products and the development of RA was observed: HR for the fully adjusted model=1.12 (95% CI: 0.78-1.59 (Table 1). Also when evaluating milk and cheese consumption separately, no association with the risk of RA was observed: HR for the highest milk consumption=1.10 (95% CI: 0.82-1.44) and highest cheese consumption HR=1.20 (95% CI: 0.81-1.79), compared with low consumption (fully adjusted models, table 1).

Conclusion: In this large population-based cohort study, consumption of dairy products was not associated with risk to develop RA.

FRI0697HPR Table 1. Relative risk of developing rheumatoid arthritis during follow-up (2003-14) of women in the Swedish Mammography Cohort by consumption of dairy products in 1997.

	N of cases	N of person years	HR, adjusted for age	HR, fully adjusted model*
Total dairy				
<=3 servings/week	73	77148	1 (Ref)	1 (Ref)
3-4.5 servings/week	103	105043	1.00 (0.75-1.35)	1.05 (0.78-1.43)
4.5-6 servings/week	76	83777	0.93 (0.68-1.28)	1.01 (0.72-1.43)
>6 servings/week	111	115333	1.00 (0.74-1.33)	1.12 (0.78-1.59)
Milk				
<=0.5 servings/week	113	118630	1 (Ref)	1 (Ref)
0.5-1 serving/week	67	62227	1.16 (0.86-1.57)	1.17 (0.86-1.58)
1-2 serving/week	95	104788	1.01 (0.77-1.33)	1.03 (0.78-1.35)
>2 serving/week	85	89145	1.09 (0.82-1.44)	1.10 (0.82-1.48)
Cheese				
<=1 servings/week	81	84818	1 (Ref)	1 (Ref)
1-2 serving/week	119	124044	1.03 (0.77-1.36)	1.06 (0.80-1.41)
2-4 serving/week	106	108849	1.04 (0.78-1.39)	1.12 (0.82-1.51)
>4 serving/week	47	45405	1.08 (0.75-1.54)	1.20 (0.81-1.79)

*Adjusted for age, alcohol intake, smoking, energy intake, meat and fish consumption

Disclosure of Interests: None declared

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HPR Interventions (educational, physical, social and psychological)

FRI0698-HPR A RANDOMISED CONTROLLED CLINICAL TRIAL COMPARING THE EFFECTIVENESS OF 6 AND 12 WEEKS OF A SHOULDER SPECIFIC EXERCISE PROGRAMME FOR PATIENTS WITH ROTATOR CUFF RELATED SHOULDER PAIN

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Background: Research has shown loaded exercise to be beneficial for patients with rotator cuff related shoulder pain in terms of improving shoulder function, self-reported disability and pain^{1,2}. The optimal duration for which these patients should complete a loaded exercise programme to achieve beneficial effects remains unclear.

Objectives: The purpose of this study is to determine if 6 weeks of a supervised shoulder specific exercise programme is as effective as 12 weeks of the same programme, for improving shoulder function, self-reported disability and pain, in patients with rotator cuff related shoulder pain.

Methods: In this randomised controlled single-blinded study patients with a history of lateral upper arm pain with MRI confirmation of rotator cuff pathology or positive testing on a cluster of clinical rotator cuff tests were included. Patients with a recent history of shoulder surgery or a shoulder fracture were excluded. Participants were randomly assigned to complete either 6 weeks (short group) or 12 weeks (long group) of the exercise programme. Both groups performed the same specific set of loaded exercises daily at home and attended 6 clinic-based group exercise sessions². Participants were assessed at 6 weeks, 3 and 6 months. Shoulder function was assessed using the Constant-Murley (CM) score. Disability was assessed using the QuickDash and the Shoulder Pain and Disability Index (SPADI). Pain was assessed using a visual analogue scale. Group comparisons were made using univariate generalised linear models.

Results: 85 patients were included in this study as per Table 1.

FRI0698HPR Table 1.

Group	Short (n = 45)	Long (n = 40)
Background variables		
Sex (male/female)	24/21	21/19
Age in years median (SD)	57 (15)	57 (14)
Duration of symptoms (median months)	19	24

Within each group shoulder function, self-reported disability and pain improved significantly at 3 months ($p < .05$). Comparisons at 3 months showed the long group had significantly lower pain scores ($p = .02$). At 3 months there was no significant difference between the two groups in the CM score ($p = .415$), SPADI score ($p = .053$) and QuickDash score ($p = .245$). However, at 6 months, the long group had significantly greater changes in both the CM score ($p = .007$) and the SPADI score ($p = .002$).

Conclusion: In the management of patients with rotator cuff related shoulder pain the findings of this study indicate that a 12 week exercise programme results in better outcomes for pain at 3 months and self-disability and shoulder function at 6 months.

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FRI0699-HPR DEVELOPMENT OF DELPHI-BASED RECOMMENDATIONS FOR THE MANAGEMENT OF CARDIOVASCULAR COMORBIDITIES IN PATIENTS WITH PSORIATIC ARTHRITIS AND MODERATE-TO-SEVERE PSORIASIS: STUDY PROTOCOL

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Background: Psoriasis (PSO) and Psoriatic Arthritis, (PsA) particularly moderate to severe disease (MS-PSO), are inflammatory systemic