SELF- AND SHARED-MANAGEMENT INTERVENTIONS FOR CHILDREN, YOUNG PEOPLE, AND FAMILIES LIVING WITH RHEUMATIC AND MUSCULOSKELETAL DISEASES: AN INTEGRATIVE REVIEW

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Background: Self-management refers to the manner in which individuals manage the symptoms, treatment, physical and psychosocial impact of long-term conditions (LTCs). The importance of equipping children and young people living with LTCs, like rheumatic and musculoskeletal diseases (RMDs) with the capacity to self-manage is increasingly recognised in the literature, and in conversation. In addition, there is a strong case to support families who assume a shared-management role for their child. However, there is a limited understanding of interventions designed to improve self- and shared-management capacity in this population, prompting for a review of the literature, across multiple study designs.

Objectives: The aim of this integrative review was to identify and describe interventions promoting self-management of RMDs by children and young people, and shared-management of RMDs by families.

Methods: The integrative review followed a six-stage process [1]. Studies published since 2010 were identified through a search of eight bibliographic databases. Studies reporting on any paediatric-onset RMD were included, as were those in multiple condition areas where RMDs were included in the analysis. Twenty-six articles met the inclusion criteria: 24 research articles reporting on 17 interventions, and two review articles containing a further four research articles. The methodological quality of included articles was assessed using the Mixed Methods Appraisal Tool, and a thematic synthesis was undertaken.

Results: Most study participants were CYP and families living with JIA. A minority of studies included CYP and families living with other RMDs, as well as chronic pain, type 1 diabetes mellitus, epilepsy, sleeping disorder, and cancer. Around half of the articles reported a specific theory and/or model or framework guiding the intervention. Interventions tended to be focussed at either CYP or families, with few designed to span the life course from birth to young adulthood, while supporting all members of the family unit. Intervention types included: decisional aids; comic educational book; family retreat weekend; internet- and group-based cognitive behavioural programme; internet-based peer mentoring intervention; internet-based self-guided management intervention with weekly social support; internet-based electronic patient-reported outcome platform; smartphone applications; telerehabilitation; therapeutic recreational camp; therapeutic family nursing conversations; transition programme; clinic; and video games-based task-oriented activity training.

Conclusion: This integrative review identified a range of interventions that have been evaluated to promote self- and shared management of RMDs by CYP and their families. There is a noticeable lack of emphasis on targeting the whole life-course and/or model or framework guiding the intervention. Interventions tend to be focussed at either CYP or families, with few designed to span the life course from birth to young adulthood, while supporting all members of the family unit. Intervention types included: decisional aids; comic educational book; family retreat weekend; internet- and group-based cognitive behavioural programme; internet-based peer mentoring intervention; internet-based self-guided management intervention with weekly social support; internet-based electronic patient-reported outcome platform; smartphone applications; telerehabilitation; therapeutic recreational camp; therapeutic family nursing conversations; transition programme; clinic; and video games-based task-oriented activity training.

Effect of Argentine Tango Practice on Total Physical Activity Time in Patients with Chronic Inflammatory Rheumatism: A Pilot Study

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Background: Most patients with chronic inflammatory rheumatism (CIR) have a physical activity (PA) level below recommendations [1,2]. Currently, adapted structures offer a range of activities supervised by adapted physical activity educators. To the best of our knowledge, Argentine tango is not yet offered in these structures.

Objectives: The objective of this pilot study was to study the effect of 24 consecutive sessions of tango dance on PA in total of 12 patients with CIR, including rheumatoid arthritis (RA) and spondyloarthropathy (AS).

Methods: In this controlled, randomized, open-label, clinical trial with two parallel arms, patients were required to attend two tango sessions per week,