EXERCISE AND DIET SUPPORT IN AUSTRALIAN BREAST AND PROSTATE CANCER SURVIVORS: A FOCUS GROUP STUDY

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Introduction

- Survival after a cancer diagnosis is improving
- Optimal management of long-term treatment-related adverse effects is increasingly important
- Regular exercise and a healthy diet are regularly recommended to combat adverse effects
- Despite this, few cancer survivors meet these recommendations so there is a need to explore why

Aim: To understand exercise and diet support received by breast and prostate cancer survivors during and following treatment

Methods

- Recruitment via GenesisCare Oncology

Eligibility criteria:

- ≥18 years of age
- Completed active treatment for breast or prostate cancer with therapies known to have cardiovascular adverse effects

Data collection and analysis:

- Online questionnaire (background demographic, medical, lifestyle information)
- In-person focus group (recorded, transcribed, then analysed using reflexive thematic analysis)

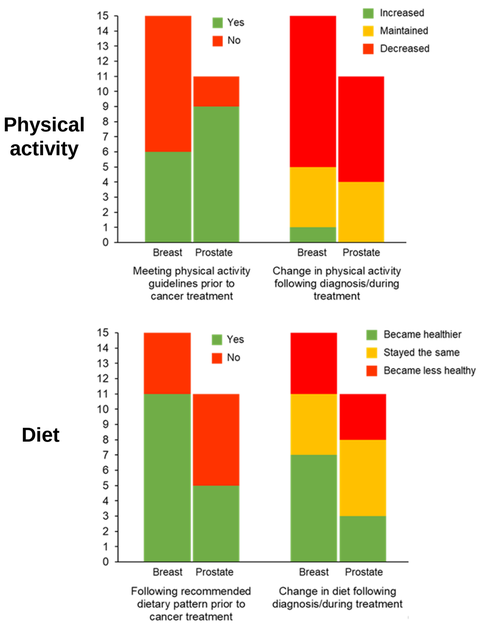
Results

26 cancer survivors (15 breast, 11 prostate) participated in one of seven focus groups (4 breast, 3 prostate)

Participant characteristics

Demographics	Breast cancer (n=15)	Prostate cancer (n=11)
Age (years)	61 ± 12	74 ± 7
Time since diagnosis (months)	12 ± 3	20 ± 10
Treatment(s) received, n (%)		
Surgery	15 (100%)	1 (9%)
Radiotherapy	15 (100%)	11 (100%)
Chemotherapy	4 (27%)	0 (0%)
Hormone therapy	13 (87%)	11 (100%)

Data are mean ± SD or n (%)



Themes and representative quotes

Suboptimal delivery

Exercise, and especially diet, rarely discussed

"**Nobody spoke to me about diet or exercise**. Not at all."
Prostate cancer, 67 years

"**I wanted some guidance** to give me the opportunity to address [my diet] and improve my health, but **it wasn't covered at all** in my case."
Breast cancer, 34 years

If provided, advice was general

"**I don't think it is [discussed] particularly about cancer**, but generally these days people promote how many veggies and how many fruit and the best meat and that sort of thing."
Breast cancer, 60 years

"We certainly all know why exercise is important, and diet, but **whether it's more important because you have cancer, I don't know that**"
Prostate cancer, 81 years

Reactive rather than proactive

"[They] would say, "Anything wrong?" And **if you said, "No", that was it**."
Prostate cancer, 70 years

"**It's all on a pamphlet** about what you should do, but I think **if somebody sat down and talked it through** with you properly, you might be **more inclined to do it**."
Breast cancer, 65 years

Attempted behaviour change

Behaviour change more often self-initiated

"I just want to do the best I can for my body. I'm not a surgeon. I'm not a doctor. I can't do any of that. **But I can look after myself. So that was what inspired me** to just live my healthiest life for me."
Breast cancer, 52 years

"**I sourced one** [an exercise physiologist] privately."
Breast cancer, 46 years

Need support for sustained behaviour change

"It was healthy food but it tasted like shit, so… we ate it for a while and it worked pretty good but **there's a limit for how long you can do it for**."
Prostate cancer, 72 years

"I did exercises **conscientiously while I was having the radiation therapy** and then my **work commitments** and that feeling of **lethargy** kind of **dragged me down**"
Prostate cancer, 68 years

Wanting more

Tailored support to personal circumstances

"That's my own personal habit… **I don't like to exercise**. Maybe it's my job. My work itself is really very strenuous."
Breast cancer, 65 years

"Like [he] falls over, I can't sit on a bike because of my back and my knees. **That's where you really need to sit with somebody that can tailor that** and say 'Okay, you have these issues, let's do a plan that makes sure [he] doesn't go face down on the pavement' or … '[I'm] not in excruciating pain'. That would really be helpful."
Prostate cancer, 63 years

Explain why exercise and a healthy diet are important

"We certainly all know why exercise is important, and diet, but **whether it's more important because you have cancer, I don't know that**… I suppose **if they told you why**, you **might be motivated** a bit more to do it."
Prostate cancer, 81 years

"Just the why, **how is it going to help us?**"
Breast cancer, 52 years

More structured, specific information

"Just to know **what should we eat**, and **what shouldn't we eat**; does it matter; does it affect us?
Breast cancer, 52 years

"One of the things that would have been helpful, **instead of saying exercise, what sort of exercise?**"
Prostate cancer, 63 years

Focus on well-being once treatment completed

"Taking the focus off illness, but **having a focus on wellness**. That's what you want."
Breast cancer, 34 years

"We want to focus on **what's ahead**"
Breast cancer, 76 years

Conclusions

- Exercise and diet support are currently not routinely incorporated into the care of Western Australian breast and prostate cancer survivors.
- If exercise and diet support was provided, there was inconsistency in **what** was provided, **when** it was provided, and **who** provided it.
- To improve the delivery of exercise and diet support to cancer survivors, future studies should move past general advice, tailor support to individuals, and investigate how to better motivate behaviour change.

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