### Table G2.A7. Additional Studies Supporting Exercise Training/Physical Activity Studies in Known Disease (Sample of Six Studies) That Were Not Randomized and Controlled

<table>
<thead>
<tr>
<th>Author/Journal/Year</th>
<th>N</th>
<th>Random/Control</th>
<th>Intervention/Measures</th>
<th>Finding</th>
</tr>
</thead>
</table>
| Womack CJ Med Sci Sports Exerc 1997 (1) | 21 Men, 5 Women | Non-randomized | No Control | Walking group only 16 weeks | ↑ PWT, COT, VO₂  
Also, ↑ submax exercise by ↑ walking economy measured by slow VO₂ component at constant workload |
| Gardner AW J Gerontol A Biol Sci Med Sci 2000 (2) | 63 (sex not reported) | Non-randomized | No Control | Walking only 24 weeks | ↑ PWT 65%  
↑ COT 115%  
↑ VO₂ 10%  
↑ Self-report activity 62% and free living walking by 31%  
Hyperemic LBF ↑ 27% and correlated with change in COT  
Walking economy improved 10% and correlated with COT + PWT |
| Izquierdo-Porrera AM J Vasc Surg 2000 (3) | 34 (sex not reported) | Non-randomized | Control | Walking vs. Control 24 weeks | ↑ PWT 645%  
↑ COT 106%  
↑ VO₂ 7% |
| Brendle DC Am J Cardiol 2001 (4) | 17 Men, 2 Women | Non-randomized | No Control | Walking group only 24 weeks | ↑ PWT 43%  
↑ COT 94%  
↑ BAFMD 61%  
↑ Maximum calf blood flow 35% |
| Degischer S Vasc Med 2002 (5) | 38 Men, 21 Women | Non-randomized | Groups | Supervised exercise  
Supervised exercise + Clopidogrel  
Home exercise 12 weeks | Supervised training superior to home training for COT, PWT |
| Killewich LA J Vasc Surg 2004 (6) | 21 Men | Non-randomized | Control | Walking group vs. Control 24 weeks | ↑ PWT 70%  
↑ COT 117%  
Improved fibrinolysis |

BAFMD, brachial artery flow-mediated dilation; COT, claudication onset time; LBF, leg blood flow; PWT, peak walking time

**Reference List**


