

Cancer Exercise & Physiotherapy Lab

Expanding Supportive Care Through the Implementation of an Exercise Program in Advanced Lung Cancer: A Qualitative Study

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INTRODUCTION

- Treatment and cancer-specific side effects such as dyspnea and fatigue can affect quality of life and physical function.¹
- Exercise can mitigate and reduce treatment side effects², but lung cancer exercise trials have low adherence and high attrition.³
- Mitigation of decline with Virtual Exercise with Lung **Cancer** (MoVE): a 12-week virtual exercise program that showed improved physical function and participant wellbeing, which may make exercise more accessible.
- Implementation Mapping (IM) can be used to plan for the implementation of exercise programs such as MoVE.
- The Consolidated Framework for Implementation **Research 2.0** (CFIR 2.0) identifies barriers and facilitators for successful implementation.

PURPOSE

To identify barriers and facilitators to the implementation of the MoVE program as part of pre-implementation planning (iMoVE).

METHODS

- IM Step One: evaluate needs and desired outcomes through individual semi-structured interviews developed using CFIR 2.0 with key interest-holders. (Completed)
- IM Step Two: directed qualitative content analysis based on CFIR 2.0 is being conducted to identify change objectives. (In progress)
- IM Step Three: results from qualitative analysis will be matched to implementation strategies. The finalized list of strategies will cover different target populations and levels of involvement. (Pending)

ANALYSIS and PRELIMINARY RESULTS

Innovation Domain

duration and outcome measures are

components to MoVE and are considered the core of MoVE and thus are not adaptable.

Individuals Domain

High-level leaders: direct contact to funders, executive leadership, or decision-makers in provincial healthcare. Mid-level leaders: oncologists, medical/healthcare team members who have an impact on inner setting policies. Opinion leaders: Other healthcare professionals, people with direct patient contact who impact patient ideas. May also include patient advocates or patient families who may influence the attitudes of providers or other patients.

CONCLUSION

- resource availability were seen as barriers to successful implementation.

REFERENCES

1. Cavalheri V, Granger CL. Exercise training as part of lung cancer therapy. Respirology. 2020;25 Suppl 2:80-87. doi:10.1111/resp.13869; 2. Campbell KL, Winters-Stone KM, Wiskemann J, et al. Exercise Guidelines for Cancer Survivors: Consensus Statement from International Multidisciplinary Roundtable. Med Sci Sports Exerc. 2019;51(11):2375-2390. doi:10.1249/MSS.0000000000002116; 3. Avancini A, Sartori G, Gkountakos A, et al. Physical Activity and Exercise in Lung Cancer Care: Will Promises Be Fulfilled? Oncologist. 2020;25(3):e555-e569. doi:10.1634/theoncologist.2019-0463.

Sample included 27 participants across 5 distinct groups: individuals with lung cancer (n=4), exercise deliverers (n=7), healthcare providers (n=7), oncologists (n=3), administrative leadership (n=6)

• Majority identified as women (n=20) and white (n=21)

Figure 1: CFIR 2.0 domains and how they were operationalized during analysis

MoVE – specifically the 12-week aerobic and resistance exercise program. The program considered adaptable; the actual exercise program and virtual delivery method are key

Outer Setting Domain

Beyond a single healthcare authority (i.e., provincial healthcare system, Canadian healthcare system). Within the private sector, outer setting would be beyond the walls of the private clinic. If the private clinic extends across healthcare authorities, the outer setting is the provincial healthcare setting.

Implementation Process Domain

iMoVE study activities may be considered part of the implementation process (i.e., interviews, planning, strategy development). Any suggestions for future implementation strategies or activities were also coded here.

• Lung cancer exercise programs were identified as a priority amongst all participant groups, though designing for accessibility and

Many providers cited patient-focused care was a core principle in their workplace, including supporting patients post-treatment.

With support from interest-holders, MoVE can improve quality of life for participants.

FUNDING





Inner Setting Domain

Within a single healthcare authority or within a specific private clinic. Inner settings also included individual clinics and multidisciplinary healthcare settings which shared a campus.



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