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AB1408-HPR CONTENT VALIDITY OF A SWEDISH VERSION OF THE SATISFACTION WITH APPEARANCE SCALE IN SYSTEMIC SCLEROSIS – THE HEALTH PROFESSIONALS' PERSPECTIVE

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Background: Systemic sclerosis (SSc) can lead to visible changes in appearance such as varied skin texture, pigmentations, facial changes, and hand contractures which could generate concerns among patients. Valid questionnaires that capture these concerns are of great value.
Objectives: To assess content validity of a Swedish translation of the Satisfaction with Appearance Scale (SWAP) from the perspective of health professionals (HPs).
Methods: The Swedish SWAP (SWAP-Swe) was originally translated into the context of burn injuries. The multi-disciplinary research team applied it to the context of SSc by changing burn injury to SSc, changing part of the lay out, and using a version with two subscales: A) *Social discomfort* and B) *Dissatisfaction with appearance*. Initially, the validity was tested by individual interviews with 10 HPs with varied occupational background, who had 5.5 years (median, range 2–30) experience of SSc patient care. The interview guide included questions concerning comprehensibility, relevance, and suggestions of items to include and exclude. The interviews were sound recorded, transcribed verbatim, and analysed by manifest, partly deductive, content analysis.
Results: C*omprehensibility* Most HPs stated that items were not difficult to understand, nevertheless, concerns were highlighted in subscale A, and suggestions for improvements were made. In subscale B words that were connected the disease was thought to be missing. *Relevance* The items were overall considered to cover relevant aspects of appearance in SSc. *Include/exclude items* Inclusion of items concerning appearance of mouth, lips, nose, fingers, and feet was suggested. Other aspects such as stiffness when moving or limping were found to be lacking. Suggestions for exclusion covered"…appearance of my scalp" and items that was thought to be too harsh for the patients, such as "I don't think people would like to touch me". *Fear of hurting the patients* Most HPs felt that it might be inappropriate to focus on patients' appearance and they feared hurt reactions. Negatively formulated subscale labels and emotionally demanding items in subscale A contributed to these thoughts. *When and how to use* Thoughts were expressed about when to use the questionnaire, how they would handle the results, and the importance of discussing appearance issues.
Conclusions: SWAP-Swe was, considered by HPs to be comprehensible and covering relevant aspects of appearance in SSc. However, further development of SWAP-Swe is suggested to better cover disease specific appearance topics and to limit potential risk of negative emotions among patients. Interviews with patients with SSc will further contribute to the content validity of SWAP-Swe.

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AB1409-HPR GAIT STABILITY IN INDIVIDUALS WITH CHRONIC IDIOPATHIC NECK PAIN

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Background: Gait stability ratio (GSR) is represented by step counts per metre during walking. Higher GSR value means to increase in time spent on double support period and decrease in dynamic components of gait, which refers to more stable gait pattern. Recent studies showed that individuals with chronic idiopathic neck pain (CINP) demonstrate altered balance and gait parameters. However, it is not clear whether GSR is affected in individuals with CINP.
Objectives: We have hypothesised that GSR could be altered in individuals with CINP because of their altered gait pattern. Therefore the aim of the study was to compare GSR, gait speed, step length and cadence between individuals with CINP and healthy controls and investigate the relationship between disability and spatiotemporal gait parameters in individuals with CINP.
Methods: Twenty-five individuals with CINP (17 female – 8 male, mean age: 37,28±13,47) and 25 healthy controls (17 female – 8 male, mean age: 36,6±14,2) recruited into this study. Participants with CINP completed the Turkish version of Neck Disability Index (NDI). All participants performed the 10-metre walking test in three walking conditions: Preferred walking (PW), walking with head rotation (HRW), walking at maximum speed (MAXW). Video analysis method involving slow motion camera (120 fps) was used to measure spatiotemporal gait parameters. GSR was calculated by dividing cadence (step/s) to gait speed (m/s). Independent samples t-test was used to compare groups for GSR and other gait parameters. Pearson correlation coefficients were computed to find associations between NDI and gait parameters.
Results: Individuals with CINP exhibited slower gait speed and cadence in all walking conditions ($p<0.05$). In individuals with CINP, step length was found to be shorter in only HRW ($p<0.05$), however, GSR was higher in HRW and MAXW ($p<0.05$). GSR values calculated in three walking conditions were found to be moderately correlated with NDI ($r=507$ for PW, $r=533$ for HRW, $r=516$ for MAXW, $p<0.05$). A negative and moderate correlation was found between preferred walking speed and NDI ($r=-473$, $p<0.05$).
Conclusions: Our results suggested that neck pain have a negative impact on gait parameters. Also, individuals with CINP had a more stable gait pattern involving less dynamic components. Assessment of GSR and related gait parameters in different walking conditions may be addressed in clinical assessment of CINP and may provide additional information for management of such disability.

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AB1410-HPR HEALTH PROFESSIONALS' PERSPECTIVE ON BENEFITS AND RISKS OF LOW DOSE GLUCOCORTICOIDS IN RA – AN INITIATIVE UNDER THE GLORIA PROJECT

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Background: The Glucocorticoid Low-dose Outcome in Rheumatoid Arthritis Study (GLORIA) is an international investigator initiated pragmatic

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