

Exercise the Arms, Benefit the Legs

Supervised arm exercises improved walking distance in patients with vascular claudication.

Graded walking exercises improve maximum walking distance in patients with peripheral arterial disease and claudication. However, some patients find it difficult to push themselves to the point of pain, and others have impediments such as lower-extremity arthritis. Previous research has demonstrated that upper-extremity exercise can improve lower-extremity performance in patients with claudication, presumably through systemic and central cardiovascular adaptations. In new research from the U.K., 104 patients with lower-extremity vascular claudication were randomized to an upper-limb exercise training group, a lower-limb exercise training group, or a nontreated control group. Intervention patients participated in twice-weekly supervised sessions involving either arm-cranking or leg-cycling equipment. At 24 weeks, maximum walking distance was lengthened by about 100 meters in both intervention groups, compared with the control group. Both intervention groups improved on various standardized assessments of quality-of-life and functional status, with some trends toward better outcomes in the upper-extremity group. Benefits were generally sustained at 48 and 72 weeks.

Comment: In this trial (and in several earlier ones), supervised upper-extremity exercise compared favorably with lower-extremity exercise in patients with vascular claudication. Because this intervention is not widely prescribed, clinicians who order it should discuss the rationale and treatment goals with the physical therapists to whom they refer patients.

— [Allan S. Brett, MD](#)

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