climbing capacity with no extra weight (14%; p=0.003) and 10 kg-weighted (25%; p = 0.002) and maximal oxygen uptake (8%; p=0.015). These patients also showed ameliorations of the disease impact in terms of pain (9%; p = 0.040), stiffness (53%; p=0.015), anxiety (41%; p=0.037), depression (28%; p=0.030) and self-perceived physical function (20%; p=0.047), with an overall reduction in the total FIQ score (18%; p=0.017).

Conclusion: 8 months of aquatic exercise therapy for fibromyalgia was feasible and led to relevant improvements in physical function and fitness, reducing the disease impact in FM women.

Keywords: Physical Therapy, Fibromyalgia

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LONG-LASTING AQUATIC EXERCISE THERAPY IM-PROVES HEALTH-RELATED QUALITY OF LIFE AND MUSCLE STRENGTH IN WOMEN WITH FIBROMYAL-GIA

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Introduction: Patients with fibromyalgia (FM) present muscle pain, weakness and fatigue that may eventually lead to reduced physical activity and decreased health-related quality of life. The purpose of the present study was to evaluate the effects of 8 months of supervised exercise therapy in warm water on health-related quality of life and muscle strength in women with fibromyalgia.

Methods: Thirty women with fibromyalgia [mean \pm SD] age 50.8 ± 8.7 (years); body mass index 27.7 ± 4.1 (kg/m2); duration of symptoms 19.8 \pm 7.4 (years); number of tender points 17.0 \pm 1.0; number of specific drugs 1.4 \pm 0.8 (antidepressives, muscular relaxants and analgesics); were randomly assigned into 2 groups: an experimental group, performing 3 weekly sessions for 60 minutes of exercise therapy in warm water (n=15); and a control group, continuing their usual care and habitual leisure-time activities (n=15). Health related quality of life was evaluated using the Short Form 36 Questionnaire (SF-36). The SF-36 assesses eight dimensions: physical function, role physical problems, body pain, general health perception, vitality, social function, role emotional problems and mental health. The scale of each dimension runs from 0 (very poor) to 100 (very good). Maximal unilateral isokinetic strength was measured in the knee extensors and flexors in concentric and eccentric actions at the velocity of 60°/s. The data was examined by applying statistical tests for the analyses of variances.

Results: Patients in both groups were in similar condition at baseline. After 8 months of water exercise therapy, the experimental group showed improvements in phys-

ical function (16%; p=0.017), role physical problems p=0.045), body pain (58%; p=0.001), general hear reception (33%; p=0.012), vitality (40%; p=0.001), role and tional problems (99%; p=0.03) and mental health p=0.025). The experimental group showed increments maximal isokinetic strength of knee extensors at 60°s concentric muscle action (right leg: 30%, p=0.017; left leg: 50%, p=0.042) and knee flexors (right leg: 67%, p=0.016; left leg: 50%, p=0.007). Patients in the experimental group also improved maximal isokinetic strength at 60°/s in excentric muscle action in knee extensors (right leg: 31% p=0.001; left leg: 23%, p=0.048).

Conclusion: Long-lasting exercise therapy in warm was effective to improve health-related quality of life (exercisely emotional problems, pain, mental health and walls) and muscle strength in the lower limbs at low velocities.

Keywords: Water, Physical Therapy, Fibromyalgia

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USING PSYCHOLOGICAL INTERVENTION TECHNIQUES IN SPORTS INJURY REHABILITATION: CHARTERED PHYSIOTHERAPISTS IN THE UK TELL THEF STORIES

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In sport psychology, there is a need to deviate from trade tional research methods and move towards a more diverse means of analysing data (Biddle, Markland, Gilbourne Chatzisarantis, & Sparkes, 2001). Past research into chartered sport physiotherapists' perceptions about psychology ical aspects of their work in the UK has included the quantitative surveys (e.g., Hemmings & Povey, 2002) and two qualitative studies (Jevon & Johnston, 2003; McKenne Delaney, & Phillips, 2002). Despite the gradual growth of literature, thus far no studies have investigated physicities apists' personal experiences in using psychological intervention techniques in detail. By using Interpretative Prenomenological Analysis (IPA; Smith, 1996) as a method of analysis, this study aimed to gain an insight into their comexperiences of utilising psychological techniques with injured athletes.

Seven (4 female, 3 male) chartered physiotherapists ing in sports medicine in the United Kingdom participation in the study. A semi-structured interview schedule was devised and it focused on the physiotherapists' personal experiences of using psychological intervention technique (e.g., goal-setting, imagery, self-talk, relaxation, social support) in their work.

The IPA analyses revealed several prominent and fash nating themes. Physiotherapists were very open about their lack of formal training in sport psychology, and appeared to be incredibly knowledgeable and comfortable with the use of goal setting. Familiarity with other taniques (i.e., imagery, relaxation, and self-talk) appeared to be less apparent. They also placed great prominence