

A Survey Of The Landscape of Cancer Prehabilitation

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Introduction

Cancer Prehabilitation (prehab) is a multimodal intervention that seeks to optimise a patient's ability to cope with the effects of cancer surgery and associated treatment. Evidence-based benefits are well-documented and include reduced treatment complications, faster time to recovery, and improved quality of life¹. We sought to explore the regional prevalence of cancer prehab and the attitudes of Asian healthcare providers toward it.

Methods

We surveyed participants attending a rehabilitation conference held in Singapore in October 2022, using an anonymous online questionnaire.

Results

33 respondents from 8 countries completed the questionnaire, representing 9 multidisciplinary team roles across both inpatient and outpatient settings, with a median job experience of 10 years. Though 82% of respondents came from healthcare facilities that cared for patients with cancer, only 30% were from a facility that had cancer prehab services, and only half of these were prehab service providers themselves. 6% of respondents declared a subspecialty interest in cancer rehabilitation. All respondents felt that cancer prehab is an important service and that it will make a difference in the outcomes of patients with cancer, especially in the areas of quality of life and physical function. 94% recognised that lack of knowledge or skills is a barrier to implementing a cancer prehab programme in

their institute, with 79% feeling that lack of buy-in from stakeholders was an issue. We found no significant differences in attitudes toward cancer prehab that were attributable to job scope, duration of work, practice setting, or access to oncological and surgical specialists. 82% of respondents indicated interest in a prehab implementation workshop if it were available.

Conclusions

Despite the limited availability of cancer prehab services in Asia, there is strong interest in it, which corroborates other international findings². Implementation challenges for cancer prehab mirror those of cancer rehabilitation³, and more work is required to develop and disseminate capabilities in this field at the regional level.

References

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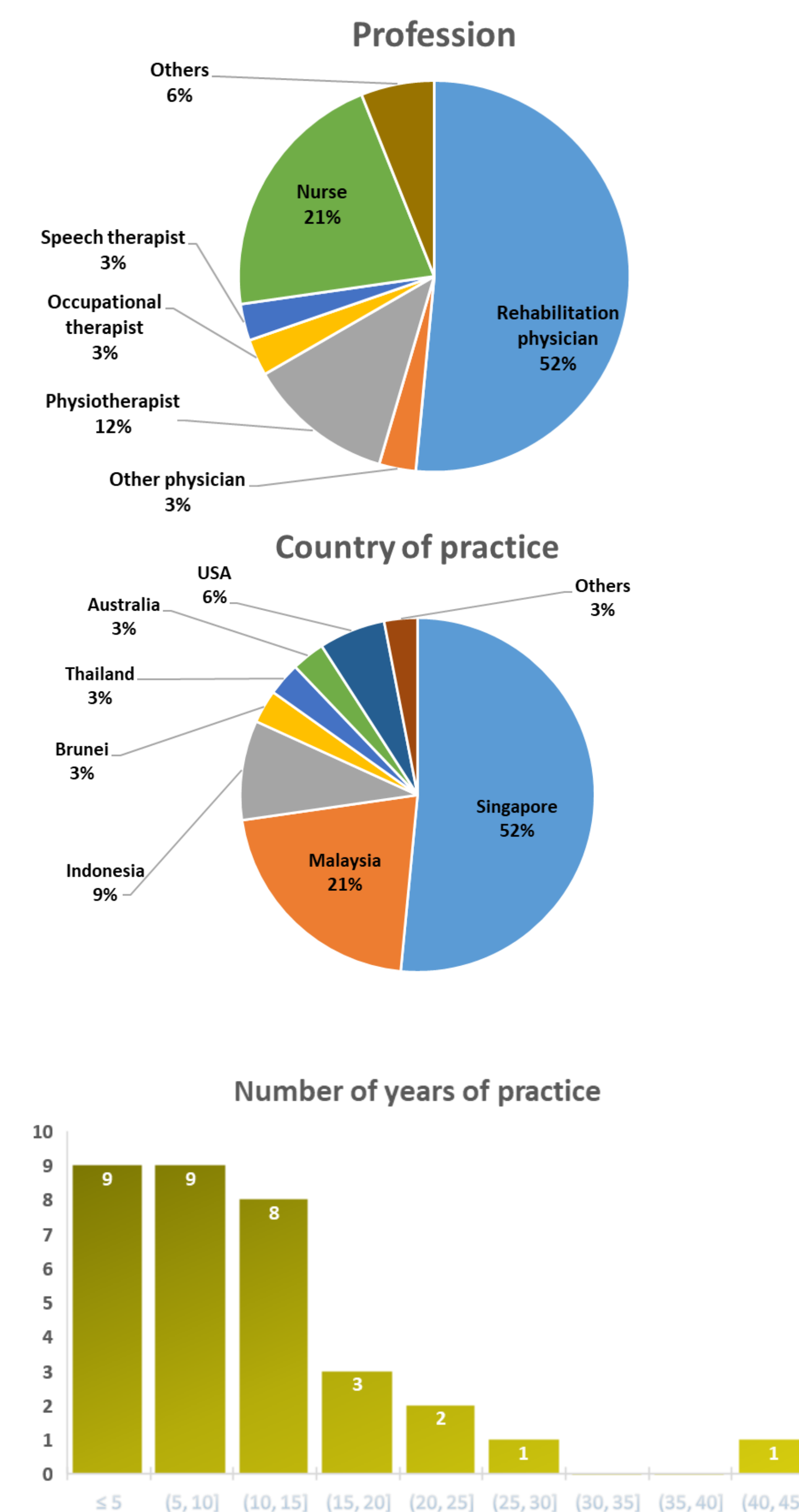


Fig. 1 – Basic respondent demographics

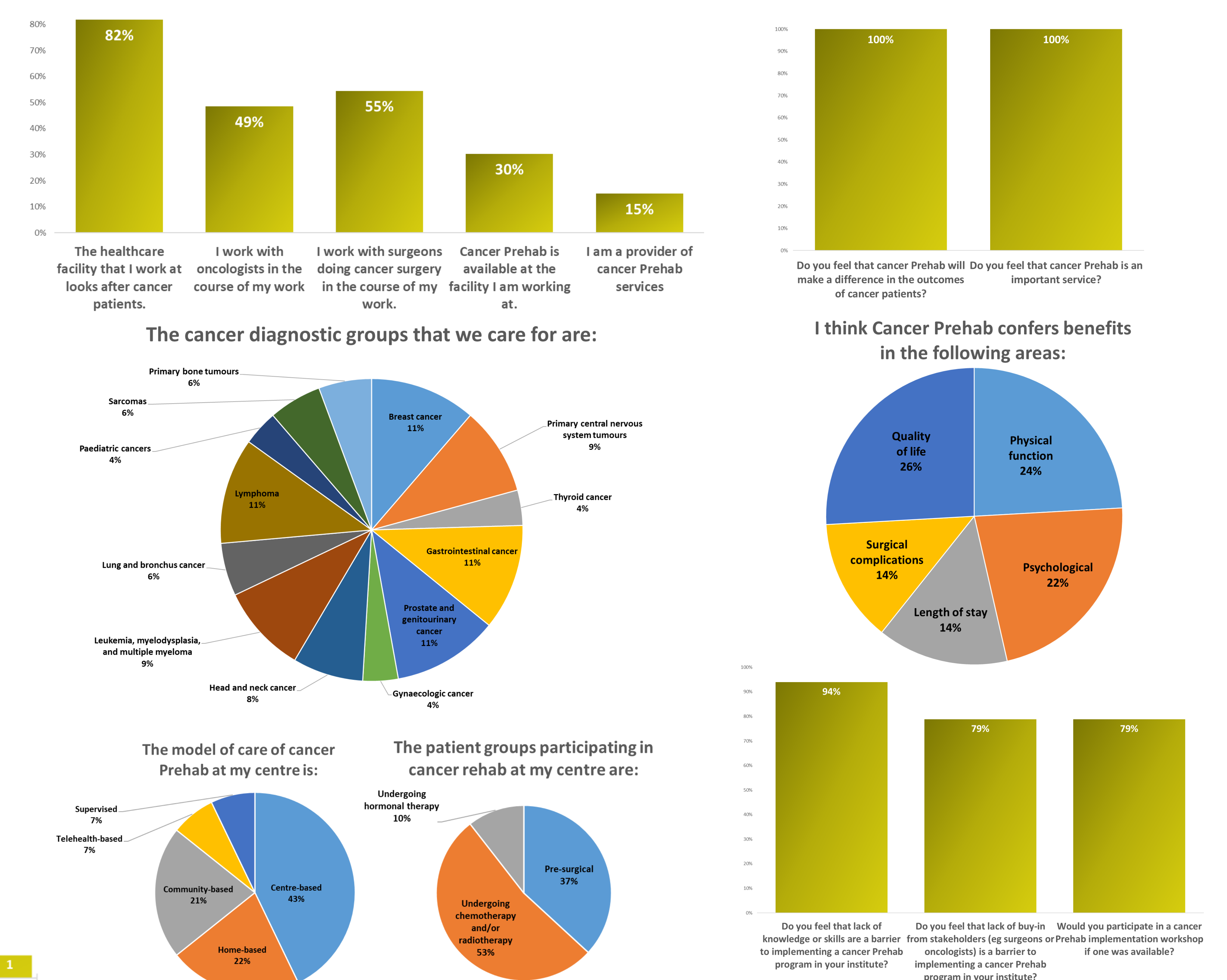


Fig. 2 – Service availability of cancer Prehab

Fig. 3 – Attitudes toward cancer Prehab