

ATS Spotlight 2022: Pulmonary Rehabilitation Assembly Early Career Professionals



Stephanie Robinson, PhD

Investigator, Center for Healthcare Organization and Implementation Research, VA Bedford Healthcare System, USA

Research Assistant Professor, The Pulmonary Center, Boston University School of Medicine, USA

Tell us about yourself.

I am a social psychologist and health services researcher. I'm extremely passionate about helping others engage in physical activity, both in my professional and personal life. When I am not working on my research, I enjoy trying to lift heavy things at the gym and teaching group fitness classes.

Is your research clinical, basic science, or translational?

Clinical

Tell us about your research.

My work is focused on leveraging technology to support disease management outside of the clinical visit. I am specifically interested in the evaluation and implementation of technology-based health services, such as web-based interventions and wearable devices, to promote self-management behaviors like physical activity in patients with COPD and other chronic diseases.

Where do you see yourself in 5 years?

I see myself where I am right now, hopefully with a few more grants under my belt!

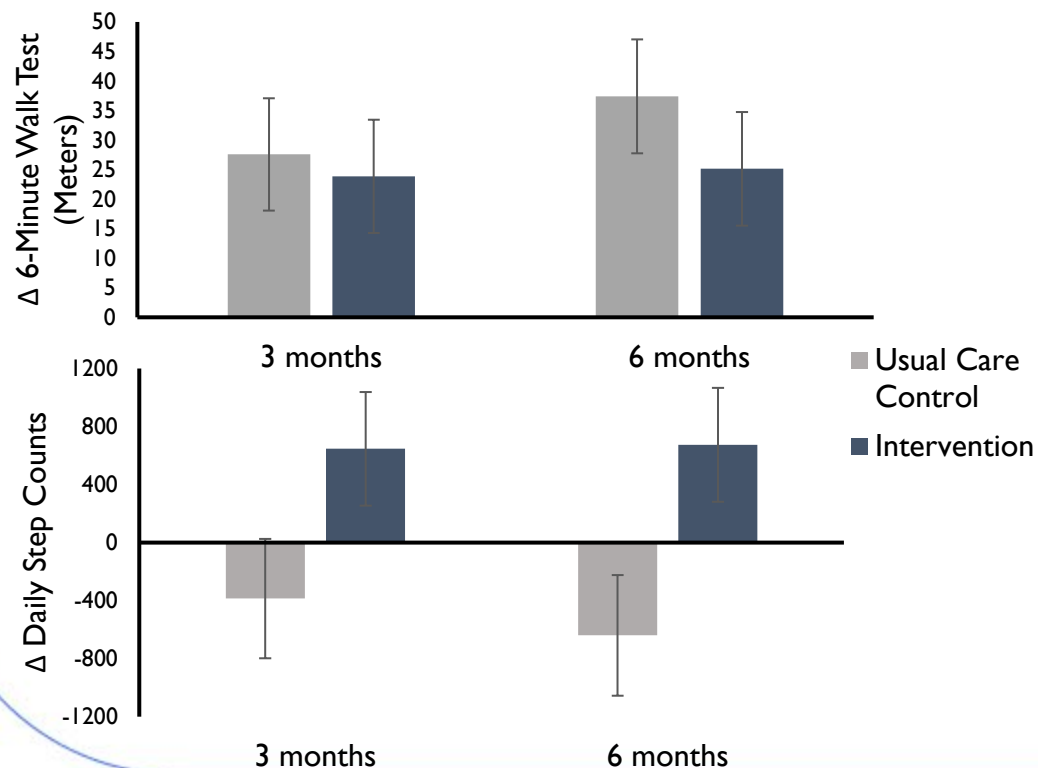
How has the Pulmonary Rehabilitation Assembly contributed to your career?

It's given me a great opportunity to connect with others passionate about exercise promotion and pulmonary rehabilitation across the world.

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A randomised trial of a web-based physical activity self-management intervention in COPD

Rationale: Improving exercise capacity is a primary objective in COPD. We evaluated the effectiveness of a web-based self-management intervention, focused on physical activity promotion, on exercise capacity in COPD.

Methods: We enrolled 153 participants with COPD in a 6-month randomized controlled trial at two US sites. Participants were randomly assigned (1:1) to the web-based intervention (physical activity promotion through personalized, progressive step-count goals, feedback, online COPD-related education and social support via an online community) or usual care.

Results: Change in exercise capacity did not differ between groups. Intervention participants improved their mean daily step counts by 1,312 more than those in the usual care group.

Conclusions: The intervention did not improve exercise capacity but improved physical activity at 6 months. Additional intervention modifications are needed to optimize its COPD self-management capabilities.

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