SCARSTORIES · A LITTLE COMPANY ON THE WAY

How much walking is enough

Walking is the core of cardiac recovery — the question is pace, and the answer is “a little more than yesterday, a little less than you want to”.

The first two weeks at home

> Educational content.

Walking is the safest, most effective exercise in early cardiac recovery — it rebuilds stamina, helps the lungs clear, helps prevent clots and steadies the mood, and the amount that is “enough” is smaller than you think.

The temptation after a cardiac event or surgery is either to do nothing — terrified of the heart — or to do too much, to prove you’re fine. Walking is the middle path the whole team agrees on, and it’s the one exercise you can’t really get wrong as long as you respect the pace. You don’t need a gym, a heart-rate watch or a plan in an app. You need a floor, a door, and permission to go slowly.

The shape of a walking plan

In the first days home, “walking” might mean a few minutes at a time, several times a day — a lap of the house, to the kitchen and back, to the letterbox. From there, most people add a little each day: a few more minutes, a slightly longer route, then outdoors on flat ground. The rough shape most teams describe: frequent short walks in week one, building gradually week by week. Most people are surprised how slowly it needs to start — and how quickly it builds once it does.

The pace rule that works for everyone: walk and talk. You should be able to hold a conversation while walking. If you’re too breathless to speak comfortably, you’re walking too fast for this week — slow down. If you feel great, resist the urge to double the distance in one day; the body adapts to steady, boring progress better than to heroics.

Listen to what the walk tells you

Mild breathlessness during the walk that settles quickly when you stop: normal. Slight fatigue afterwards, maybe a nap: normal. Chest pain, real dizziness, a racing heart that doesn't settle, or breathlessness that keeps climbing after you stop: not normal — stop, rest, and call. The rule is simple: the walk should leave you tired but not frightened.

What to ask your team

- How much should I walk this first week, and how fast should I build?
- When can I walk outside, and on hills or stairs?
- Which symptoms mean I should stop and call?
- When can I return to my normal exercise?

> **Call for help if**
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> Walking brings on chest pain or pressure, severe dizziness, a heartbeat that races and won't settle, or breathlessness that gets worse instead of better when you stop. Stop, sit down, and call your team — that is what the guidance is for.

> **Take it to your team**
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> Ask for a rough weekly walking target — minutes per day, times per day — and write it down. A number agreed with your team is a target; a number you invent is a guess.

Walking is the part of recovery you drive — but how much, how fast and when to progress is a decision for your own team, and they will tailor it to your heart and your procedure.

Questions to take to my team

- [ ] How much should I walk this first week, and how fast should I build?

- [ ] When can I walk outside, and on hills or stairs?

- [ ] Which symptoms mean I should stop and call?

- [ ] When can I return to my normal exercise?

For discussion and personal reference. Your care team’s individual instructions take priority. For an emergency, contact your local emergency service; do not wait for a community reply.