

2.05 Effectiveness of a Tailored Pulmonary Rehabilitation programme for patients with Interstitial Lung Disease.

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Background: The National Institute of Health and Clinical Excellence (NICE) states that pulmonary rehabilitation (PR) programmes should be designed specifically for Idiopathic Pulmonary Fibrosis (IPF).

We describe the interim results of a PR program designed for patients with Interstitial Lung Diseases (ILD). **Methods:** : PR comprised a 6 week out-patient exercise and multidisciplinary education program delivered by respiratory physiotherapist and ILD specialist nurse. The following outcome measures were assessed pre and post PR: Medical Research Council dyspnoea scale (MRC), USCD breathlessness questionnaire (USCD), 6 minute walk test distance (6MW) , hospital anxiety/depression score (HAD), King's Brief ILD (KBILD) questionnaire. Baseline characteristics are presented as mean with standard deviation (SD) and percentage for continuous and categorical data respectively. Paired t tests were used to compare outcomes before and after PR. **Results:** Interim analysis of the first 19 patients (12 male and 7 female) recruited who completed the programme. 7 patients -IPF, 6 connective tissue related ILD, 4 non-specific interstitial pneumonia, 2CPFE. Mean: age (+/- SD) 71.8, FVC % 79.2 (SD 27.5), FEV % 77 (SD 24.5), DLCO 36.3 (SD 11.5), MRC 3.0 (SD 1.05) , KBILD total 50.2 (SD 7.35) USCD 61.1 (SD 25.5), HAD Dep 7.3 (SD 3.19) Anxiety 5.4 (SD 4.64). After PR mean change of 13m (6%) in 6MW test.

Conclusion: Due to small patient numbers there was no statistical difference between any measured parameters, there was a trend towards improvement in breathless, anxiety and psychological domains on the quality of life questionnaire. **Conflict of Interest:** The authors declare that they have no conflict of interest. **Disclosures:** There are no disclosures.