CATEGORY II, SUBCATEGORY F-2: EXERCISE

TITLE: “Surgery-Chemotherapy-Radiation, Followed by a Different Kind of Triathlon”

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OBJECTIVE:
Structured exercise is a potential adjunct therapy following a cancer diagnosis associated with improvements in treatment related side effects including fatigue, deconditioning, and quality of life (QOL). However, despite published exercise guidelines for cancer patients, breast cancer survivors struggle to initiate regular exercise into their lifestyles, particularly if already overweight or obese. Our objective was to determine if a medically recommended and supervised team triathlon training program improved exercise capacity and QOL for overweight and obese breast cancer survivors.

METHODS:
18 overweight to obese (BMI=25-40) survivors [age=52(7) yrs, BMI=32(4)] who underwent local and systemic treatment were recruited by a breast cancer surgeon and cancer rehabilitation physical therapist to participate in a 14-week triathlon training program adjusted for common treatment-related side effects. Training consisted of 2 weekly group sessions supervised by medical and athletic coaches, and 3 days of “prescribed” activities that patients completed independently or with their peers. The program culminated in an organized sprint distance triathlon. Quality of life (FACT-B), cancer-related fatigue (FACIT-F), and six-minute walk test (6MWT), were measured pre- and post-intervention. Focus groups elucidated motivational factors.

RESULTS:
14 patients with complete datasets were compared pre- and post-intervention. FACT-B improved [pre=120(11), post=128(6); p=0.01]. FACIT-F improved [pre=42(8), post=47(5), p<0.01]. 6MWT improved [pre=564(54) m, post=587(67); p=0.04], with lower ratings of perceived exertion [pre=7(2), post=6(1)]. Focus groups identified sense of “being part of a team”, having commonality with other proactive breast cancer survivors, and “individualized attention from the medical team” present at every session as contributing motivators to exercise adherence. Overweight patients appreciated the “structure and organization” of “prescribed exercise”, while obese patients enjoyed more the social aspect and “camaraderie” of group training. Patients were often “surprised” at what exercise intensity they could perform when guided to do so. All felt motivated to continue regular exercise in the future.

CONCLUSION:
Medically-directed group training of overweight and obese breast cancer survivors with the goal of completing a sprint distance triathlon is a unique and effective model addressing motivation, endurance, and QOL after treatment.