Study evaluating the effect of weekends on activity and inflammatory markers in adult patients with cystic fibrosis

C. O’Connor1, C. Reilly1, S. Kelly1, A. Leneey1, C. O’Farrell1, K. McGuire1, E. McKone1, C. Gallagher1. 1St Vincent’s University Hospital, Dublin, Ireland

Introduction: The aim was to investigate the activity levels and changes in inflammatory markers during weekday supervised treatment and independent weekend treatments. This is the first study to examine any relationship between supervised and unsupervised activity over first week of an inpatient stay.

Methods: Subjects were recruited and consented to complete the Habitual Activity Estimation Scale (HAES) on a weekday and weekend day. Inflammatory markers (CRP, WCC, Neutrophils) recorded on weekday and subsequent Monday during May – September 2011. Results were analysed using paired t-test for statistical significance.

Results: 44 patients were included in the study. M:F 27:17. Significant reduction in CRP was displayed over the weekend period P=0.018 no other inflammatory marker displayed statistical significance. No statistical significance was observed in HAES during the study period. On average 48% of subject’s day is spent in activity 3.8% of which is considered exercise.

Conclusions: Expected reduction in CRP was displayed on commencement of treatment. No significant difference in activity was demonstrated. It is the conclusion of these authors that programmes set to maintain activity during weekends has proven clinical benefits. Overall this patient group display high levels of inactivity, further education is required to promote activity as part of standard care.

Core competencies for physiotherapists working with cystic fibrosis patients in Italy

C. Tartali1, S. Zuffo2, F. Alatri3, A. Brivio4, M. Dona5, L. Graziano6. 1Azienda Ospedaliera Universitaria Integrata Verona, Centro Regionale Fibrosi Cistica, Verona, Italy; 2Azienda Ospedaliero-Universitaria Meyer, Rehabilitation, Firenze, Italy; 3Policlinico Umberto I Rome, Centro Fibrosi Cistica, Roma, Italy; 4IRCCS Policlinico Ca’ Granda Milan, Centro Fibrosi Cistica, Milano, Italy; 5Ospedale Ca’ Foncello ULSS 9, Treciso, Italy; 6Policlinico Umberto I Roma, Centro Fibrosi Cistica, Roma, Italy

Background: There are significant differences among Italian physiotherapists in terms of training, experience in CF, areas of intervention and specific skills.

Aims: To outline the specific competencies a physiotherapist must have when working in a CF Center (CFC) in order to: provide the CFCs with a valid accreditation tool; make the planning of training activities for physiotherapists more effective; create a standard of the competencies and hence the activities of the CFCs in Italy.


Results: The document was acquired by the SIFC’s manual for self-evaluation, and outside peer review by Italian CFCs.

Conclusions: We have defined the core competencies of respiratory physiotherapists working in Italian CFCs. The group’s objectives include bringing the competencies to a uniform national standard.