Results: Three indications for PT are distinguished, based on the patients’ health status and abilities of self-management: 1) patient education combined with instructions for mainly unsupervised exercise therapy, 2) patient education combined with exercise therapy with short-term supervision and 3) patient education combined with exercise therapy with intensified supervision. Exercise therapy is recommended for indication 2, and conditionally recommended for indication 1 and 3. Patient education consists of information and advice on RA and promotion of self-management. Specific recommendations concerning the frequency, intensity, type and time (FITT) of the exercise therapy are provided, based on studies performed in patients with RA, recommendations from The Dutch Health Council (2017), EULAR recommendation on Physical Activity (2018), and The American College of Sports Medicine guidelines for exercise testing and prescription (2016). Behavioral interventions to promote physical activity in patients with RA are also recommended. The guideline obtains practical advice for applying tailored behavioral interventions.

Conclusion: The indication for PT is divided into instructions for mainly unsupervised exercise therapy, exercise therapy with short-term supervision and exercise therapy with intensified supervision. Based on scientific evidence and expert consensus on additional considerations among relevant stakeholders, exercise therapy with supervision of a PT is recommended in patients with RA, together with information and advice and promotion of self-management. Specific recommendations on dosage of exercise therapy (FITT) are provided. Behavioral interventions to promote physical activity are also recommended.

REFERENCES

Disclosure of Interests: None declared

SAT0730-HPR
DEVELOPMENT AND DESIGN OF SMARTPHONE APPLICATION FOR POSTURAL ALIGNMENT OF CERVICAL AND THORACIC SPINE FOR YOUNG ADULTS

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Background: Mobile health (mHealth) technologies offer personal, intelligent, cost-effective, access to health care services. Numerous smartphone applications exist to assist the users for management or prevention of the musculoskeletal disorder. But most of the apps were not designed with both users and experts focus. As our knowledge, there is no health exercise app for neck and upper back musculoskeletal prevention designed by experts with the user-centered method.

Objectives: The aim of our study is to develop a smartphone exercise application (app) for cervical-thoracic postural alignment for young adults.

Methods: We used a combination method of focus groups interviews and user-centered design approach. The mobile application was designed in three phases: (1) we conducted multidisciplinary focus group meetings to compromise the content, feature and design of app in the first phase (prototype smartphone app/MarNeckEx). Focus group consisted of software developers, 3 experienced physiotherapists on musculoskeletal ergonomics, 3 young smartphone users who have neck and upper back problems associated with an excess smartphone using. The focus group members discussed the variety of topics in subgroups (login parameters, self-monitoring, exercises content, video or animation types, exercise diary, reminders, encouragement method etc). We conducted 4 focus group meeting for phase 1. (2) After developing the prototype version of app 30 young adult downloaded the prototype app and used the app for one week, after one week we asked the satisfaction levels, barriers and facilitators of the app design and advice for usability. We conducted 2 focus group meetings for development of the revised application by modifying the errors taking into account feedbacks (revised MarNeckEx).

Results: Major themes identified for development app phase 1 were (a) self-assessment of musculoskeletal problems (b) Choosing the spinal stabilization and postural alignment exercises with well design videos (c) encouraging and notifications for exercise adherence. A second phase themes, (d) education for using the digital app for exercise, (e) positive or negative feedback notifications for improving adherence were added.

Conclusion: We conducted the smartphone-based cervico-thoracic postural alignment exercise app with multidisciplinary and user focus method. Usability of the application should be done before marketing the new mHealth app for exercise.

REFERENCES

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SAT0731-HPR
TRIAGE AD HOC REFERRAL BY RHEUMATOLOGY NURSE – AN ALTERNATIVE PATH TO CLINIC VISIT

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Background: Rheumatic diseases are chronic conditions characterized by disease flares and remissions. Patients are often referred back from other healthcare providers in between follow-up visits when they seek attention for disease flares or adverse effects from treatment. While prompt attention and assessment is important, the busy rheumatology clinic may not have the coping capacity for these ad hoc needs. Rheumatology nurse (RN) can play a pivotal role in triaging these referrals.