

Disclosure

The Danish MS Rehabilitation Study was conducted by the Danish MS Hospitals, and did not rely on any external funding. Morten Riemenschneider declares no conflicts of interests. Philipp Trénel declares no conflicts of interests. Michael Nørgaard declares no conflicts of interests. Finn Boesen declares no conflicts of interests.

P798

The impact of the COVID-19 pandemic on physiotherapy services for people with multiple sclerosis: a multicentre survey study of the RIMS network

T. Kahraman¹, K. Rasova², J. Jonsdottir³, C. Santoyo Medina^{4,5}, D. Kos⁶, S. Coote^{7,8}, A. Tacchino⁹, T. Smedal^{10,11}, E.C. Arntzen^{12,13}, G. Quinn¹⁴, Y.C. Learmonth^{15,16,17}, L. Pedullà⁹, L. Moumdjian^{18,19,20}, A. Kalron^{21,22}

¹*Izmir Katip Celebi University, Department of Physiotherapy and Rehabilitation, Faculty of Health Sciences, Izmir, Turkey*, ²*Charles University, Department of Rehabilitation, Third Faculty of Medicine, Prague, Czech Republic*, ³*IRCCS Fondazione Don Carlo Gnocchi ONLUS, Milan, Italy*, ⁴*Universitat Autònoma de Barcelona, Centre d'Esclerosi Múltiple de Catalunya (Cemcat), Neurology-Neuroimmunology Department & Neurorehabilitation Unit, Hospital Universitari Vall d'Hebron, Barcelona, Spain*, ⁵*Universitat Internacional de Catalunya, Department of Physiotherapy, Faculty of Medicine and Health Sciences, Barcelona, Spain*, ⁶*KU Leuven, Department of Rehabilitation Sciences, Leuven, Belgium*, ⁷*University of Limerick, School of Allied Health, and Centre of Physical Activity for Health, Health Research Institute, Limerick, Ireland*, ⁸*Multiple Sclerosis Society of Ireland, Limerick, Ireland*, ⁹*Scientific Research Area, Italian Multiple Sclerosis Foundation (FISM), Genova, Italy*, ¹⁰*Haukeland University Hospital, Department of Physiotherapy, Bergen, Norway*, ¹¹*Haukeland University Hospital, The Norwegian Multiple Sclerosis Competence Centre, Department of Neurology, Bergen, Norway*, ¹²*Nord University, Faculty of Nursing and Health Science, Bodø, Norway*, ¹³*Nordland Hospital Trust, Department of Health and Work, Bodø, Norway*, ¹⁴*St. James's Hospital, Physiotherapy Department, Dublin, Ireland*, ¹⁵*Murdoch University, Discipline of Exercise Science, Murdoch, Australia*, ¹⁶*Murdoch University, Centre for Molecular Medicine and Innovative Therapeutics, Centre for Healthy Ageing, Health Futures Institute, Murdoch, Australia*, ¹⁷*Perron Institute for Neurological and Translational Science, Nedlands, Australia*, ¹⁸*UMSC Hasselt, Pelt, Belgium*, ¹⁹*Hasselt University, REVAL Rehabilitation Research Center, Faculty of Rehabilitation Sciences, Hasselt, Belgium*, ²⁰*Ghent University, IPEM Institute of Psychoacoustics and Electronic Music, Faculty of Arts and Philosophy, Ghent, Belgium*, ²¹*Tel-Aviv University, Department of Physical Therapy, School of Health Professions, Sackler Faculty of Medicine, and Sagol School of Neuroscience, Tel Aviv, Israel*, ²²*Sheba Medical Center, Multiple Sclerosis Center, Tel Hashomer, Israel*

Introduction: The COVID-19 pandemic has placed a strain on healthcare services worldwide with a highly heterogeneous impact. Therefore, the Special Interest Group for Mobility (SIG Mobility) of the European Network for Best Practice and Research in Multiple Sclerosis Rehabilitation (RIMS) decided to examine the impact of the COVID-19 outbreak on physiotherapy services in people with multiple sclerosis (pwMS).

Objective: To describe the impact of the pandemic on physiotherapy practice from the perspective of physiotherapists (PTs) by investigating changes in rehabilitation methods, organizational framework, and technology usage.

Methods: An online survey was developed by RIMS SIG Mobility and distributed to PTs in 9 countries (Australia, Belgium, Czech Republic, Ireland, Israel, Italy, Norway, Spain, and Turkey) from December 2020 to July 2021.

Results: 215 PTs participated in the study. The therapy most affected during the pandemic was aerobic training/conditioning exercises; 33.5% reported that these activities were either reduced or unavailable. In contrast, 15% reported increased use of relaxation/mind-body techniques and/or fatigue management programs. Frequency, total number, and duration of sessions decreased significantly during the pandemic compared to before the pandemic ($p < 0.001$). Physiotherapy service delivery (accessibility) and effectiveness for pwMS were significantly decreased ($p < 0.001$). There was a 10% decrease in the use of hands-on techniques and a 10% increase in the use of oral instructions when treating pwMS having moderate or severe disability during the pandemic compared to before. PTs increased use of telerehabilitation applications during the pandemic ($p < 0.001$): app usage increased significantly from 37% to 56%, use of recorded videos from 38% to 55%, use of physiotherapy exercise websites from 33% to 52%, and use of exercise classes on TV from 7% to 20%. The top 4 challenges faced in telerehabilitation were limitations of assessment (54%), difficulties with equipment (43%), difficulties with understanding the patient's body language (35%), and not being able to use proprioceptive cues (35%).

Conclusions: The COVID-19 pandemic has notably affected physiotherapy services for pwMS internationally in terms of content, frequency of use, format, accessibility, and effectiveness. The long-term consequences of these changes should be investigated.

Disclosure

Turhan Kahraman: nothing to disclose.
Kamila Rasova: nothing to disclose.
Johanna Jonsdottir: nothing to disclose.
Carme Santoyo Medina: nothing to disclose.
Daphne Kos: nothing to disclose.
Susan Coote: nothing to disclose.
Andrea Tacchino: nothing to disclose.
Tori Smedal: nothing to disclose.
Ellen Christin Arntzen: nothing to disclose.
Gillian Quinn: nothing to disclose.
Yvonne C Learmonth is funded by an MS Australia Fellowship.
Ludovico Pedullà: nothing to disclose.
Lousin Moumdjian: nothing to disclose.
Alon Kalron: nothing to disclose.