

**“The dog ate my trainers”**



“I can't exercise because I'm out of shape”

***"My hair might get messed up"***

***"My thong shrank"***

“If I exercise, I might not have enough energy left over for sex”

# Which one are you?



**80% of people do not  
comply with DoH  
advice on exercise**





- Diet
- Smoking
- Taking prescribed drugs
- Physiotherapy interventions

# Adherence / Compliance

- Need adherence to reach PT goals – LTC
- Self-management ↑
- One of 10 key areas for CSP research

# Affected by:

- Condition - painful / acute
- Patient beliefs – expectation of recovery
- Perceived benefits
- Positive feedback
- Self-efficacy / motivation
- Contact / partnership working

# Do some people comply more than others?

- Less educated people comply more than well educated
- People who believe their actions influence their illness (internal locus of control)
- Older people
- People who believe their illness will disappear

Why were people with MS  
not doing the exercises  
given to them by  
physiotherapists?

# Sample

- Group A - large town 8 (1 carer)
- Group B - rural area 6 (2 carers)
- Group C - small town 13 (1 carer)

**Men: Women 10:17**

Walking unaided: 9

Using aid: 10

Wheelchair user: 8

# Findings

- 79% had not exercised or had given up within 2 days
- 1 person had done all the exercises on a daily basis for longer than 6 months with no follow up from PT
- 1 had done all exercises and was visited weekly by a private PT
- 1 had continued to exercise for 2 months but had selected exercises

- 1 had done the exercises for 2 weeks after seeing a private PT
- 1 had done the exercises for 1 week following discharge from NHS PT

# Experiences which decreased adherence

Lack of time with PT, quick discharge

*"I didn't really know if I was doing them properly. They tell you so quickly.....she didn't see me after that, I was discharged"*

## Lack of explanation

*"I couldn't understand how that would help my weak leg... they said I had a weak pelvis, has that got something to do with my walking? I did the exercises for a week but what was the point of it?"*

*"I showed them to my mum and she said they're exactly the same ones she got for when she had arthritis"*

# Unwillingness to involve the family

*"I find I don't really want to ask them for help"*

*"A lot of family members are frightened because they don't know if they're going to hurt you"*

## Family and work pressures

*"With two children and a part time job it is impossible to do exercises. In theory I am supposed to do this every day, in practice it's about once a fortnight if you're lucky"*

## The exercises themselves

*"I went all the way to the National and they only gave me three exercises to do"*

## Other symptoms

*"I did lift his arms up once or twice but he shouted because it hurt. He didn't shout when she lifted it, did he. But of course he did when I did it"*

## Lack of family support

*"I needed help to get into position and if no one has got the time, which they never have, I can't do them. My husband works nights so it is difficult to get help because he's not always there"*

## Environmental factors

# Different agendas

*"I went to see a physio in October. She took me to the bit where the bars are, where you learn to walk down. I thought, great, they're going to teach me to walk again. She got me walking down there once.... I only went down there once, I haven't been down there no more"*

## Defeatist attitude of therapist

*"A physio came to our house. She said she couldn't do anything for us. That's a great way to start isn't it, makes you feel very positive doesn't it.....she didn't phone us to make another appointment so we just left it. She said she couldn't do anything to help so what's the point of getting her back?"*

# Experiences which increased adherence

- Regular contact
- Family support
- Patient-developed strategies

*"I sit down and think: Oh no, I've got to do them again, and I think, have your cup of coffee and then do them"*

**how do we help people stick at the exercises?**

# How can we improve adherence?

- Keep in touch - greatest drop occurs after discharge (telerehabilitation?)
- Communication - explain, establish expectations, trust and confidence in therapist, be honest about expected gains
- Involve family

- Combine with function
- Tailor to individual lifestyle / hobbies
- Long or short term? - needs time to integrate new behaviour into lifestyle, long-term is usually self-managed
- Be positive

- Develop triggers (e.g. stickers)
- Patient sets goals and ways of evaluating their progress
- If your treatment/advice does not fit their belief system about their illness, long term compliance will be difficult

Don't set them up to fail



# Static success in LTC





i will start exercising  
regularly! right after  
i start to enjoy sitcoms  
and read romance novels  
and build my own house  
and cut off my feet and  
sell insurance WHICH MEANS  
NEVER