Physical activity in people with axial spondyloarthritis and the impact of attitudes, barriers and facilitators

Authors: Jens Ole Rasmussen\textsuperscript{a,b}, Jette Primdahl\textsuperscript{a,c,d}, Willy Fick\textsuperscript{b}, Ann Breman\textsuperscript{a,c}

\textsuperscript{a}Danish Hospital for Rheumatic Diseases, University Hospital of Southern Denmark, Sonderborg, Denmark, \textsuperscript{b}Danish Patient Association for Axial Spondyloarthritis, Denmark, \textsuperscript{c}Department of Regional Health Research, University of Southern Denmark, Odense, Denmark, \textsuperscript{d}Hospital of Southern Jutland, University Hospital of Southern Denmark, Aabenraa, Denmark

RESULTS

445/972 members (46\%) completed the questionnaire (Table 1). 23\% were physically active for at least 30 minutes on a moderate intensity level \(\leq 1\) day/week, 36\% \(2-3\) days/week and 41\% \(4-7\) days/week.

Responser who were physically active \(\geq 2\) days/week had more positive attitudes to physical activity, disagreed more often with suggested barriers, had better self-percieved health and QoL compared with those who reported a low physical activity level (\(\leq 1\) day/week) (Table 2 and Figure 1).

In a multivariate model, high physical activity was associated with a positive attitude ('physical activity is ok', OR 5.44, 95\%CI [1.24 - 23.87], and 'I like physical activity', OR 14.22, 95\%CI [3.34 - 60.61]), and higher disagreement with barriers, OR 1.12, 95\%CI [1.07 - 1.17]).

METHODS

In 2018, members from the Danish Patient Association for Spondyloarthritis were invited to participate in an on-line survey. The questionnaire included diagnosis, health, quality of life (QoL), level of physical activity, attitudes, barriers and facilitators to physical activity.

Logistic regression analysis was applied to study associations between level of physical activity and attitudes, barriers, facilitators and self-perceived health.

BACKGROUND

Barriers such as high disease activity, fatigue, pain, stiffness, physical exertion and lack of time have a negative impact on physical activity level in people with axial Spondyloarthritis (axSpA), while more time is a facilitator. In addition, an intrinsic drive to exercise is an important motivator, guided by personal interest and enjoyment in exercise.

OBJECTIVE

To study the association between self-reported level of physical activity and self-perceived health, quality of life, attitudes, barriers to and facilitators of physical activity in people with axSpA.

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CONCLUSION

To support lifestyle changes, health professionals need to discuss attitudes and barriers to physical activity with their clients.

Barriers seem to be of greater importance than facilitators of any kind.