

CO-CREATING BALANCE TRAINING FOR PEOPLE WITH LUNG DISEASE

People with COPD are twice as likely to experience falls than those without. Our [B-PuRe project](#) researchers, based at Teesside University, want to find out whether balance training could help. We wanted to co-create balance training for people with lung disease that would be effective, feasible and fun.

We invited experts-by-experience (people with lung disease and carers) and health professionals (including physiotherapists and physical activity specialists) to attend 1 or 2 workshops in Darlington or to complete 1 or 2 online surveys.



What we learned from Workshop/Survey 1

This workshop and survey focused on understanding what people with lung disease need and want from balance training.

Living with lung disease

People with lung disease...

- Find it difficult to get places
- Need to plan life very carefully
- Feel left out from activities with friends and family

Falls happen when people are...

- Changing position
- Moving around
- Lifting, carrying and reaching
- Walking on uneven ground

Workshop/Survey 1
June 2024

Contributors

10 Experts-by-experience

22 Health professionals

Balance training for people with lung disease should prioritise...

Physical benefits

1. Walking further
2. Feeling more steady
3. Changing direction and turning

Social/emotional benefits

1. Better quality of life
2. Feeling more confident
3. Better mental health

Practical needs

1. Affordable
2. Convenient location
3. Enjoyable

Most popular activities



Tai chi



Walking football



Dance

These activities are perceived as safe, social, enjoyable, low cost, flexible and adaptable.

What we learned from Workshop/Survey 2

Based on workshop/survey 1, we decided to base the balance training on walking sports. This workshop and survey focused on the practicalities of delivering the balance training.

Suggested activities were popular, realistic and adaptable.



Training should be offered after pulmonary rehabilitation or as a separate activity.



The preferred time of day is late morning to mid- afternoon.



The instructor would need to understand COPD, falls, and how to modify activities.



Tracking/monitoring is important, but all methods have pros and cons.



Participants attending balance training need good parking or door-to-door transport, time to socialise, falls education and mental health support. Home-based activities were not popular.

Workshop/Survey 2
July 2024

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35 Health professionals

What we are going to do now

Using these insights we are developing a randomised controlled trial comparing walking sports-based balance training with standard care. It will be for people with COPD who have completed pulmonary rehabilitation (PR).

Who will take part

People with COPD who have fallen or are considered a falls risk.

Randomly allocated to a test group or a control group.

Both groups will be assessed. Only the test group will do the balance training.

How it will be delivered

2 x 2h sessions per week for 6 weeks after PR.

Sessions will include exercise, socialising, and education/ advice on falls prevention.

Transport provided if needed.

Delivered by physiotherapists with training and support. from walking sports coaches.

What we'll monitor

Strength, balance and reflexes.

Levels of physical activity.

Falls and near misses.

Rates of participation.

Trips to GP or hospital.

Mental health.

Self-reflections.

If you would like to know more contact Prof Samantha Harrison via s.l.harrison@tees.ac.uk.



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