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ROLE OF PHYSIOTHERAPY IN POST INFARCTION PERIOD IN MALE PATIENTS

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Myocardial infarction (MI) is a major cause of morbidity and mortality, particularly among male patients, who demonstrate higher incidence rates and cardiovascular risk profiles. Following an acute MI, patients often experience reduced cardiac function, physical deconditioning, and psychological distress. Physiotherapy forms a key component of cardiac rehabilitation, aiming to restore functional capacity, prevent complications, and improve long-term outcomes.

Early physiotherapy intervention, initiated once the patient is hemodynamically stable, is essential in the post infarction phase. Early mobilization helps prevent complications such as deep vein thrombosis, pulmonary dysfunction, and muscle wasting. Progressive activity from bed mobility to supervised ambulation facilitates safe recovery and prepares patients for structured rehabilitation programs.

The foundation of managing physiotherapy is exercise therapy. Aerobic training, such as walking or cycling, improves cardiovascular efficiency, myocardial perfusion, and exercise tolerance. Moderate intensity exercise performed regularly has been shown to significantly reduce mortality and improve quality of life. In male patients, who often aim for early return to work and daily activities, such improvements are particularly beneficial. Resistance training further enhances muscular strength and endurance, supporting independence and functional recovery. In selected individuals, high intensity interval training may offer additional benefits in improving cardiorespiratory fitness.

Respiratory physiotherapy also plays an important role after MI. Reduced respiratory muscle strength and impaired ventilation can limit exercise capacity. Breathing exercises and inspiratory muscle training improve lung function, oxygenation, and overall endurance, thereby supporting cardiac recovery. These interventions are especially relevant in male patients with risk factors such as smoking.

In addition to physical rehabilitation, physiotherapy contributes to secondary prevention. Regular exercise improves blood pressure, lipid levels, glucose metabolism, and body weight. Physiotherapists also provide education on lifestyle modification, promoting long-term adherence to physical activity and risk factor control.

Psychological recovery is another critical aspect. Anxiety, depression, and fear of exertion are common after MI. Supervised physiotherapy programs improve confidence, reduce stress, and enhance overall well-being, which are essential for sustained recovery.

In conclusion, physiotherapy is a vital component of post-infarction care in male patients. Through early mobilization, structured exercise training, respiratory rehabilitation, and lifestyle education, it significantly improves functional capacity, reduces complications, and enhances quality of life while lowering the risk of recurrent cardiac events.