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Integrating Exercise into Post-Treatment Care for Women with Gynaecological Cancer: Insights from ACUMEN (Study 2)

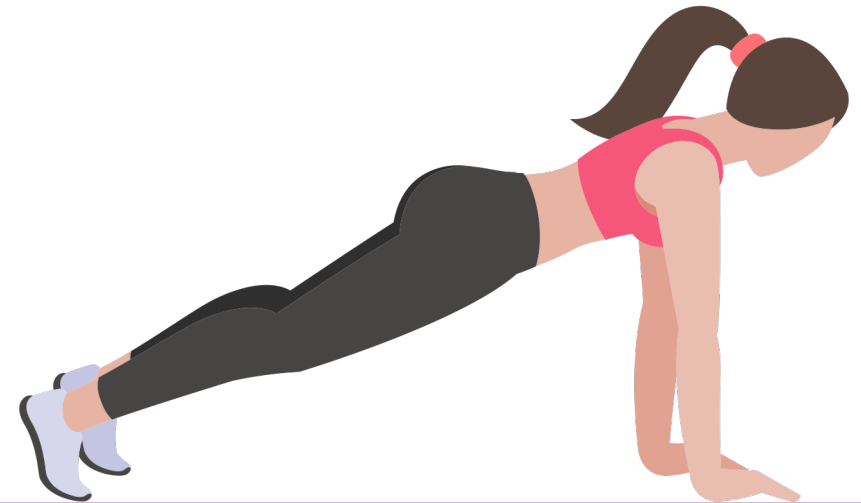
Speaker Name: Dr Mackenzie Petie

Griffith University
Australia

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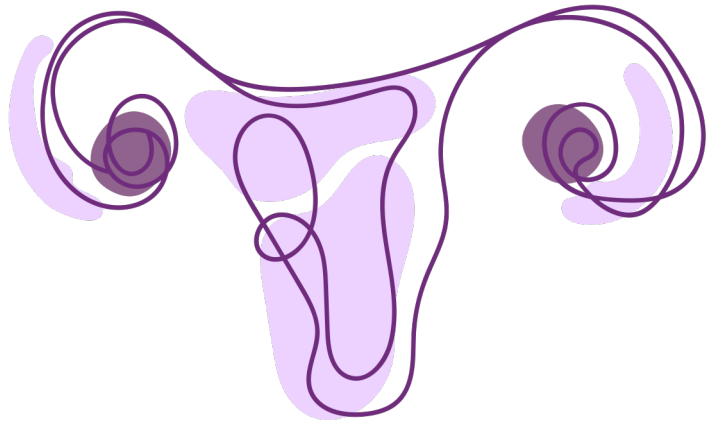
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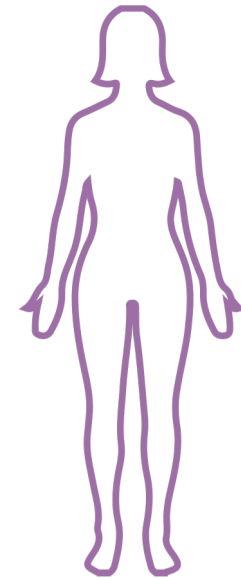


*ACUMEN: enhAnCing treatment oUtcoMes after gynaEcological caNcer

Gynaecological Cancer



Vulva
Vagina
Cervix
Peritoneal
Fallopian Tubes
Ovary
Endometrial
Placenta



19 women are diagnosed every day
in Australia

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Background

Women treated for gynaecological cancer often experience long-term side effects

90% are not meeting physical activity guidelines following treatment

50% were less active than pre-diagnosis



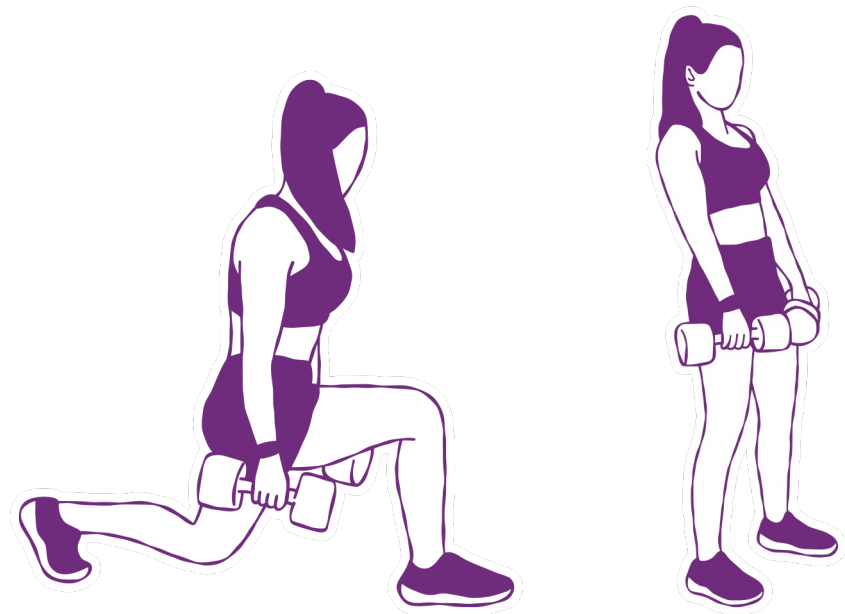
Project Aims

To enhance the physical and mental health-related quality of life of women treated for gynaecological cancer by enhancing their ability to exercise for life.

ACUMEN had two phases:

Study 1: RCT testing the clinical effectiveness of the program

Study 2: mixed-method implementation evaluation



ACUMEN Intervention Design

Week 1 – 6

2 supervised sessions

1 self-managed session

Week 6 - 12

1 supervised sessions

2 self-managed session



Study 2 Methods



Twenty women who had participated in the main trial and twenty interdisciplinary healthcare professionals

One-on-one semi-structured interviews to discuss experiences

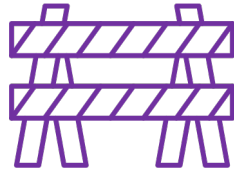
Analysis guided by the Consolidated Framework for Implementation Research (CFIR)

Findings



Characteristics of Individual

- Treatment side effects
- Readiness, beliefs and prior exercise experiences



Outer Setting

- Social and practical barriers
- Family and caregiving responsibilities



Inner Setting

- Exercise not routinely integrated into care
- Limited referral pathways



Process

- Clinician endorsement and education
- Exercise professional support



Intervention

- Personalised exercise support
- Flexible delivery models

Characteristics of Individual

Impact of cancer and its treatment on physical, psychological and functional capacity

Women's Perspective



I thought, "No, not me... It won't be me." And it was me. I was knackered, I was completely floored, I was fatigued, I was aching, I was sore.

- Participant 23

Healthcare Professional's Perspective



Gynae cancer patients have unique challenges in that there are the implications of not only the effects of treatment, but also the impacts on their pelvic health. All of those elements can really change their quality of life and impact them on a really deep level.

- Participant 13

Outer Setting

External barriers influence exercise participation

Women's Perspective



Work commitments, looking after elderly parents, looking after young children, and the bugger all, can't be bothered. Unable to physically get there, if they're in a location where there's no public transport, they don't have a car, or if they're in a regional area.

- Participant 28



I think the challenge that we experience is because of life, work, and financial commitments. And there aren't a lot of exercise physiologists or physiotherapists in the community setting that we can refer patients to.

- Participant 6



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Inner Setting

Exercise is not routinely integrated into cancer care

Women's Perspective



No one told me. My oncologist didn't tell me, none of the nurses told me, no one told me that exercise was safe and beneficial.

- Participant 29



I really do believe that if we educate these professionals, then when they're talking to patients, they can actually bring that into their conversations with people. Because a lot of people might not think about how important exercise is, but exercise is very important.

- Participant 4



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Process

Early education and clinician endorsement influences engagement

Women's Perspective



If I had my time again, I would've been exercising all the way through rather than having to climb this gigantic hill to get back to my former self.

- Participant 29



The best time to offer it is as soon as they're diagnosed, putting that out as a way that they can manage their health over the next period of time.

- Participant 2



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Intervention

Personalised and flexible exercise support facilitates engagement

Women's Perspective



The improvements once I got into the study were enormous, both physically and emotionally, just huge. And I couldn't, if I were left to my own devices, if ACUMEN didn't exist, I wouldn't have got to the same place as quickly.

- Participant 23



You've got a framework of exercises that you can then adapt or individualise, depending on the person, using your clinical knowledge and experience to modify them. So, from my perspective, that's really valuable.

- Participant 3

Implications

**Earlier
Integration**

Referral Pathways



**Education and
Awareness**

**Flexible Models of
Care**

Take Home Message

Women should not have to navigate exercise support alone.

“At the moment, you have to seek it out and ask about it. Just as chemotherapy and radiotherapy are considered routine treatments, hopefully, exercise will become part of that too.”

- Participant 28

Thank you!

Special acknowledgements to:

- The women who shared their experiences
- The healthcare professionals who contributed their time and expertise
- All ACUMEN Participants
- Collaborating Clinicians and Hospitals
- The ACUMEN Research Team and Funding Bodies



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