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iLiFE-Lifestyle Integrated Functional Exercise for people with interstitial lung disease: a feasibility study

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Abstract

Home-based physical activity (PA) programmes in interstitial lung diseases (ILD) are unknown but may be fundamental, especially in advanced stages of the disease. We explored the feasibility of a 12-week home-based PA programme for people with ILD (iLiFE).

A pre/post feasibility study was conducted. Feasibility of iLiFE was determined by participant recruitment and retention, adherence, feasibility of outcome measures (i.e., PA-steps/day with the accelerometer; exercise capacity-chester step test; dyspnoea-modified Medical Research Council; quadriceps muscle strength[QMS]-hand-held dynamometry; activities of daily living[ADL]-London Chest Activities of Daily Living; quality of life[QoL]-St. George's Respiratory Questionnaire) and adverse events. Data were collected at baseline and 12-weeks.

Ten participants were included, but only 9 (5♀, 77±3y; FVCpp 77.1±4.4, DLCOpp 42.4±6.6) completed the study. Recruitment was challenging. iLiFE was acceptable, with excellent adherence (84.4%) and no adverse events. Missing data were associated with 1 dropout and non-compliance with the accelerometer (n=1). A trend for improvements was observed in PA, exercise capacity, dyspnoea, QMS, ADL and QoL (Table 1).

iLiFE seems to be feasible, safe and shows potential to improve PA, exercise capacity, dyspnoea, QMS, ADL

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