**Research in context**

**Evidence before the study**

The burden of cardiovascular disease is increasing globally, and cardiac rehabilitation (CR) is recognized as one of the most beneficial and cost-effective strategies to manage it. However, CR is a multi-component and hence complex intervention, so the nature and quality of CR services may vary widely, impacting degree of patient benefit. A previous review revealed variability in program characteristics, despite availability of international guidelines. Unfortunately, the nature of CR delivery has only been characterized in much less than half of the countries where it is offered around the world (and only primarily in Europe and the Americas), and it has not been characterized in a comparable way

**Added value of this study**

For the first time, the nature of CR services in every country of the globe where it is offered has been established, and compared. Results showed that, where available, the nature of CR is consistent with guidelines (except that more frequent delivery of tobacco cessation and return-to-work counselling is needed), but it does vary significantly by World Health Organization region.

**Implications of all the available evidence**

While the association between the quality indicators and patient outcomes requires establishment, advocacy for greater delivery of smoking cessation, stress management/psychosocial as well as counselling on return-to-work in the CR setting is needed, potentially through greater inclusion of nurses given their broad scope of practice on the CR team. A global program accreditation mechanism could promote high-quality, consistent CR around the world.