The influence of multidisciplinary rehabilitation on physical well-being and quality of life of breast cancer survivors: a RCT



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INTRODUCTION

Breast cancer treatment may cause negative side effects. The aim of this study was to examine the effects of a multidisciplinary oncologic rehabilitation program on health related quality of life (HRQoL), cancer related fatigue (CRF), anthropometrics in breast cancer fitness and physical survivors.

RESULTS

- o Flow chart
- o Table 1: both groups are homogeneous at baseline, expect for physical fitness, waist circumference, fatigue and global health status.
- o Table 2: there is a(n) (significant) improvement in physical fitness over time in both groups, with a bigger effect in the intervention group.
- o Table 3: except for fat percentage in the intervention group, there was no significant change in body composition in both groups over time.
- o Table 4a, 4b and 4c: improvements in CRF, QOL and QOL symptoms are measured in both groups over time.

	Intervention group (n=122)	Control group (n=45)	
Civil status			
Living together	13 (11,1%)	7 (16,3%)	
Unmarried	7 (6,0%)	3 (7,0%)	
Married	70 (59,8%)	28 (65,1%)	
Divorced	23 (19,7%)	4 (9,3%)	
widow	4 (3,4%)	1 (2,3%)	
Affected side			
left	55 (46,6%)	21 (48,8%)	
right	59 (50,0%)	19 (44,2%)	
bilateral	4 (3,4%)	3 (7,0%)	
Tumor classification			
stadium 0	2 (2,1%)	4 (9,8%)	
stadium I	25 (26,6%)	13 (31,7%)	
stadium IIa	27 (28,7%)	12 (29,3%)	
stadium IIb	19 (20,2%)	6 (14,6%)	
stadium IIIa	21 (22,3%)	6 (14,6%)	
Surgery			
breast conserving surgery	65 (55,1%)	26 (61,9%)	
total mastectomy	53 (44,9 %)	16 (38,1%)	
Treatment			
chemotherapy	86 (76,1%)	26 (68,4%)	
radiotherapy	104 (92,0%)	41 (97,6%)	
hormone therapy	82 (78,1%)	35 (89,7%)	
immunotherapy	18 (15,0%)	5 (11,1%)	
Menopausal status			
pre-menopausal	58 (53,2%)	17 (43,6%)	
post-menopausal	51 (46,8%)	22 (56,4%)	
Age (years)	50,40 (± 11,63)	52,53 (±14,11)	
Physical fitness:			
VO ₂ max (ml/min)**	1399,87 (±299,39)	1514,24 (±355,66)	
VO ₂ max (ml/kg/min)**	20,10 (±5,12)	22,48 (±5,07)	
6 MWT*	527,9 (±81,06)	554,48 (±78,65)	
Body composition			
body weight	72,61 (±17,41)	68,66 (±13,03)	
ВМІ	26,90 (±6,13)	25,27 (±4,76)	
fat %	37,96 (±36,89)	34,06 (±6,35)	
whole body impedance	632,79 (±108,45)	657,54 (±83,92)	
waist circumference*	85,65 (±14,67)	81,78 (±10,70)	
hip circumference	111,48 (±75,95)	100,87 (±8,97)	
WHR	0,81 (±0,101)	0,81 (±0,064)	
CRF			
Facit-F**	27,65 (±9,75)	35,07 (±10,18)	
EORTC QLQ-C30 subscale fatigue**	49,99 (±23,39)	37,21 (±25,99)	
QOL	, , ,	,	
EORTC QLQ-C30 global health**	54,41 (±15,79)	64,15 (±18,59)	

Table 2. Changes in physical fitness (mean ± SD and p-values)			
Outcome measure	ТО	T1	
VO2 peak (ml/min)*			
AII**	1423,81 (±323,88)	1532,95 (±313,66)	
Intervention	1394,42 (±300,62)	1522,39 (±284,69)	
Control	1506,69 (±373,86)	1562,72 (±386,60)	
VO2 peak(ml/kg/min)			
All**	20,78 (±5,27)	22,29 (±5,23)	
Intervention	20,17 (±5,19)	21,95 (±5,19)	
Control	22,5 (±5,18)	23,26 (±5,28)	
Peak power (Watt)**			
All	105,83 (±25,81)	116,34 (±26,79)	
Intervention**	102,92 (±22,21)	·	
Control	114,62 (±32,76)	117,69 (±34,98)	
HR _{max} (beats/min)			
All	155,58 (±24,84)	157,50 (24,57)	
Intervention	154,84 (±22,05)	156,85 (±25,89)	
Control	157,67 (±31,67)	159,33 (±34,98)	
Peak ventilation (L/min)			
All**	56,41 (±16,08)	60,44 (±15,85)	
Intervention	54,25 (±15,31)	58,72 (±13,93)	
Control	62,61 (±16,83)	65,4 (±19,77)	
Time to exhaustion (s)**			
All	661,70 (±152,56)	722,86 (±159,65)	
Intervention**	642,74 (±130,86)		
Control* Borg scale ergometer*	715,20 (±193,77)	736,29 (±204,92)	
All	18,09 (±2,58)	18,02 (±2,70)	
Intervention	17,73 (±2,7)	17,5 (±2,95)	
Control	19,11 (±1,84)	19,47 (±0,65)	
6MWT (m)**			
All	535,17 (±80,66)	581,83 (±77,36)	
Intervention**	529,61 (±80,28)	581,67 (±71,45)	
Control**	550,95 (±80,72)	582,26 (±93,21)	
Borg scale 6MWT			
All	11,74 (±2,34)	11,89 (±2,40)	
Intervention	12,01 (±2,16)	12,03 (±2,40)	
control	10,97 (±2,97)	11,49 (±2,40)	

Table 3. Changes in body composition (mean ± SD and p-values)				
Outcome measures	ТО	T1		
Body weight (kg)				
All	71,18 (±16,01)	70,98 (±15,45)		
Intervention	72,23 (±16,94)	71,98 (±16,23)		
Control	68,18 (±12,73)	68,10 (±12,70)		
BMI (kg/m²)				
All	26,20 (±5,55)	26,12 (±5,30)		
Intervention	26,62 (±5,84)	26,53 (±5,55)		
Control	24,99 (±4,47)	24,96 (±4,40)		
Fat %**				
All	34,43 (±7,25)	34,66 (±7,17)		
Intervention**	34,55 (±7,70)	34,99 (±7,60)		
Control	34,07 (±5,85)	33,72 (±5,74)		
waist circumference(cm))			
All	84,13 (±13,43)	83,50 (±12,53)		
Intervention	85,10 (±14,33)	84,23 (±12,22)		
Control	81,32 (±10,02)	81,42 (1±0,16)		
hip circumference (cm)				
All	108,82 (±68,39)	103,00 (±10,65)		
Intervention	111,85 (±79,13)	103,98 (±11,32)		
Control	100,12 (±8,31)	100,20 (±7,91)		
WHR				
All	0,81 (±0,09)	0,81 (±0,07)		
Intervention	0,81 (±0,10)	0,81 (±0,07)		
Control	0,81 (±0,07)	0,81 (±0,06)		

Outcome measures	ТО	T1	Т2
Facit – F			
\ **	29,45 (±10,40)	35,20 (±9,75) ^a	36,00 (±9,26) ^a
	·	34,33 (±9,33)	34,9 (±9,10)
ntervention	27,67 (±9,74) 35,12 (±10,53)	37,98 (±10,67)	39,50 (±9,05)
Control	00,12 (±10,00)		00,00 (±0,00)
EORTC QLQ-C30f			
4II**	47,97 (±24,78)	35,76 (±19,8) ^a	35,11 (±20,5) ^a
ntervention	50,95 (±23,38)	37,56 (±18,71)	37,45 (±19,63)
Control	38,2 (±27,1)	29,86 (±22,48)	27,43 (±21,5)

CONCLUSIONS

Despite the positive results of the rehabilitation program on bio-psycho-social parameters, the content of the program needs to be optimized to have significantly better results than a usual care group.

After the 12 week rehabilitation program, a lot of the patients significantly reduced their physical activities, leading to suboptimal follow-up outcomes. These data thus confirm that exercise intervention/rehabilitation is crucial in the recovery from breast cancer and efforts should be made to increase the uptake and duration of these programs.

METHODS

Inclusion

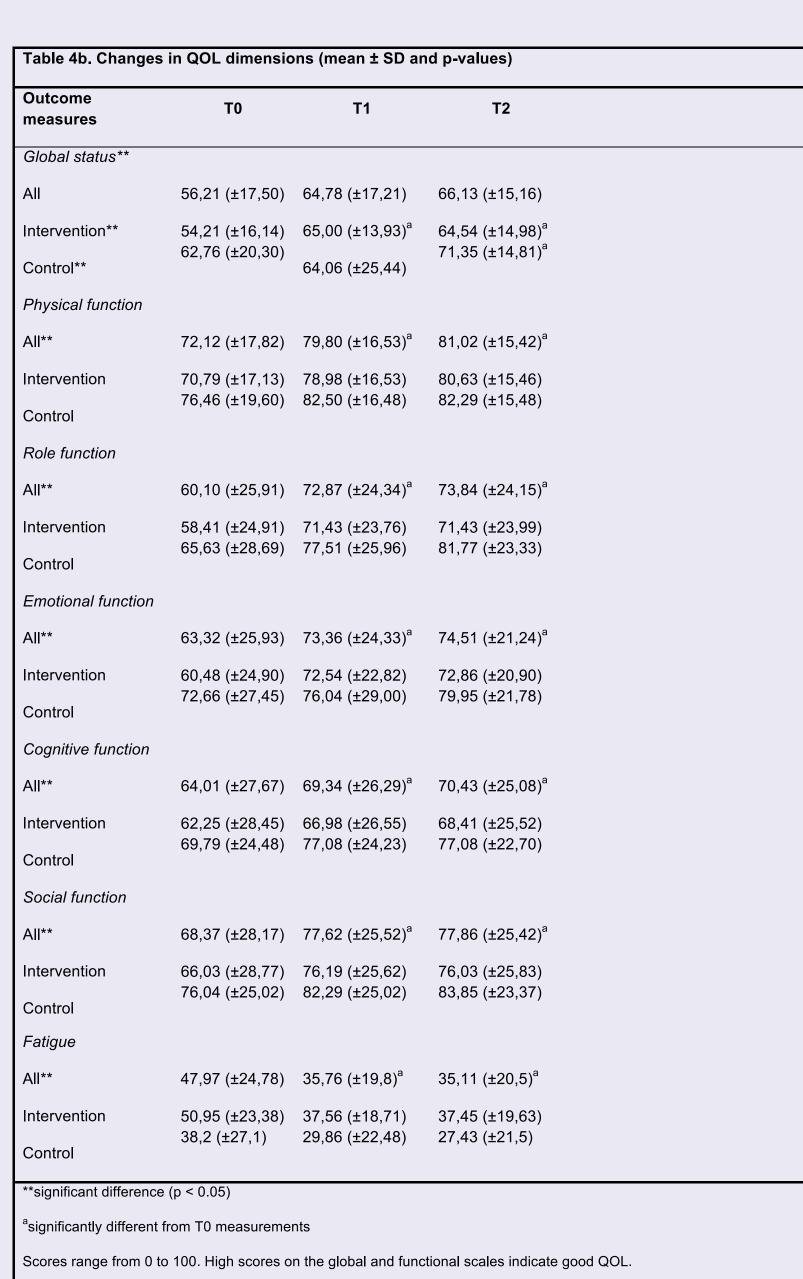
- Between January 2014 and May 2015;
- Universitair Ziekenhuis Brussel + Virga Jesse Ziekenhuis Hasselt;
- Female breast cancer patients, 3 weeks to 1 year following active treatment, > 18 years old, no physical disabilities.

Intervention

- 12-week intervention;
- 4 hours of physical activity a week in the gym;
- Aerobic exercise at 70-80% of maximal heart rate (HRmax);
- Combined with strengthening training and resistance exercises; • 1 psycho-educational session (lifestyle guidance) a week of 2 hours at the hospital (f.e. nutrition, physical activity, stress management, psycho-social topics, insomnia and sexuality);
- Control group with usual care.

Measurements

- Quasi experimental design;
- Measurements were carried out at baseline (T0), at the end of the intervention (T1) and at 12-weeks follow-up (T2);
- · HRQoL (EORTC QLQ-C30 questionnaire), anxiety and depression (HADS questionnaire) and CRF (FACIT-Fatigue questionnaire), were measured at T0, T1 and T2;
- · Physical fitness and anthropometrics were assessed at T0 and T1 using respectively spiro ergometrics, 6 minutes walking test (6MWT), bio-impedance and circumferential measurements.



Outcome measures	ТО	T1	T2	
Nausea/vomiting				
All	6,33 (±11,98)	4,50 (±10,79)	4,99 (±13,31)	
Intervention	6,83 (±12,60)	•	5,72 (±14,77)	
Control	4,69 (±9,69)	•		
Pain				
All	31,02 (±27,43)	27,13 (±24,50)	24,94 (±24,01)	
Intervention	` '	28,89 (±24,92)	•	
Control	26,04 (±26,75)	21,35 (±22,49)	20,83 (±26,77)	
Dyspnoea				
All**	25,06 (±25,82)	14,38 (±20,51) ^a	13,87 (±20,86) ^a	
Intervention	· · ·	14,95 (±20,12)	•	
Control	19,79 (±22,17)	12,5 (±21,99)	11,46 (±21,77)	
Insomnia				
All	45,98 (±35,27)	37,49 (±33,41)	40,63 (±30,98)	
Intervention	48,89 (±34,18)	· · · · · · · · · · · · · · · · · · ·	40,95 (±30,76)	
Control	36,46 (±35,28)	31,25 (±30,45)	39,58 (±32,17)	
Appetite loss				
All**	13,14 (±25,36)	6,33 (±15,41) ^a	6,57 (±16,59) ^a	
Intervention	` '	6,98 (±16,47)	7,30 (±17,89)	
Control	11,46 (±26,25)	4,17 (±11,20)	4,17 (±11,20)	
Constipation				
All	14,84 (±23,54)	14,60 (±25,20)	13,14 (±23,35)	
Intervention	•	• • • • • • • • • • • • • • • • • • • •	12,70 (±23,29)	
Control	12,50 (±23,57)	14,58 (±25,31)	14,58 (±23,85)	
Diarrhea				
All	5,60 (±14,33)	5,11 (±13,34)	5,84 (±18,03)	
Intervention	6,66 (±14,91)	6,03 (±14,45)	7,62 (±20,28)	
Control	2,08 (±11,79)	2,08 (±8,20)	0,00 (±0,00)	
Financial difficulty				
All	15,57 (±26,21)	13,62 (±21,22)	14,11 (±25,48)	
Intervention		14,28 (±21,61)	· · · · · · · · · · · · · · · · · · ·	
Control	9,37 (±17,42)	11,46 (±20,05)	15,63 (±29,31)	

Flow chart Recruited in UZ Brussel Recruited in Virga Jessa Hasselt (n = 127)(n = 40)Assessed at baseline (n = 167)Control group Intervention group (n = 122)(n = 45)drop-out (n=10) drop-out (n=6) - lung cancer - deep venous thrombosis - claustrophobia - multiple sclerosis - bronchitis - humerus fracture - hysterectomy - unknown (n = 2)- liver cancer - fatigue - unknown (n=4) analyzed analyzed (n = 112)(n = 39)

DISCUSSION

- No severe sports injuries / chronic negative side effects;
- General appreciation of the program is 8,82/10;
- Decline of improvement after the intervention (T1-T2);
- No significant differences in outcome with the control group;
- Ventilatory thresholds, RER_{peak} and HR_{peak} of the spiro ergometrics are currently being analysed;
- Is the frequency, intensity, duration, content ... correct for an optimal result?

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