

Source	Year	Journal	Description
<a href="#">Remote cardiac rehabilitation is a good alternative of outpatient cardiac rehabilitation in the COVID-19 era</a>	2020	Environmental Health and Preventive Medicine	Remote CR is as effective as outpatient CR for improving the short-term prognosis of patients hospitalized for heart failure post-discharge.
<a href="#">Remotely monitored telerehabilitation for cardiac patients: A review of the current situation</a>	2020	World Journal of Clinical Cases	The results of our evaluation indicate that TR seems to be a usable, effective, and safe alternative rehabilitation for patients with heart disease. Most of the currently published articles have studied remotely monitored TR intervention offering a comprehensive approach, which indicates the significant development and steps forward in this field of study. Our research evidence supports the implementation of TR, which could positively influence barriers in participating in cardiac rehabilitation programs.
<a href="#">Telehealth interventions for the secondary prevention of coronary heart disease: A systematic review and meta-analysis</a>	2019	European Journal of Cardiovascular Nursing	Telehealth interventions with a range of delivery modes could be offered to patients who cannot attend cardiac rehabilitation, or as an adjunct to cardiac rehabilitation for effective secondary prevention
<a href="#">Home-Based Cardiac Rehabilitation: AHA Scientific Statement</a>	2019	Circulation	Telemedicine has the potential to expand the reach of CR, promote patient engagement, and promote provider/patient communication. However, these studies were unable to draw conclusions about the long-term impact on important patient-centered outcomes, including cardiovascular events. Additionally, because none of these studies directly compared HBCR with technology tools and HBCR without technology tools, we cannot conclude whether the effects of the interventions were the result of the delivery of HBCR or the inclusion of technology in the interventions
<a href="#">Effects and costs of real-time cardiac telerehabilitation: randomised controlled non-inferiority trial</a>	2019	Heart	REMOTE-CR is an effective, cost-efficient alternative delivery model that could—as a complement to existing services—improve overall utilisation rates by increasing reach and satisfying unique participant preferences.
<a href="#">mHealth and cardiovascular diseases self-management: There is still a long way ahead of us</a>	2018	European Journal of Preventive Cardiology	mHealth be used to tailor messages to the individual based on their goals. However, it must be mentioned that there is much more to learn about what makes mHealth applications appealing and how these interventions can be used for long-term cardiovascular disease management
<a href="#">Home-based telerehabilitation in older patients with chronic obstructive pulmonary disease and heart failure: a randomised controlled trial</a>	2018	Age and Aging	4-month Telereab-HBP was feasible and effective in older patients with combined COPD and CHF.

<a href="#">Smartphones in the secondary prevention of cardiovascular disease: a systematic review</a>	2018	BMJ Cardiovascular Diseases	Mobile health delivery has the potential to improve access to CR and heart failure management for patients unable to attend TCR programs. Feasibility testing of culturally appropriate mHealth delivery for CR and heart failure management is required in rural and remote settings with subsequent implementation and evaluation into local health care services.
<a href="#">Telehealth exercise-based cardiac rehabilitation: a systematic review and meta-analysis</a>	2016	Heart	Telehealth exCR appears to be at least as effective as centre-based exCR for improving modifiable cardiovascular risk factors and functional capacity, and could enhance exCR utilisation by providing additional options for patients who cannot attend centre-based exCR.
<a href="#">Effect of comprehensive cardiac telerehabilitation on one-year cardiovascular rehospitalization rate, medical costs and quality of life: A cost-effectiveness analysis</a>	2016	European Journal of Preventive Cardiology	This paper shows the addition of cardiac telerehabilitation to conventional centre-based cardiac rehabilitation to be more effective and efficient than centre-based cardiac rehabilitation alone.
<a href="#">The effectiveness of mobile-health behaviour change interventions for cardiovascular disease self-management: A systematic review</a>	2015	European Journal of Preventive Cardiology	Our review found mHealth has the potential to change lifestyle behaviour. Results are still limited to a small number of trials, inconsistent outcome measures and ineffective reporting of intervention characteristics. Large scale, longitudinal studies are now warranted to gain a clear understanding of the effects of mHealth on behaviour change in the cardiovascular disease population.
<a href="#">Medium-Term Effectiveness of a Comprehensive Internet-Based and Patient-Specific Telerehabilitation Program With Text Messaging Support for Cardiac Patients: Randomized Controlled Trial</a>	2015	JMIR	This study showed that an additional 6-month patient-specific, comprehensive telerehabilitation program can lead to a bigger improvement in both physical fitness (VO2 peak) and associated HRQL compared to center-based cardiac rehabilitation alone.
<a href="#">Telehealth interventions versus center-based cardiac rehabilitation of coronary artery disease: A systematic review and meta-analysis</a>	2014	European Journal of Preventive Cardiology	Telehealth intervention delivered cardiac rehabilitation does not have significantly inferior outcomes compared to center-based supervised program in low to moderate risk CAD patients. Telehealth intervention offers an alternative deliver model of CR for individuals less able to access center-based cardiac rehabilitation.
<a href="#">Feasibility and Effectiveness of Remote, Telephone-Based Delivery of Cardiac Rehabilitation</a>	2014	Telemedicine Journal and e-Health	