
ORAL PRESENTATIONS

DYNAMICS OF THE ADIPOKINE PROFILE AGAINST THE BACKGROUND OF CARDIAC REHABILITATION IN PATIENTS WITH CHF, OBESITY, AND METABOLIC SYNDROME

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Metabolic syndrome in CHF and obesity is accompanied by a pronounced adipokine imbalance, which limits the effectiveness of standard rehabilitation programs.

To evaluate the effect of cardiac rehabilitation on the adipokine profile and functional status of patients with CHF and obesity depending on the presence of metabolic syndrome.

The study included 180 patients (without MS — 44, with MS — 136). Levels of leptin, resistin, adiponectin, CRP, TNF- α , HOMA-IR, treadmill test results, and VO₂ were assessed before and after a 12-week cardiac rehabilitation program.

At baseline, patients with MS had significantly higher levels of leptin and resistin ($p < 0.001$). After rehabilitation, a decrease in adipokines and inflammatory markers was observed in both groups. However, a significant increase in VO₂ and exercise duration was noted predominantly in patients without MS. Quality of life improved in both groups.

Cardiac rehabilitation contributes to partial correction of adipokine imbalance. In patients with metabolic syndrome, the functional response is limited, which justifies the need for personalized and combined rehabilitation programs.