### 18th Annual Conference of the National HIV Nurses Association (NHIVNA)



Speaker Name	Statement
Darren Brown	None
Date: 1st July 2016	July 2016



## CONTENT

## #RehabHIV

UK recommendations – why does it matter?

Who does how much

Behavioral models of change

How to help your patients be more active





## UK Physical Activity Recommendations

#RehabHIV



Physical activity guidelines for

**ADULTS (19-64 YEARS)** 

- 1. Adults should aim to be active daily. Over a week, activity should add up to at least 150 minutes (21/2 hours) of moderate intensity activity in bouts of 10 minutes or more one way to approach this is to do 30 minutes on at least 5 days a week.
- Alternatively, comparable benefits can be achieved through 75 minutes of vigorous intensity activity spread across the week or combinations of moderate and vigorous intensity activity.
- 3. Adults should also undertake physical activity to improve muscle strength on at least two days a week.
- All adults should minimise the amount of time spent being sedentary (sitting) for extended periods.

Individual physical and mental capabilities should be considered when interpreting the guidelines.







# UK Physical Activity Recommendations

#RehabHIV

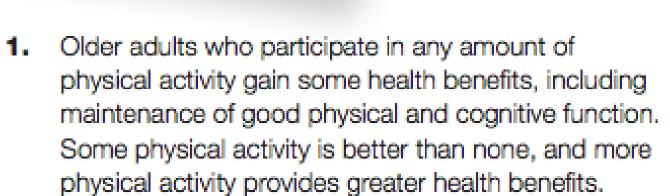
**FACTSHEET 5** 



**NHS Foundation Trust** 

Physical activity guidelines for

**OLDER ADULTS (65+ YEARS)** 



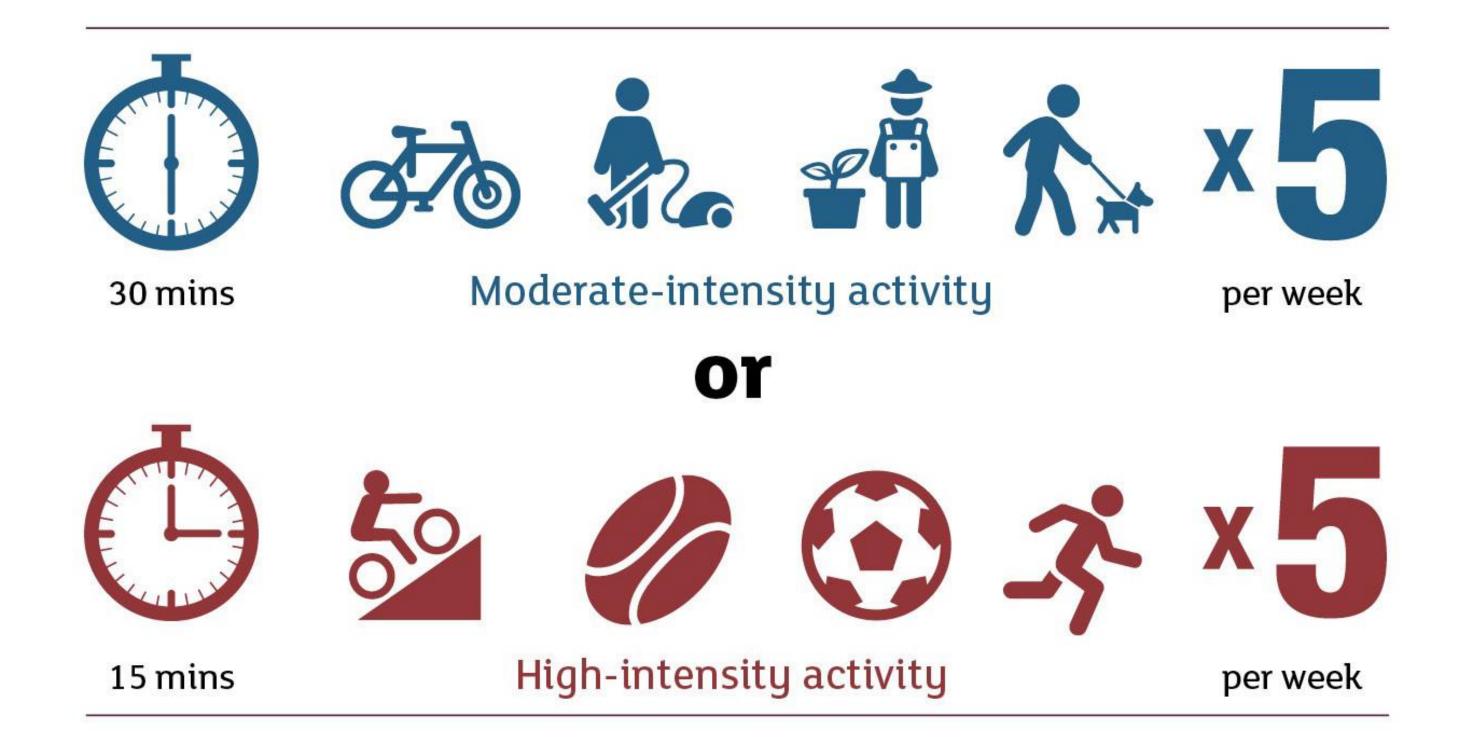
- Older adults should aim to be active daily. Over a week, activity should add up to at least 150 minutes (2½ hours) of moderate intensity activity in bouts of 10 minutes or more - one way to approach this is to do 30 minutes on at least 5 days a week.
- 3. For those who are already regularly active at moderate intensity, comparable benefits can be achieved through 75 minutes of vigorous intensity activity spread across the week or a combination of moderate and vigorous activity.
- Older adults should also undertake physical activity to improve muscle strength on at least two days a week.
- Older adults at risk of falls should incorporate physical activity to improve balance and co-ordination on at least two days a week.
- All older adults should minimise the amount of time spent being sedentary (sitting) for extended periods.







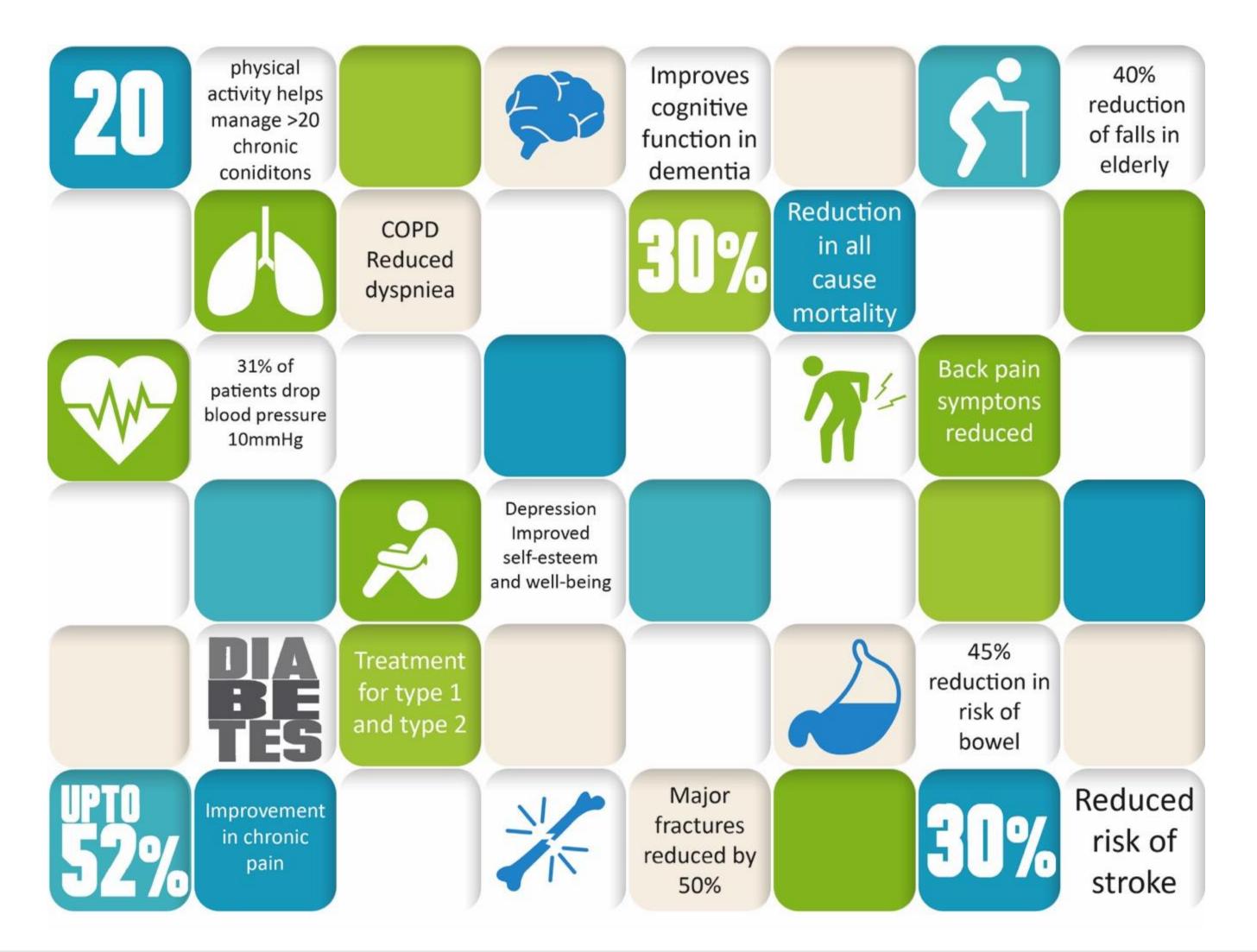
### How Much Do We Do?







## Why Is Exercise Important?









## Why Is This Important for PLWH?

### #RehabHIV

#### Health Conditions

Susceptible to developing health conditions arising from HIV, longterm ARVs and Ageing



#### Living Longer

People living with HIV are living longer

#### Health Challenges

The combination of HIV, ageing and associated multi-morbidity can create physical, cognitive, mental and social health-related challenges



#### Multi-morbidity

As a result, multi-morbidity, is becoming increasing common among people living with HIV

#### **Episodic Disability**

The episodic disability framework describes the unique dimensions of disability experienced by people living with HIV



#### Disability

Collectively these healthrelated challenges may be conceptualised as disability

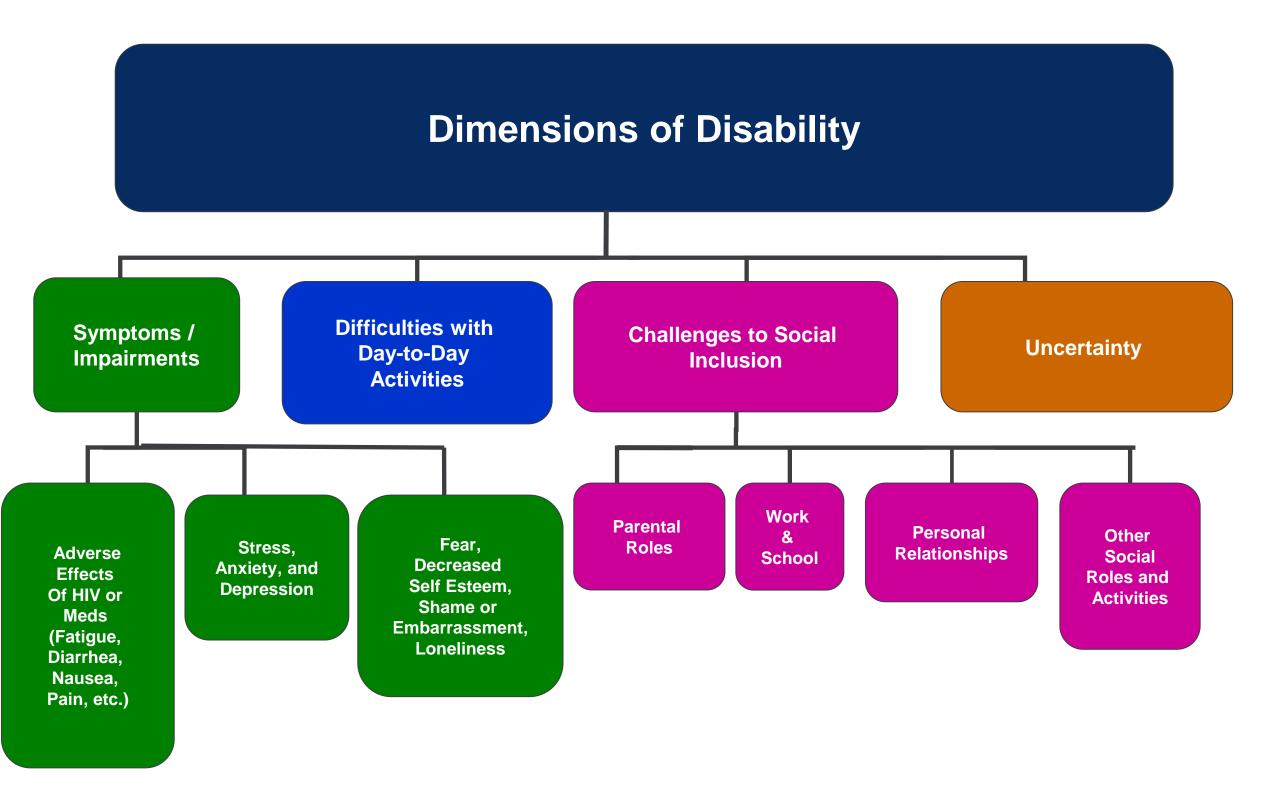


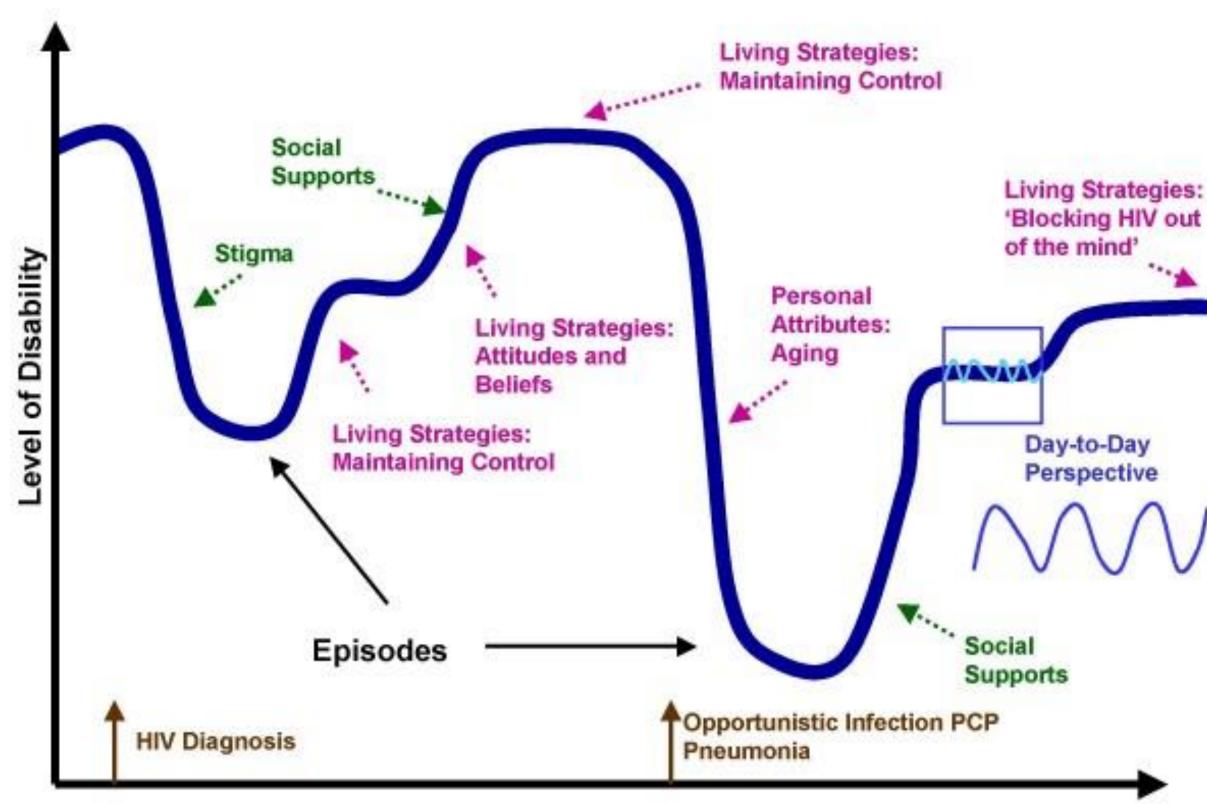




## EPISODIC DISABILITY FRAMEWORK

## #RehabHIV @KellyOBrien25





Time (months, years living with HIV)

O'Brien et al. Health and Quality of Life Outcomes 2008 **6**:76 doi:10.1186/1477-7525-6-76 http://www.hqlo.com/content/6/1/76







## HIV & EXERCISE

Database Title

### #RehabHIV

Intervention Review

#### Aerobic exercise interventions for adults living with HIV/AIDS

Kelly O'Brien1,\*, Stephanie Nixon2, Anne-Marie Tynan<sup>3</sup>, Richard Glazier<sup>3</sup>

Editorial Group: Cochrane HIV/AIDS Group

Published Online: 4 AUG 2010

Assessed as up-to-date: 25 FEB 2010

DOI: 10.1002/14651858.CD001796.pub3

Copyright @ 2010 The Cochrane Collaboration. Published by John Wiley & Sons, Ltd.



AIDS Care: Psychological and Socio-medical Aspects of AIDS/HIV

Publication details, including instructions for authors and subscription information:

Effects of progressive resistive exercise in adults living with HIV/AIDS: systematic review and meta-analysis of randomized trials

- K. O'Brien ab, A.-M. Tynanb, S. Nixon & R.H. Glazier bcd
- <sup>a</sup> Department of Physical Therapy , University of Toronto , Toronto
- <sup>b</sup> Centre for Research on Inner City Health , The Keenan Research Centre in the Li Ka Shing Knowledge Institute of St. Michael's Hospital, Toronto, Canada
- Department of Family and Community Medicine, University of Toronto, Toronto, Canada
- <sup>d</sup> Institute for Clinical Evaluative Sciences , Toronto, Canada
- Published online: 24 Jun 2008.

#### Exercise leads to improvements in;

The Cochrane Library

- Cardiopulmonary fitness (VO2max, exercise time)
- Body composition (leg muscle area, % body fat, arm and thigh girth)
- Strength
- Quality of life
- No change in CD4 count or Viral Load

http://onlinelibrary.wiley.com/o/cochrane/clsysrev/articles/CD001796/frame.html





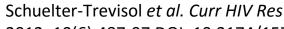




## Who Does How Much?

#RehabHIV





2012; 10(6):487-97 DOI: 10.2174/157016212802429794 http://www.ncbi.nlm.nih.gov/pubmed/22762420





# Readiness to Engage in Exercise

### #RehabHIV

#### Dynamic Construct

Readiness to engage in exercise among PLWH is a dynamic and fluctuating construct.

#### **Episodic Disability**

That may be influenced by episodic nature of HIV and multimorbidity (physical impairments, mental health challenges & uncertainty) and 4 subfactors.

#### Strategies

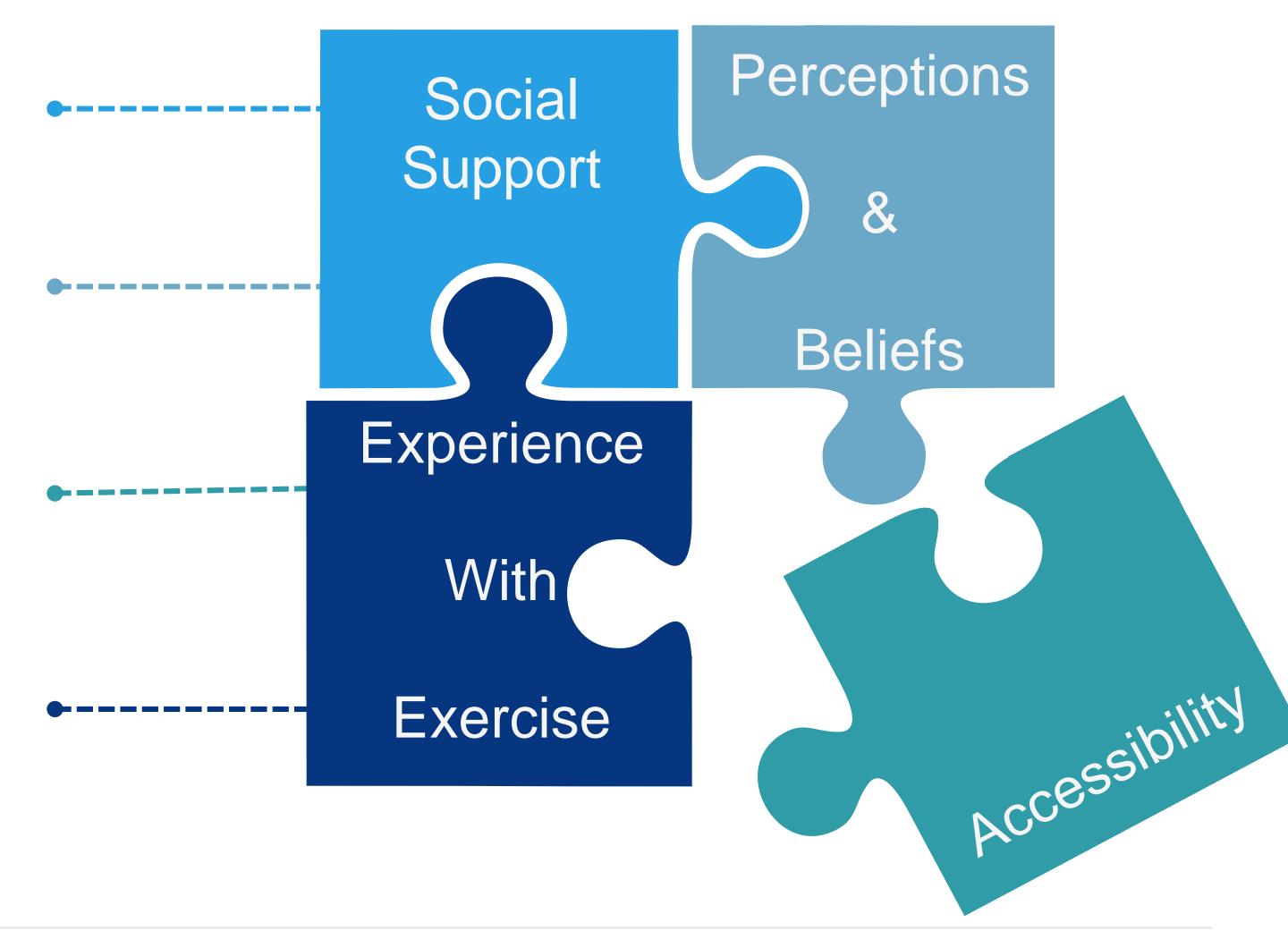
To facilitate readiness to exercise, should consider the interplay of these factors.

#### Health Outcomes

In order to enhance physical activity and subsequently improve health outcomes of PLWH and multimorbidity .

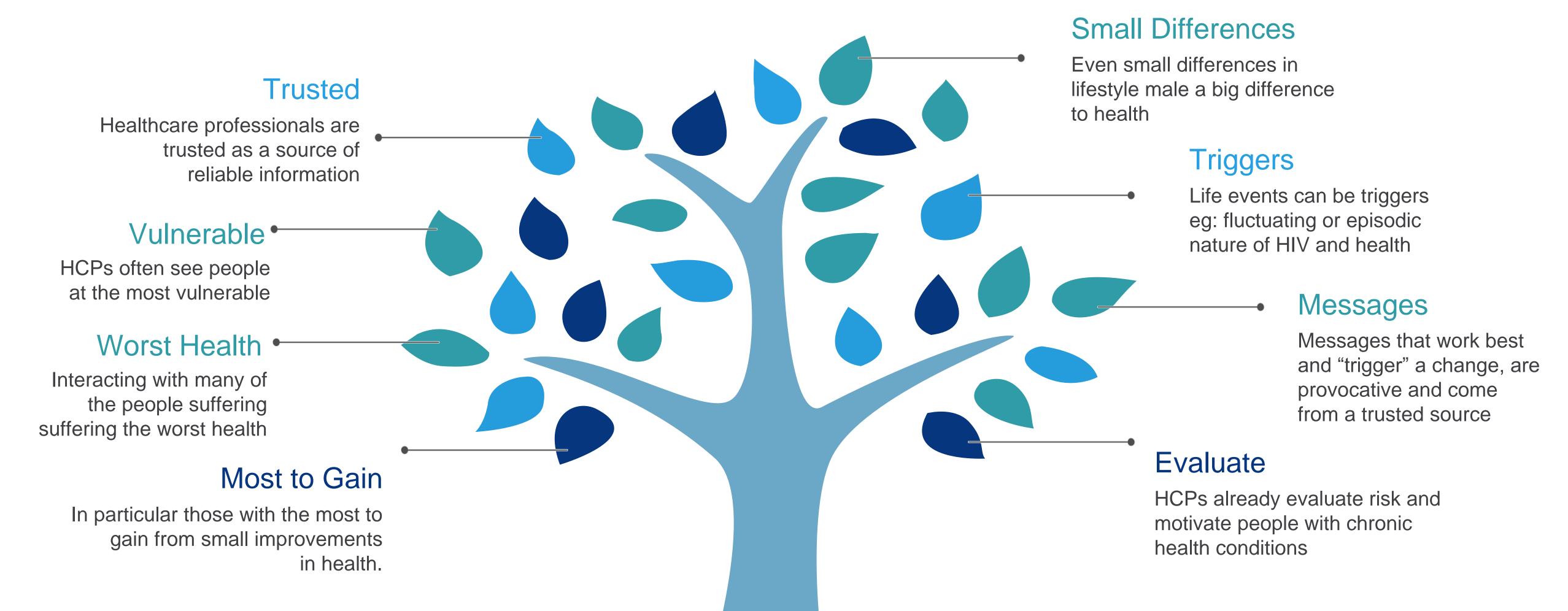
Are you ready? Exploring readiness to engage in exercise among people living with HIV and multimorbidity in Toronto, Canada: a qualitative study 2016; 6:e010029. DOI: 10.1136/bmjopen-2015-010029

http://bmjopen.bmj.com/content/6/3/e010029.full.pdf+html





## The Role of Health Professionals



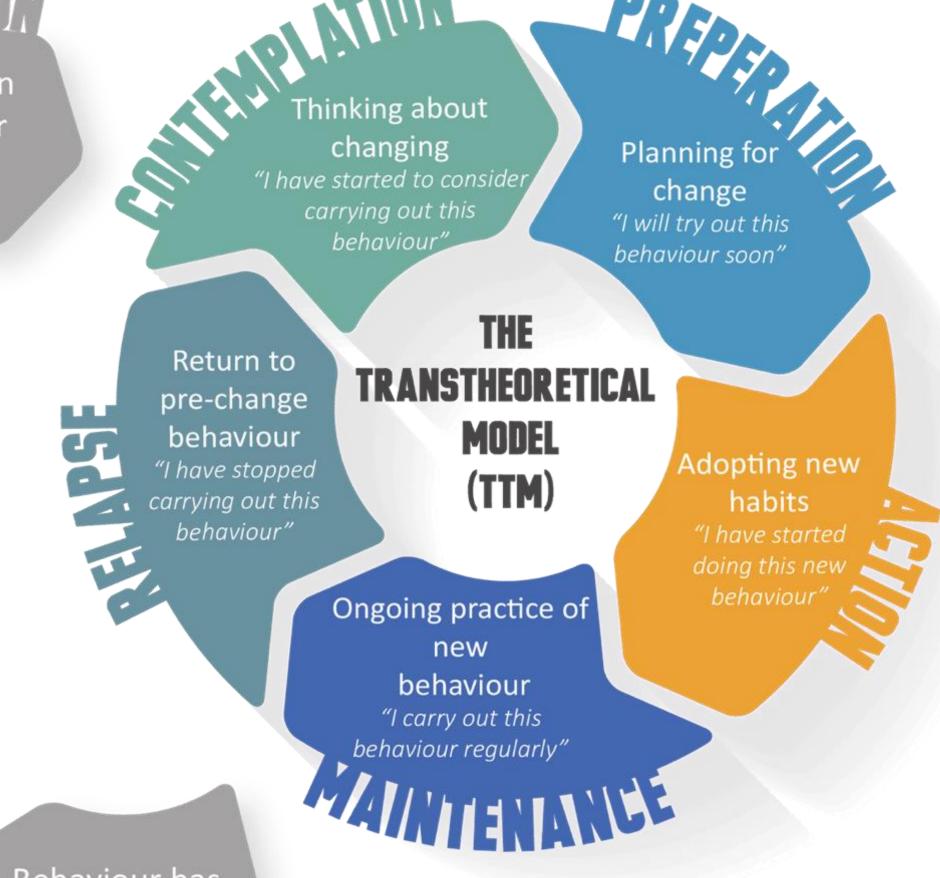




# Models of Behaioural Change

#RehabHIV







Behaviour has permenantly changed





# Changing Behaviour Requires

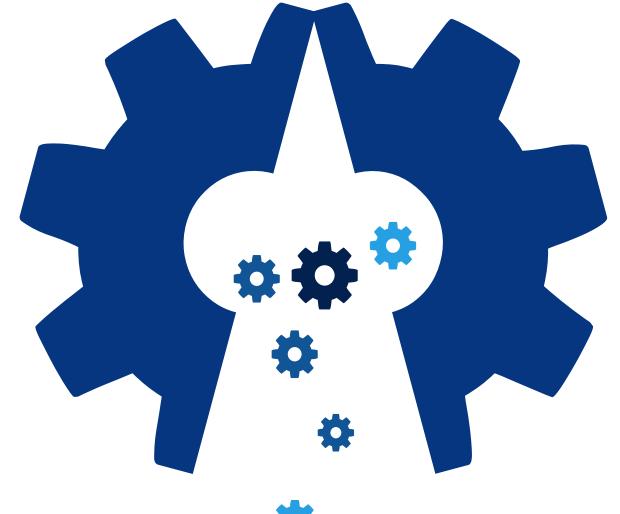
#RehabHIV

The individual to feel empowered or supported eg: by friends

Often a Trigger

**NHS Foundation Trust** 

Easily available opportunities and the skills to be able to change





A physical environment that facilitates the change

**Motivation** 

A plan to cope with future potential failures are perseverance

Knowledge





# How To Support Behaviour Change





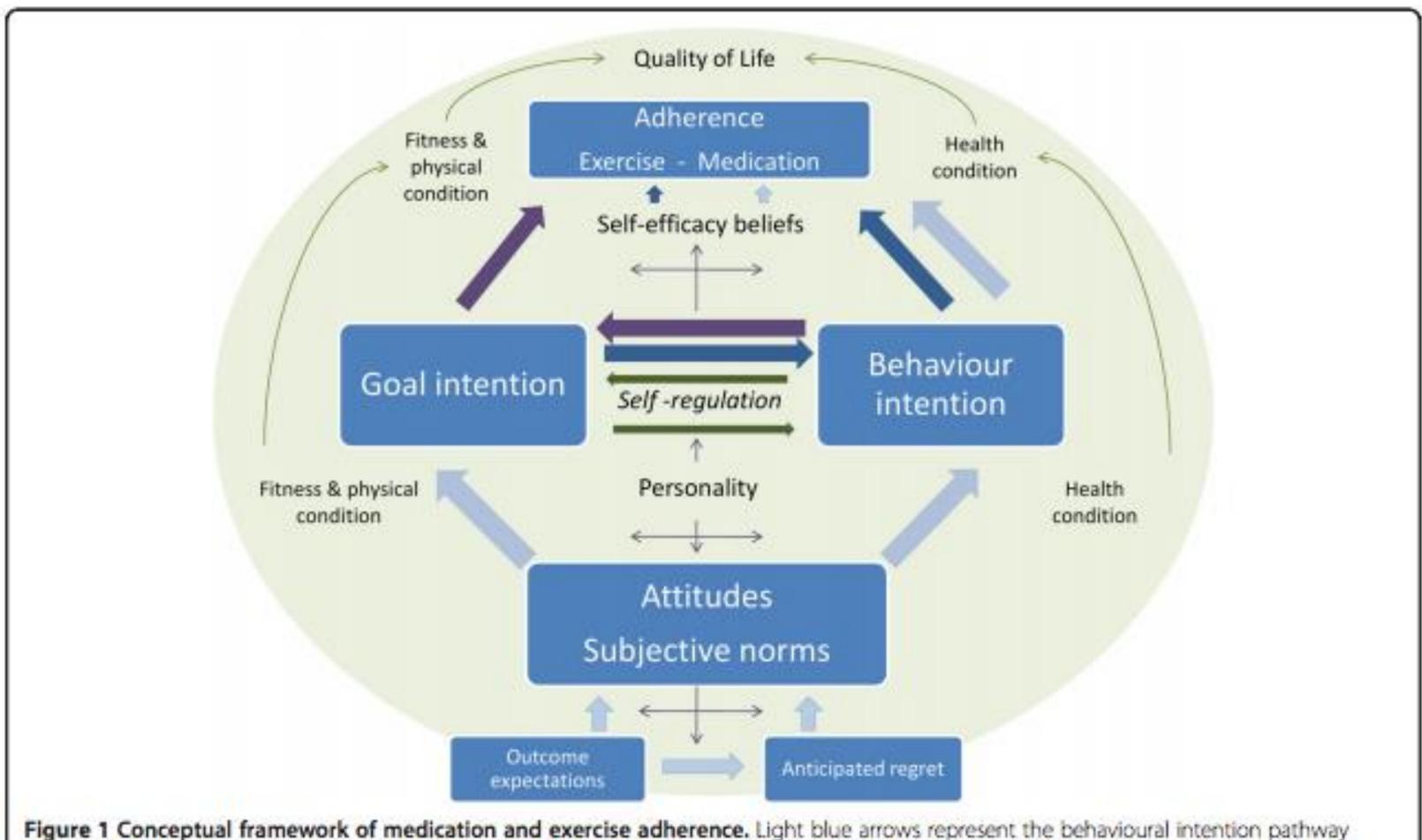


this can be addressed with motivational interviewing and goal-setting.

The "G.R.O.W" model of coaching involves working through....

# Goals and Behaviour Change

### #RehabHIV



Understanding how adherence goals promote adhere nce behaviours: a repeated measure observational st udy with HIV seropositive patients BMC Public Health 2012, 12:587

http://www.biomedcentral.com/1471-2458/12/587

(TPB). Goal intention models: dark blue arrows denote a pathway where goal intention is an antecedent; dark burgundy arrows show a pathway where goal intention is a moderator of the behavioural intention.

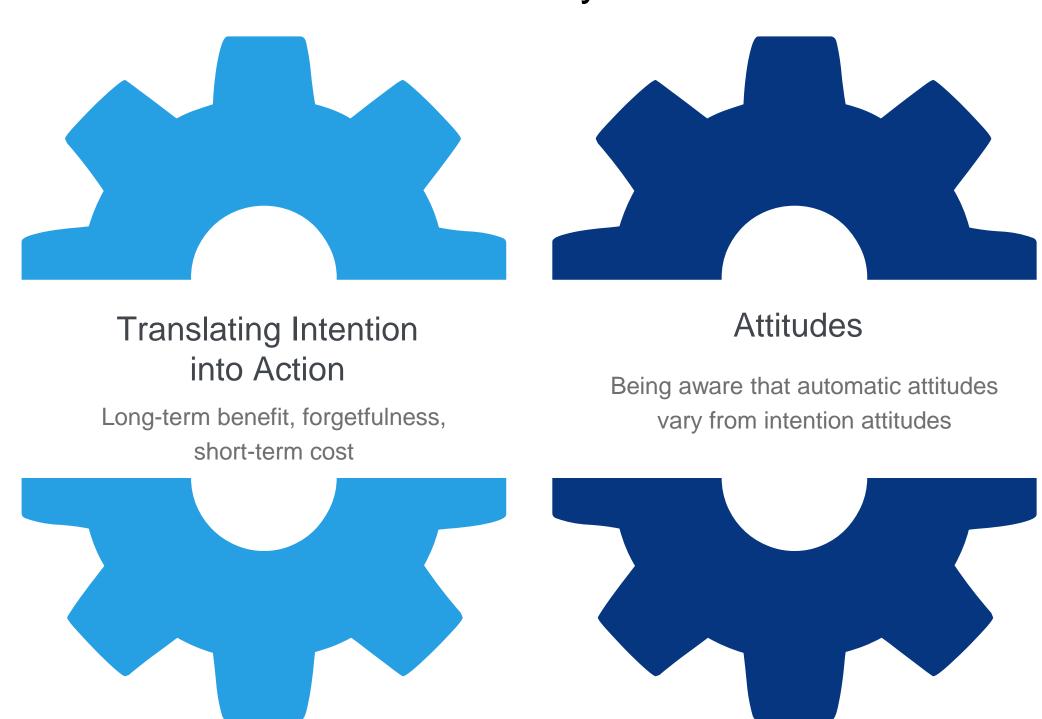




# How To Support Behaviour Change

### #RehabHIV

The **FORESIGHT** report on obesity stated that people have difficulty in:



Their suggestion was that PRIOR PLANNING and "THINKING THROUGH" help overcome the risk of failure as people become 'PERPETUALLY READY'

to respond when temptation occurs

https://www.gov.uk/government/uploads/system/uploads/attachment\_data/file/287937/07-1184x-tackling-obesities-future-choices-report.pdf







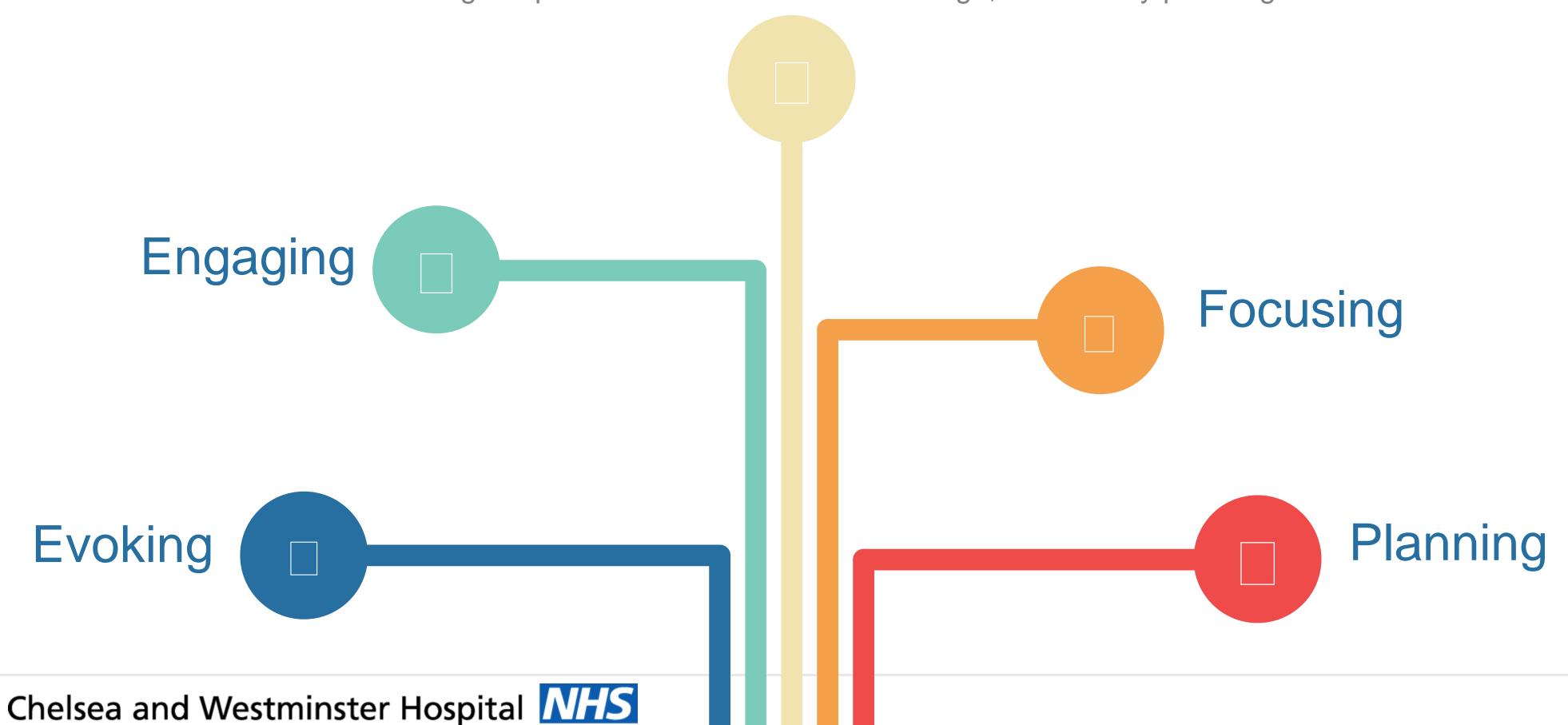
# How To Support Behaviour Change

**NHS Foundation Trust** 

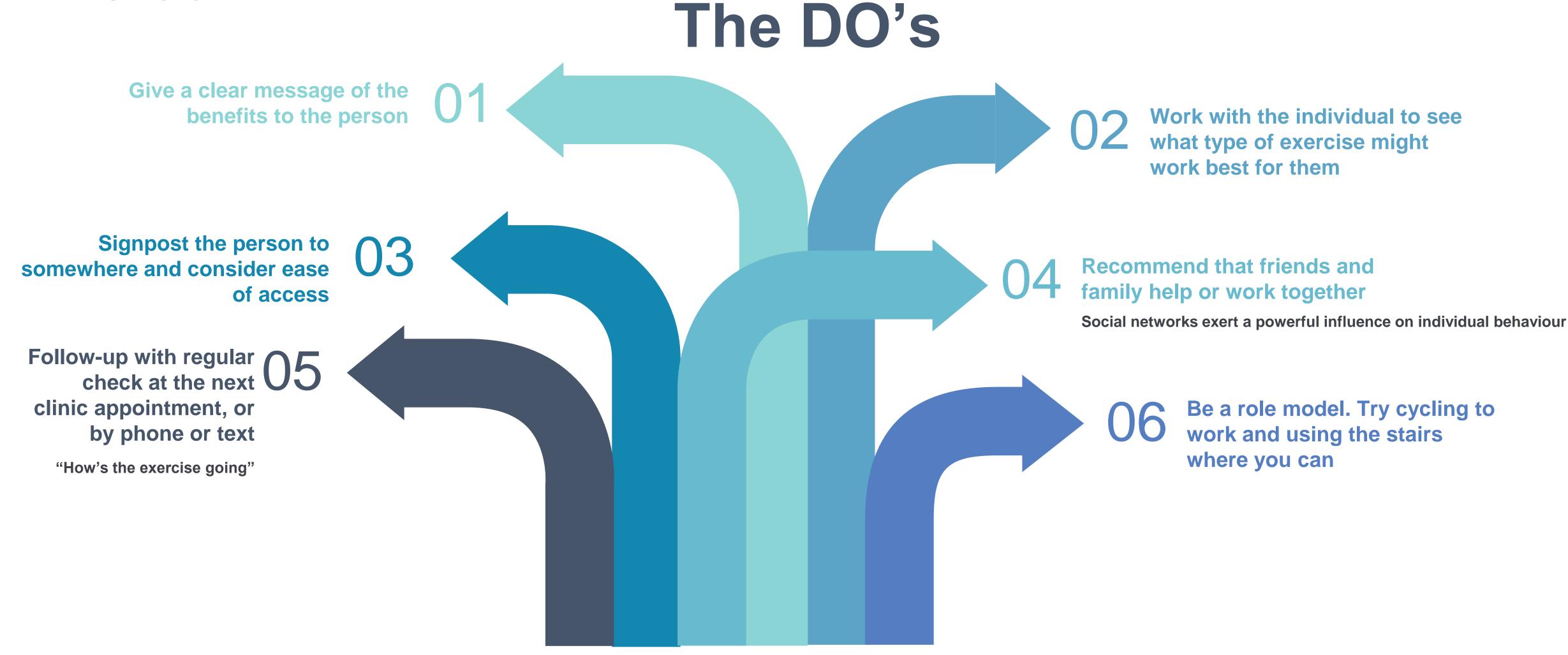
### #RehabHIV

## Motivational Interviewing

Involves concepts of engaging, agreeing a focus with the person and then evoking the persons own motivation to change, followed by planning



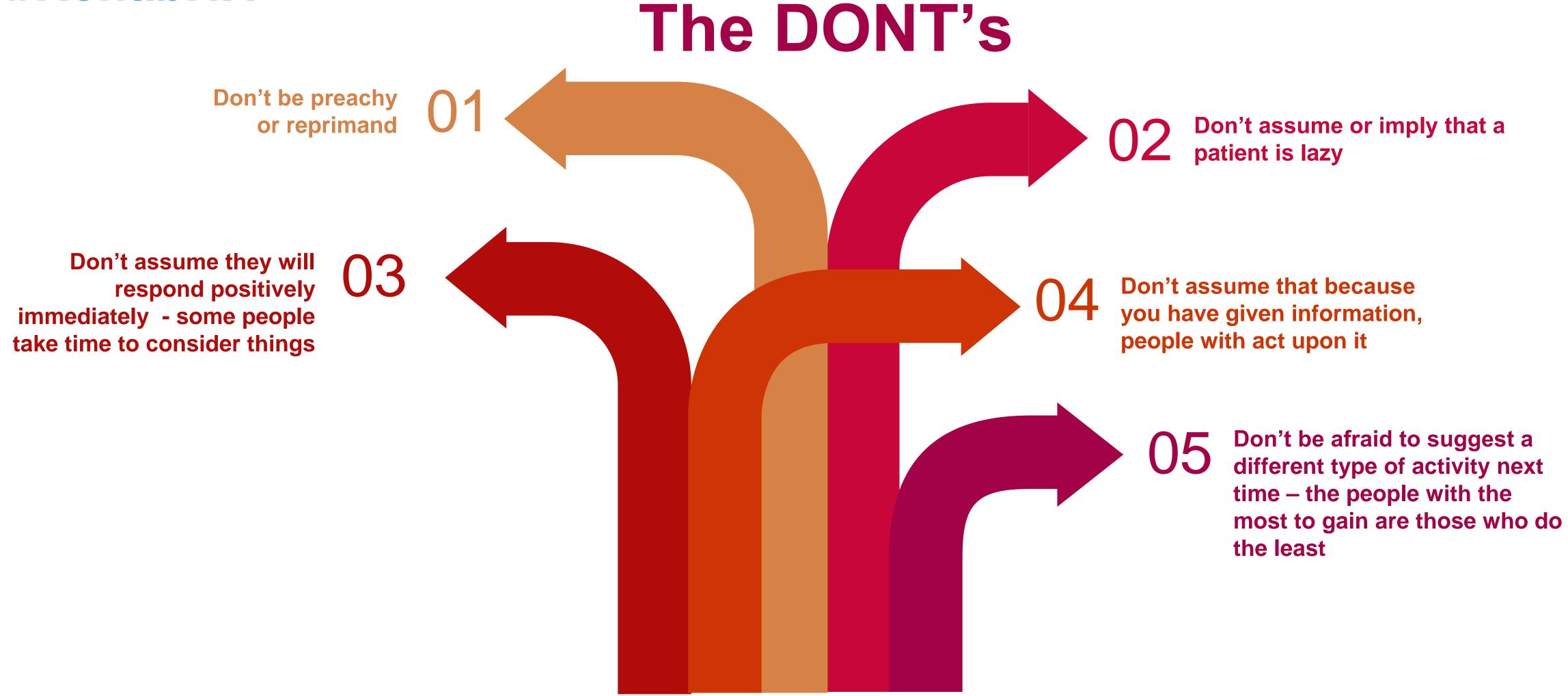
## Do's and Dont's







## Do's and Dont's

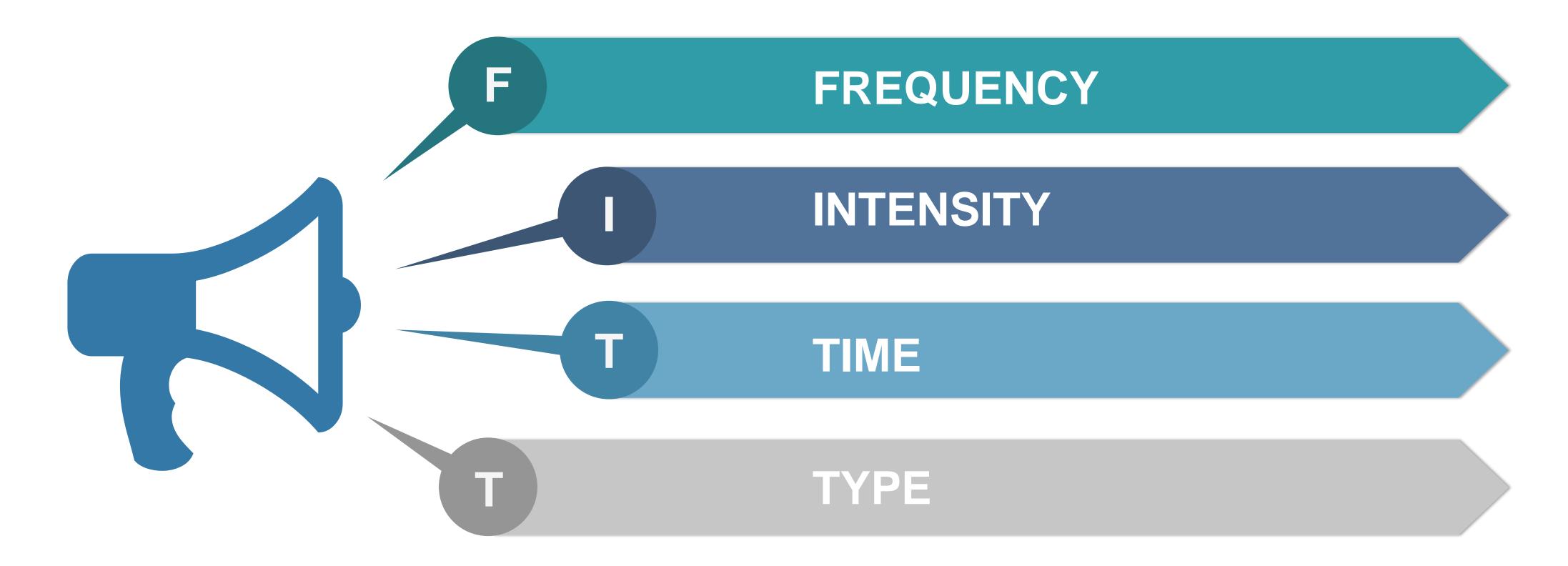






## Practicalities of Exercise

### #RehabHIV



It may also be helpful to know there are a finite number of options





### Routledge Taylor & Francis Group

WEEK 0

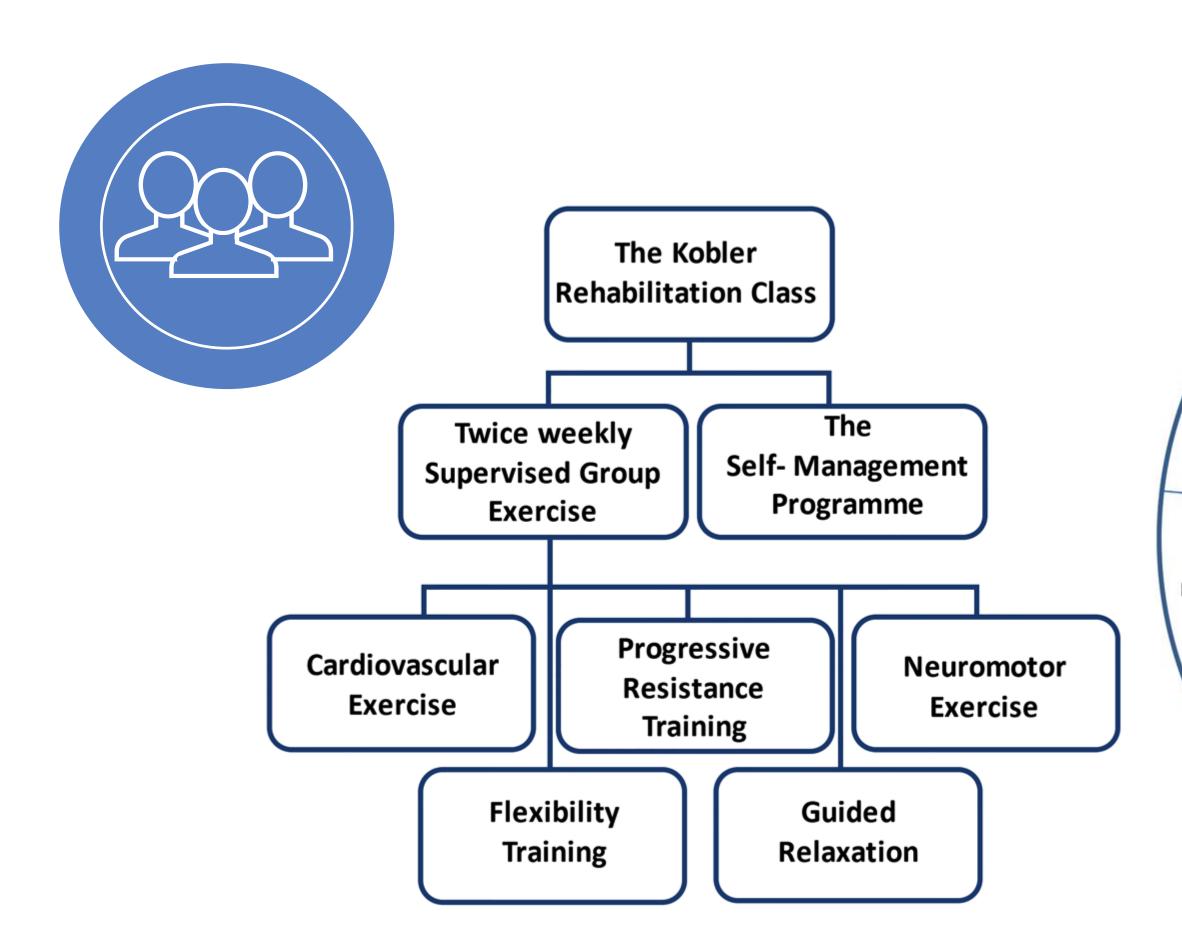
**WEEK 10** 

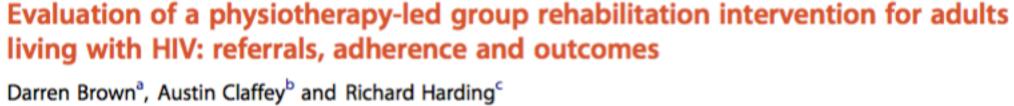
**DROP-IN** 

>10 WEEKS

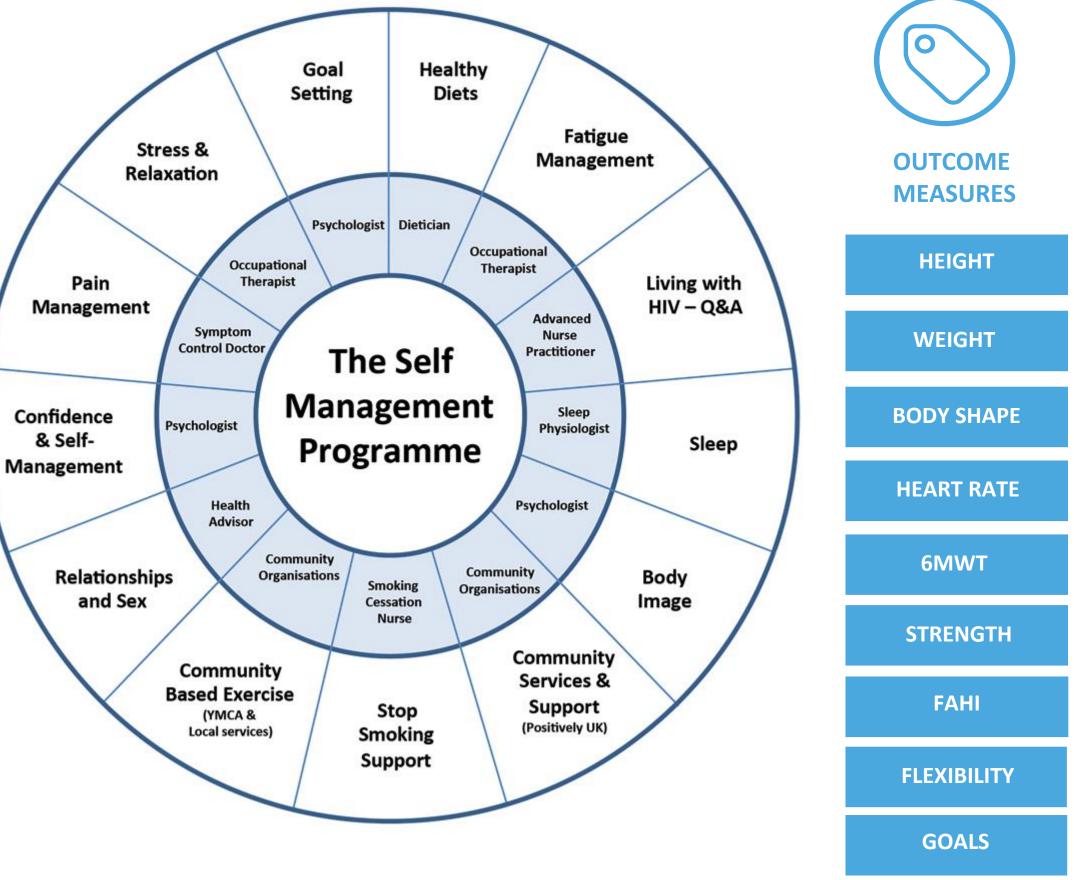
### KOBLER REHAB CLASS

### #RehabHIV





<sup>a</sup>Therapies Department, Chelsea and Westminster Hospital, London, UK; <sup>b</sup>School of Health & Social Care, London South Bank University, London, UK; CDepartment of Palliative Care, Policy & Rehabilitation, King's College London, Cicely Saunders Institute, London, UK







## KOBLER REHAB CLASS

### #RehabHIV





**Exceeding clinically** important difference in COPD, heart failure, stroke survivors and community dwelling older adults

**TRICEPS** (P<0.001) **BICEPS** (P<0.001) **LATTISIMUS DORSI** (P<0001) **SHOULDER PRES (P<0.001)** CHEST PRESS (P<0.001) **LEG PRESS (P<0.001)** 

**PHYSICAL WELL BEING** (P<0.001) **EMOTIONAL WELL BEING** (P<0.001) **FUNCTIONAL/GLOBAL WELL BEING** (P=0.065) **SOCIAL WELL BEING** 

**COGNITIVE FUNCTIONING** 

**Achieved all** goals Average = 3 goals









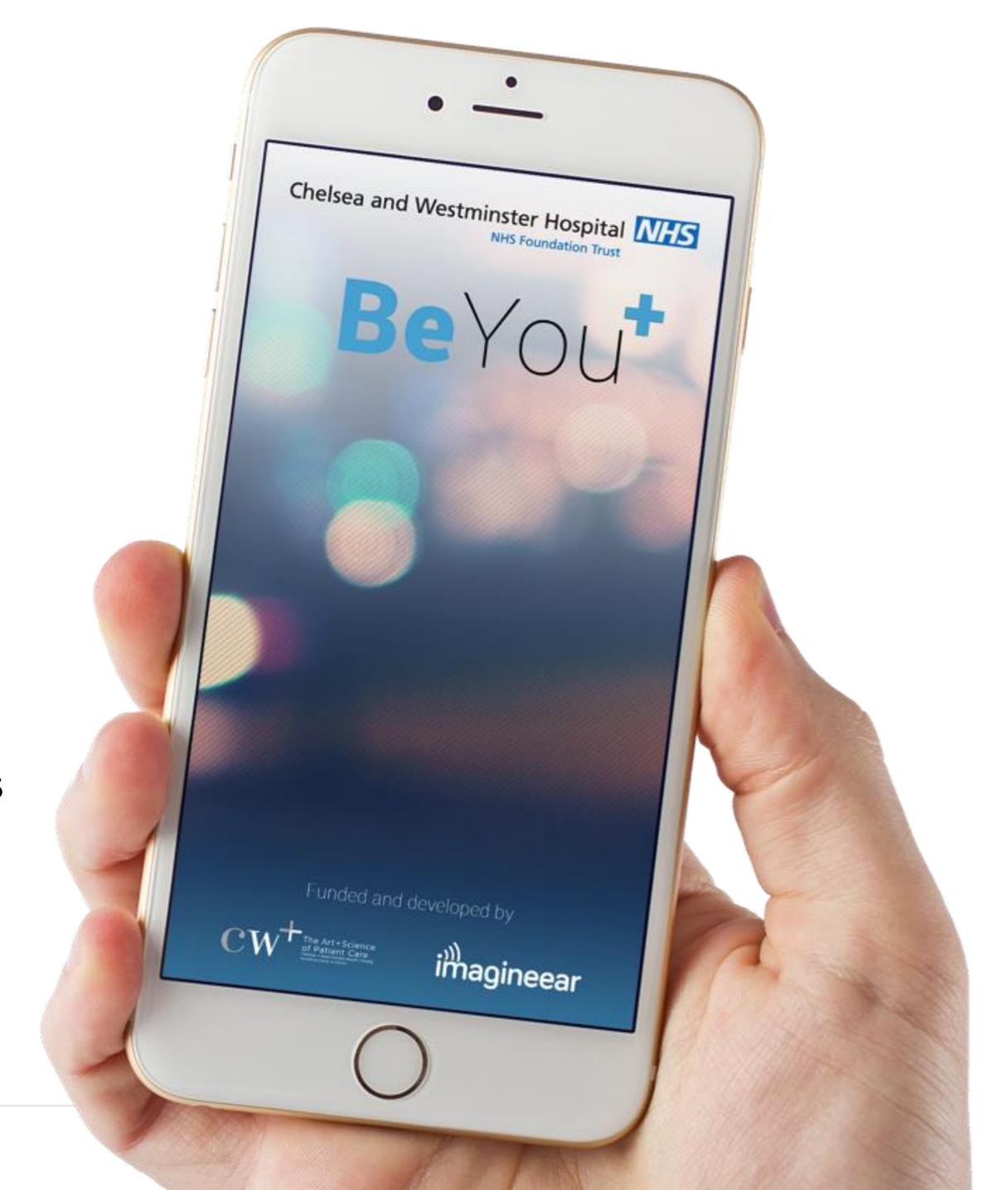




https://vimeo.com/162059872

Information is provided in a convenient and accessible way, so users can access what they need, when they want it, allowing them to focus on being healthy, living well and achieving their goals. BeYou+ gives users the ability to set their own goals and achieve reward videos, input their health information, set reminders that sync with their









## CONCLUSION #RehabHIV

- **Exercise is safe and effective for PLWH**
- As PLWH are ageing with multimorbidity, exercise is becoming a key intervention to improve health and well being
- Huge variability exists in who does how much
- Understanding the role of the episodic nature of HIV and other factors can support PLWH to be ready to engage in physical activity
- HCPs are ideally placed to support PLWH to be more active
- A range of tools can support behavioural change
- Will you be a role model?







