policy support are essential to achieving holistic and patient-centered cardiovascular care.

**Keywords:** Cardiovascular physiotherapy, Physician awareness, Interdisciplinary healthcare, Medical education

## 1. Introduction

India faces a growing epidemic of cardiovascular diseases, accounting for over 28% of total deaths according to WHO (2021). With the transition from communicable to non-communicable diseases, the role of long-term rehabilitation and lifestyle modification has become vital. Cardiovascular physiotherapy, embedded within cardiac rehabilitation, includes structured exercise training, patient education, and psychosocial support, significantly reducing mortality, improving functional capacity, and enhancing quality of life. Despite its proven benefits, cardiovascular physiotherapy remains underutilized due to a lack of awareness among medical practitioners who act as primary gatekeepers for referrals. This review focuses on examining current levels of awareness, identifying existing gaps, and proposing actionable strategies for better integration.

## 2. Cardiovascular Physiotherapy: Scope and Practice

Cardiovascular physiotherapy is a specialized area that addresses the physical rehabilitation needs of patients with cardiac conditions. It encompasses structured aerobic and resistance training, breathing exercises, education about risk factor modification, and psychological counseling. These interventions are typically delivered across four phases of cardiac rehabilitation:

- Phase I: Inpatient (early mobilization post-event or surgery)
- Phase II: Immediate outpatient (supervised exercise and education)
- Phase III: Intermediate (transition to home-based or community rehab)
- Phase IV: Maintenance (long-term lifestyle and exercise adherence)

Evidence from international guidelines (e.g., AACVPR, ACSM) and Indian studies underscores that physiotherapy-led cardiac rehabilitation improves exercise tolerance, reduces hospital readmissions, and enhances cardiovascular outcomes. However, implementation is inconsistent across Indian healthcare institutions, with limited referral systems and physiotherapists often being sidelined in cardiac teams.

3. Medical Practitioners’ Awareness: National and Global Perspectives

Globally, studies have shown variable levels of physician awareness regarding the benefits of physiotherapy in cardiac rehabilitation. In developed nations such as the USA and UK, structured programs ensure better interdisciplinary collaboration. In contrast, studies in India reveal low levels of awareness and poor referral rates to physiotherapy services. For example, Sharma et al. (2019) found that only 32% of surveyed physicians in tertiary hospitals were aware of cardiac rehab protocols, and less than 15% regularly referred patients to physiotherapy. Lack of exposure during medical training, workload, and unfamiliarity with rehab protocols are primary reasons cited. A study by Rajendran et al. (2020) also emphasized that over 60% of medical practitioners had limited understanding of exercise prescriptions in cardiac care. Similarly, Patil and Singh (2021) observed that interdisciplinary case discussions were rare in most tertiary setups, limiting collaborative learning. Gopinath et al. (2017) highlighted disparities in awareness levels between private and government hospitals, suggesting a lack of standardized training.

Table 1: Summary of Studies on Physician Awareness and Practice of Cardiovascular Physiotherapy in India

Study	Year	Location	Sample Size	Key Findings
Sharma et al.	2019	Tertiary Hospitals, North India	212	Only 32% aware of cardiac rehab protocols; <15% referred regularly
Rajendran et al.	2020	Kerala	178	60% lacked knowledge on exercise prescription in cardiac care
Patil & Singh	2021	Metro cities	150	Interdisciplinary collaboration minimal; lack of structured interaction
Gopinath et al.	2017	Multi-centric	248	Awareness higher in private setups vs. public hospitals
Sahu et al.	2019	Central India	100	CME programs improved short-term knowledge retention

4. Barriers to Integration in India

Several barriers hinder the inclusion of cardiovascular physiotherapy in mainstream cardiac care:

- Educational Gaps: Undergraduate medical curricula often lack modules on physiotherapy or rehabilitation science.
- Professional Silos: Limited interprofessional training fosters a fragmented approach to patient care.
- Urban-Rural Divide: Rehabilitation services are largely urban-centric, limiting access in rural settings.
- Systemic Constraints: Institutional policies rarely mandate multidisciplinary rehab teams; physiotherapists are often seen as adjunct staff.
- Perceptual Barriers: Some physicians underestimate the scientific basis and scope of physiotherapy.

## 5. Strategies to Improve Awareness

To address the above challenges, a multipronged strategy is required:

- Curricular Reforms: Introduce cardiovascular physiotherapy modules in MBBS and MD programs.
- Interdisciplinary CMEs: Conduct joint workshops and seminars involving cardiologists and physiotherapists.
- Policy Advocacy: Encourage NMC and hospital boards to mandate cardiac rehab referrals.
- Collaborative Research: Promote co-authored studies and presentations between physicians and physiotherapists.
- Digital Outreach: Use webinars, e-learning modules, and tele-rehabilitation platforms for physician sensitization.

## 6. Future Directions and Research Gaps

There is a need for nationwide surveys assessing physician attitudes toward physiotherapy, especially in Tier II and Tier III cities. Exploring patient outcomes linked to interdisciplinary referral systems could provide compelling data for policy change. Innovations like AI-assisted rehab platforms and community-based programs must be evaluated for scalability. Finally, a national registry documenting cardiac rehab uptake and outcomes could serve as a benchmark for progress.

## 7. Conclusion

The gap in awareness of cardiovascular physiotherapy among Indian medical practitioners poses a major obstacle to the holistic care of cardiac patients. Bridging this gap requires systemic, educational, and collaborative interventions. Integrating physiotherapists into cardiac teams, improving medical education, and building institutional support for cardiac rehabilitation are essential steps to optimize patient outcomes and promote interdisciplinary respect within healthcare.

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