

P121 IMPROVING SELF -EFFICACY AND POSITIVE CHANGE BEHAVIOURS USING AN EXERCISE APPROACH IN PEOPLE WITH CHRONIC PAIN

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Background: Despite compelling evidence of benefit for exercise in inflammatory arthritis and chronic pain, 68% of rheumatoid arthritis (RA) patients in the UK are inactive, predominantly due to fears of uncertainty, pain and discomfort. The Move to Improve exercise class was developed to address these fears through increasing patients' confidence to exercise and self-efficacy in order to sustain long term positive health behaviours. The programme focuses on a graded and paced exercise class model.

Methods: We audited results from our Move to Improve class to establish if positive self-efficacy behaviours were fostered using a structured exercise programme. Patients were referred into the programme from outpatient rheumatology services and by self-referral from patients attending our regular fibromyalgia (FMS) education sessions. The class was open to all patients regardless of physical function or disability assuming they could commit to attend the whole programme. Patients attended the physiotherapy department weekly for a total of 6 sessions where they undertook a specifically designed exercise programme that included a warm-up, 12-station exercise circuit (for example static bike, gym ball, treadmill) aiming to improve movement, reduce fatigue and increase exercise tolerance. The programme included 'taster' sessions for specific forms of exercise

such as Tai Chi, Pilates and Zumba gold. Classes were supervised by physiotherapists who utilised motivational interviewing techniques to encourage engagement. Before commencing the programme patients self-rated their ability to manage symptoms using the Arthritis Self-Efficacy Scale 8 (ASES 8) score which measures 8 domains (0-10 score) including pain, mood, stiffness, function and depression. At the end of the course patients re-rated and changes in ASES8 score were calculated with an increase in score from baseline indicating greater patient reported confidence to manage symptoms.

Results: Pre and post programme ASES8 results were available for 89 individuals. A variety of underlying medical conditions were represented, most commonly FMS (40%) RA (22%) or both (15%). 88/89 patients reported an improvement in at least 1 domain and overall 85/89 demonstrated an overall improvement in their confidence to manage symptoms. FMS patients reported the greatest overall improvement in their confidence (60% improvement in total ASES8 score from baseline) as compared to RA (34%). Patients with both RA and FMS reported an improvement like those with RA alone (35%). There was an inverse relationship between pre-programme confidence and the likelihood of benefit whereby patients in the lowest scoring quartile demonstrated the greatest benefit from the programme. Increased confidence in managing daily activities, fatigue and functional impairment was reported by 82%, 73% and 74% of patients respectively.

Conclusion: Patients completing a six-week supervised exercise programme reported significant improvements in their confidence to manage pain and related symptoms. Longer term benefit from the programme will require further study.

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