

# Better social support and access to exercise classes could help people with lung conditions

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Regular contact with healthcare professionals, support from peers and access to regular organised exercise sessions help people with chronic lung conditions to be physically active, new research has found.

Physical inactivity in those with COPD, a common and preventable respiratory condition that is manageable, but is not currently curable, can lead to poor prognosis across the course of the disease, including increased risk of hospitalisation and death.

Research has previously shown that [pulmonary rehabilitation](#), a treatment of exercise and education in the NHS, can improve fitness, reduce shortness of breath and enhance quality of life in people with COPD. People with COPD report that they enjoy pulmonary [rehabilitation](#) and value support from [healthcare professionals](#) during the programme. However, the average duration of pulmonary rehabilitation programmes in the NHS are between 6 to 8 weeks.

The study, carried out by the universities of Lincoln and Oxford in the UK, found that people with COPD face barriers to remain active following pulmonary rehabilitation, including social isolation, restricted access to exercise sessions in the community, and symptoms of their condition such as breathlessness that evoked anxiety or fear and make them avoid activities.

This latest study shows that regular contact with healthcare professionals, including feedback about progress and achievements, is important to

motivate people with COPD to be physically active following pulmonary rehabilitation. Interaction with their peers can provide a sense of solidarity and support after rehabilitation and access to regular organised exercise sessions help them to establish a routine.

Researchers say the results could offer important insights for clinicians and healthcare professionals to consider in delivering long-term COPD management.

Dr. Arwel Jones, Research Fellow at the Lincoln Institute for Health at the University of Lincoln, UK said: "Being physically active is extremely important for people with COPD, however, people with the disease find it difficult to remain physically active once they have finished pulmonary rehabilitation.

"By telling us the key barriers and facilitators for remaining physically active, our findings will hopefully lead us to being able to provide better long-term support for people with COPD."

Hayley Robinson, who led the study as part of her Ph.D. in the promotion of [physical activity](#) in COPD at the University of Lincoln, added: "People living with COPD often tell us that they have difficulty in maintaining a physically active lifestyle.

"The results provide clear guidance for future research design and we hope that the research can be used to inform future strategies in the NHS to promote physical activity after pulmonary rehabilitation"

Researchers analysed data from international research studies which used interviews and focus groups to gather insights into the experiences of COPD patients.

Dr. Veronika Williams, Departmental Lecturer at the Nuffield

Department of Primary Care Health Sciences, University of Oxford, UK said "This study shows the importance of synthesising qualitative studies to gain a better understanding of patients' experiences in engaging with complex health interventions.

"This is the first qualitative systematic review providing evidence of patients' experiences of physical activity post pulmonary rehabilitation".

**More information:** Hayley Robinson et al, Facilitators and barriers to physical activity following pulmonary rehabilitation in COPD: a systematic review of qualitative studies, *npj Primary Care Respiratory Medicine* (2018). [DOI: 10.1038/s41533-018-0085-7](https://doi.org/10.1038/s41533-018-0085-7)

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