4.20 Therapeutic Harmonica Programme: Preliminary Findings

[1]Brenda Deering, [1]Michelle Spencer
HSE/Chronic Disease Hub1, Dublin, Ireland

Background: Chronic Obstructive Pulmonary Disease is a common, preventable lung condition characterized by progressive symptoms such as breathlessness, cough, and sputum production, primarily caused by tobacco exposure. Pulmonary rehabilitation (PR) is crucial in managing COPD, and music therapy within PR programs has been recognized by the World Health Organization for enhancing outcomes. The Therapeutic Harmonica Programme was developed to further improve PR benefits. **Methods:** Pre and post intervention outcomes consisted of peak inspiratory and expiratory flow rates and total Airflow by combining both PEFR +PIFR, and a disease specific Quality of Life using the SGRQ-C. MCID for PEFR = 25L/min or 12% ,and for the SGRQ-C =4). Excel was used for calculations and graphs. **Results:** Out of fourteen patients, twelve completed the programme (7m:5f) with an average age of 69. Total Airflow improved by 62L/min [(pre 505 (±1667); post 567(±192)], PEFR improved by 36L/min (±54) [pre 270(±102); post 306 (±124)], PIF improved by 25Lmin (±22) [pre 235(±68); post 261(±72)] and the SGRQ-C improved by 7 (±6) points [pre 43 (±12; post 36(±11)]. Minimal clinical important differences in PEFR and the SGRQ-C were apparent. **Conclusion:** An improvement in airflow can have a positive impact on symptoms and may help decrease exacerbation rate by improving inhaled medication deposition. **Disclosures.** The authors declare that they have no conflict of interest.