

## **Prescribing Exercise for Cancer Survivors**

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*In Response to Article Entitled 'Prescribing Exercise for Cancer Survivors: Time for Physicians to Become More Proactive' by G.A. Watson and G.D. Leonard - IR MED J; VOL 11; NO.2; P25*

We noted with interest the article by Watson and Leonard (February 2020 issue). The article is highly relevant to current cancer-care and survivorship. The article states that physicians remain reluctant to prescribe exercise for patients. We concur with this and have recently completed a survey of Irish clinicians involved in breast cancer management and of breast cancer survivors to assess this issue. Among clinicians we found that although there is high level of interest in this area only a minority of clinicians are providing evidence-based specific advice to patients. Among 50 clinicians nationwide who responded to our email survey, 44 % had read established exercise guidelines in cancer, 68% reported that they counsel their patients to engage in regular exercise, and 74% counselled to avoid inactivity. However only 18% advised on the recommended levels of 150 minutes of moderate or 75 minutes of aerobic exercise and just 12% advised the recommended level of strength exercise at least twice a week. These are the minimum levels required for benefit, as mentioned by Watson and Leonard and by consensus guidelines.<sup>1</sup> However 92% of clinicians stated that they are interested in prescribing exercise and 96% believed that having an exercise specialist on the multidisciplinary team would be beneficial.

While it is widely accepted that exercise has a multitude of benefits to cancer survivors as expounded so well in the IMJ article and while 80% of clinicians in our study advised survivors of the benefits of exercise in reducing mortality from cancer and risk of cancer recurrence these statistics were not reflected among the cancer survivors that we surveyed. Of 124 breast cancer survivors who participated, 40% believed that exercise reduced mortality from cancer, 43.5% believed exercise reduced the risk of cancer, and 41% believed that it reduced the risk of cancer recurrence. Eight-nine percent of survivors recognised the benefits of exercise for quality of life and body self-image, 73% believed it to be safe during, and 83% believed it to be safe after cancer treatment. Only 14% of respondents rated themselves as moderately physically active, and only 1 of 124 participants were participating in an exercise programme aimed at cancer survivors. We also found some misinformation among breast cancer survivors in that 40% believed that the presence of arm or shoulder symptoms indicated that exercise should be avoided.

Our findings have prompted us to implement an exercise prescription for breast cancer survivors in our clinics in order to increase patient awareness and to serve as a prompt to clinicians to discuss the benefits of exercise for this group.<sup>2</sup> We are also developing a multidisciplinary exercise program for patients initiating systemic cancer therapy. We believe that a wider implementation of these programmes would be of significant benefit to patients and that they deserve similar emphasis in our clinics to pharmaceutical based therapeutics.

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### **References:**

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2. [https://www.exerciseismedicine.org/canada/assets/page\\_documents/EIM\\_PrescriptionPad\\_ENG\\_web\\_2017.pdf](https://www.exerciseismedicine.org/canada/assets/page_documents/EIM_PrescriptionPad_ENG_web_2017.pdf)