

012 DEVELOPING A RHEUMATOLOGY APP TO AID SELF-MANAGEMENT FOR TORBAY RHEUMATOLOGY PATIENTS

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Background: Many patients with a rheumatological condition find it difficult to know what information to read and believe. They require much information about the disease itself, treatments regimes and side effects, particularly for those with a new diagnosis. Information needs to be readily accessible in one place to re-read/re-listen as required. Our patients said it would be helpful to have trustworthy information, reviewed by their rheumatology team, available in one place as this will aid self-management.

Methods: In conjunction with a range of rheumatology patients of differing ages, the MDT, and industry partner, Health and Care Videos, we developed a rheumatology app for all of our patients. We used a combination of written information and short videos to provide basic headline information on various different diseases, common treatments e.g. methotrexate, easily accessible contact details and clinic locations (including postcodes, bus links, car parking). Video content was written by the authors and filmed by Health and Care Videos. Our patients were involved with planning/vetting the information included, and designing the layout as it is important the app is easily navigable by all. We launched the app during a patient educational conference in June 2018. We advertise it at our monthly education afternoons for those with new inflammatory arthritis, mention it to all patients on regular follow up and remind them about it in our clinic letters.

Results: Since launch 10 weeks ago, there have been 394 downloads and 1,365 visits with peaks around the time of our education sessions when we advertise the app. The time spent in the app varies from < 20 seconds (22%) to 5+ minutes (28%). Two-thirds of visits are over 2 minutes. Most of the videos in the app are about 2 minutes long. Common hits include: videos on medications and different conditions, contact details, clinic locations, services available and the section on the first six months (aimed at those with a new diagnosis). We have had a number of spontaneous contacts from patients saying how valuable they find the information we have given them. The app allows direct phone calls to the correct member of the MDT e.g. rheumatology physio, rather than going through the secretaries. We are also encouraging direct email contact via the app. These aspects are helping us make our services more efficient.

Conclusion: To date, the app continues to be downloaded by patients and we have received very positive feedback. The next step is to survey the users and identify what additions they would find helpful to manage their disease e.g. interactive PROMS. Download free from app store (search 'Rheumatology Connect') or go to www.rheumatologyconnect.info.