Atrial Fibrillation Patients Benefit from Yoga

In a first-of-its-kind study, physicians at The University of Kansas Hospital evaluated the role of yoga in the management of atrial fibrillation (AFib), a common heart rhythm disorder that is a leading cause of stroke. The study, published in the *Journal of the American College of Cardiology*, found that rigorous practice of yoga can help reduce episodes of irregular heartbeat and improve the symptoms of anxiety and depression often associated with AFib. On average, yoga was found to cut patients’ episodes of AFib in half and significantly improve quality of life.

Researchers followed 49 patients with AFib who had no physical limitations. During the first 3-month control phase, participants were permitted to engage in any type of physical activity they were previously accustomed to doing. This was followed by a 3-month study phase where patients participated in a supervised yoga program consisting of breathing exercises, yoga postures, meditation, and relaxation. Forty-five-minute yoga sessions were administered by a certified professional three times per week over the course of the study phase. Participants were also given an educational DVD and encouraged to practice the exercises at home on a daily basis depending on their comfort levels.

The research team cited several promising programs for engaging staff RNs in QI activities, including the Integrated Nurse Leadership Program in California and the Bi-State Nursing Workforce Innovation Center’s Clinical Scene Investigator Academy in Kansas and Missouri. They also recommended better data systems for RN Participation in QI Projects Still Stagnant

Despite studies demonstrating the value of nurse-led quality improvement (QI) efforts, too few nurses are involved in these efforts and the number is not growing, according to a study published in the *Journal of Nursing Care Quality*.

The study—part of the RN Work Project funded by the Robert Wood Johnson Foundation (RWJF)—compared the participation levels for RNs who were first licensed between 2004 and 2005, and RNs first licensed between 2007 and 2008 in hospital QI activities. The research team found little difference in participation levels between the two cohorts for a variety of activities, including performance measurement, working to improve processes or systems of care, monitoring sustainability of improved practices, and efforts at performance improvement. The only exception was “use of appropriate strategies to improve hand washing compliance to reduce nosocomial infection rates.”

The team noted there has been an increase in the number of hospitals that participate in formal programs aimed at increasing nurses’ engagement in quality and safety initiatives since 2008. They expected that trend would increase the likelihood of participation in QI activities for the later cohort. Among those initiatives are Transforming Care at the Bedside, National Database of Nursing Quality Indicators Program, the hospital Magnet Recognition Program, and the Quality and Safety Education for Nurses initiative, funded by RWJF.

monitoring quality outcomes specific to nursing care, so that RNs receive timely feedback on their performance.

The study was based on surveys of 539 RNs who work in hospitals in 15 states. The RN Work Project is a 10-year study of newly licensed RNs that began in 2006. It is the only multi-state, longitudinal study of new nurses’ turnover rates, intentions and attitudes—including intent, satisfaction, organizational commitment, and preferences about work.


Annual Mammogram May Not Be Necessary for Older Women

Among older women, getting a mammogram every 2 years was just as beneficial as getting a mammogram annually and led to significantly fewer false positive results, according to a study published online in the Journal of the National Cancer Institute.

The national study involved more than 140,000 women ages 66 to 89. From 1999 to 2006, data were collected on 2,993 older women with breast cancer and 137,949 women without breast cancer, the largest available screening mammography data set in the United States. The data were obtained from five Breast Cancer Surveillance Consortium mammography registries in Washington, California, North Carolina, New Hampshire, and Vermont.

The researchers found no difference in rates of late-stage breast cancer between women screened annually and women screened biennially. However, they found that 48% of women ages of 66 to 74 who were screened every year had false positive results, whereas 29% of women in the same age range who were screened every 2 years had false positives.

The researchers stated that women in this age range get no added benefit from annual screening and face almost twice the false positives and biopsy recommendations, which may cause anxiety and inconvenience.


Intensive Speech Therapy Can Mitigate Aphasia Symptoms

Older adults who have had aphasia for a long time can nevertheless improve their language function and maintain these improvements in the long term, according to a study published in Brain and Language.

After 6 weeks of intensive and specific language therapy, older adults with aphasia demonstrated better performance at naming objects along with better cognitive potential. The evidence collected in this functional neuroimaging study showed that language therapy stimulates the brain to use alternate circuits. These new circuits remain active after therapy and can help the person recover additional words. Performance was equiva-