Since January 2020 Elsevier has created a COVID-19 resource centre with free information in English and Mandarin on the novel coronavirus COVID-19. The COVID-19 resource centre is hosted on Elsevier Connect, the company's public news and information website.

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ePoster Sessions

ePoster Session 1 – Developments of remote physiotherapy during COVID-19 restrictions on usual practice

EPS1.01
Physiotherapy practice of French cystic fibrosis children changed during lockdown due to COVID-19 pandemic

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Objectives: In France, chest physiotherapy for cystic fibrosis (CF) patients is partly performed by liberal physiotherapists at home or at the professional's office. The first lockdown, due to the COVID-19 pandemic, impaired the possibility to practice liberal physiotherapy. We aimed to describe, in our paediatric CF centre, the changes in physiotherapy and sport practice induced by this lockdown, and to correlate it with respiratory symptoms and pulmonary function evolution.
Methods: During the lockdown, 68 CF patients >6 years old and their parents answered a questionnaire on time spent in physiotherapy, with or without a liberal professional, and sport practice before and during lockdown. Respiratory symptoms and FEV_1 were collected at the venues before and after the lockdown.
Results: This study showed a clear reduction of time spent with a liberal physiotherapist from 73 min/week before lockdown to 30 min/week during lockdown. Time of physiotherapy practised alone or with parents increased from 2 min/week to 26 min/week. Thus, the overall physiotherapy time per week was only slightly reduced from 90 min/week before lockdown to 80 min/week during lockdown. Time spent in sport practice was not significantly decreased on average (233 min/week before lockdown vs 225 min/week during lockdown). The standard deviation of sport practice evolution was large (−8 min ± 225 min), reflecting a wide variation of sport practice changes from one patient to another.
No deterioration in respiratory symptoms nor FEV_1 was observed.
Conclusions: During the lockdown in France, we noted that our patients drastically decreased their time spent with a liberal physiotherapist, without enough counterbalance with auto-drainage or sport pratice increase. Nevertheless, their respiratory status was not impaired, suggesting some other confounding factors, such as prevention from viral infection, time to rest or improvement of other treatment observance.

EPS1.02
The impact of COVID-19 on the prescribing practice of specialist cystic fibrosis physiotherapist non-medical prescribers in the UK

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Background: In the first wave of the COVID-19 pandemic, people with cystic fibrosis (pwCF) in the UK were asked to 'shield' at home whilst many specialist CF staff were redeployed. CF services had to rapidly adapt to the changing circumstances and traditional roles were blurred as services were redesigned to try to maintain quality CF care alongside minimising risk of COVID-19.
Objective: To examine the impact of COVID-19 on the prescribing practice of CF physiotherapist non-medical prescribers (CFPT-NMPs) in the UK.
Method: A bespoke online questionnaire was sent to all members of the ACPCF NMP group in July 2020.
Results: 19/27 CFPT-NMPs completed the questionnaire (6 adults, 12 kids and 1 both). A greater proportion of adult CFPT-NMPs (6/6, 100%) than kids (3/12, 25%) or both (0/1, 0%) had been redeployed to non-CF areas. All reported COVID-19 had changed their prescribing practice, with an overall trend towards prescribing outside their CF speciality 5/8 (63%). In adults the trend was towards less frequent prescribing (4/5, 80%) with an increase in the different types of medication prescribed (3/4, 75%); in kids there was an increase in frequency of prescribing (7/10, 70%) but no trend in change of types of medication prescribed. 14/18 (78%) reported a delay or cessation in completing non-urgent drug response assessments (DRAs). The 22% of respondents reporting no delay in DRAs were working in kids. The 11/18 (61%) who had completed DRAs reported large variability within the DRA process, specifically around use of PPE and outcome measures.
Conclusion: COVID-19 has significantly impacted the delivery of CF care and CFPT-NMP's prescribing practice. Many DRAs, the gateway to pwCF accessing appropriate inhaled medications, have been delayed. This was more likely in the adult population, highlighting the greater impact COVID-19 has had on adult CF services. COVID-19-specific DRA guidance has subsequently been produced by our ACPCF NMP group, facilitating timely and safe practice nationally.