205 What do our adult CF patients know about bone health?
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Background: Reduced bone mineral density (BMD) is common in patients with CF. Many patients are unaware of the problems which low BMD can lead to, such as susceptibility to fractures, pain and disability. Education regarding CF bone health is currently undertaken as part of standard consultations by the team, including doctors, physiotherapists and dieticians.

Method: 50 randomly selected patients completed a questionnaire on bone health in CF, which assessed their knowledge of bone health, treatments, adherence to taking prescribed vitamins and pancreatic enzymes. Knowledge regarding exercise was evaluated by asking which activities could improve BMD and which should be avoided if an individual had low BMD.

Results: 74% patients were aware that people with CF tend to have low BMD. Vitamins (88%), calcium supplements (68%) and exercise (62%) were the most identified treatments for BMD. However 48% were unable to identify any exercises that might need to be avoided with low BMD. 68% of patients were aware that steroids might affect their BMD. Patients were unable to describe what osteopenia (84%) or osteoporosis (42%) was. 58% did not know what symptoms someone with low BMD might experience.

Conclusion: In general patients had a reasonably good knowledge of bone health in CF but reported suboptimal adherence to vitamin supplements and were unsure of the role of exercise in particular. Specific education about bone health in CF may be needed to improve awareness of bone health, to enable patients to understand how different treatments help maintain bone health. This might improve adherence to vitamin supplements and appropriate exercise.

207 The development of a musculoskeletal screening tool for adults with cystic fibrosis: stage 2
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Introduction: Following the presentation of stage 1 of the musculoskeletal (MSK) screening tool (ST) there was discussion around how it could be developed further to be used as a data collection tool and guide pathways of care.

Objectives: 1. To include validated pain and stress urinary incontinence (UI) questionnaires.
2. To increase the data set to enable future research into predictors of pain.
3. To develop care pathways guided by MSKST outcome.

Method: The MSKST was redeveloped. The McGill Pain Questionnaire (MPQ) and the International Incontinence Q (ICIQ-UI) were included. Care pathways for pain and UI were developed with assistance from msk and women’s health physiotherapists.

Results: Male = 8, female = 6. 68% of patients were aware that people with CF tend to have low BMD. 74% patients were aware that people with CF tend to have low BMD. 68% of patients were aware that steroids might affect their BMD. Patients were unable to describe what osteopenia (84%) or osteoporosis (42%) was. 58% did not know what symptoms someone with low BMD might experience.

Conclusion: In general patients had a reasonably good knowledge of bone health in CF but reported suboptimal adherence to vitamin supplements and were unsure of the role of exercise in particular. Specific education about bone health in CF may be needed to improve awareness of bone health, to enable patients to understand how different treatments help maintain bone health. This might improve adherence to vitamin supplements and appropriate exercise.