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Implementing of Pulmonary rehabilitation in Vietnam, preliminary results.

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Aim: In Vietnam the prevalence of chronic respiratory disease is increasing due to a high prevalence of smoking, increasing air pollution both indoors relating to biomass smoke and outdoor related to traffic fumes, but there is no community pulmonary rehabilitation (PR). We aimed to assess the implementation of PR in Saigon.

Methods: We engaged stakeholders including staff from rehabilitation hospitals and family physicians and developed education of physicians. In visit 1, RJ and SS met with hospital clinical staff, administrators, physiotherapists and traditional medicine. We ran a training programme for the university team and physiotherapists to deliver and evaluate the programme. A one day workshop was delivered for 18 doctors, physios and nurses from local rehab hospitals which covered the principles and practice of PR. In visit 2 we observed rehab assessment and rehearsed the programme, which was then run for 3 groups.

Results: The rehab programme needed to be adapted to improve recruitment (time of day and site of delivery) and the design (a rolling programme rather than fixed groups). Obstacles were doctor and patient apprehension about the safety of exercise with COPD. Of 18 participants completing PR and 6 weeks follow-up data collection, 9/18 (50% were) men, 1/18 current smokers 5 and their mean age was 62 years range 32-77 years. Outcomes showed the incremental shuttle walking test (ISWT) improved 111m, minimum clinical important difference (MCID) is 48 metres and the Total Clinical COPD Questionnaire (CCQ) by 1.3 (MCID 0.4). Chest pains were reported by 61% of participants before PR, but none after.

Conclusion: PR was implemented with adaptations to improve access and retention of participants. Preliminary quantitative data show clinically important improvements in maximal exercise capacity and health status. Qualitative and quantitative data collection is ongoing.

Figure Outcomes of PR for 18 participants. figures are mean and (standard deviation) unless stated otherwise.

	ISWT (metres)	CCQ Total	CCQ symptoms	CCQ mental state	CCQ function	Chest pains N (%)	Haemop N (%)
Baseline	226 (65.4)	2.1 (9.1)	6.4 (3.7)	4.4 (2.8)	10.3 (4.9)	11 (61%)	1 (9%)
End of PR	341 (100.2)	10.6 (5.3)	3.9 (2.8)	1.9 (1.5)	4.8 (2.8)	0 (0%)	0 (0%)
6 week post rehab	335 (98.5)	7.8 (4.9)	3.3 (2.6)	1.5 (1.3)	3.0 (2.4)	0 (0%)	0 (0%)

Declaration of Interest

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