

The efficacy of a group-based exercise and a sexuality education program for prostate cancer survivors

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Occupational Therapy Discipline

PCa survivors

- More men with PCa living longer post-diagnosis ¹
- Experience significant reductions in QoL, increased fatigue & challenges to sexual health ¹⁻³

1. Katz A. Quality of life for men with prostate cancer. *Cancer Nurs* 2007;30:302-8
 2. Truong PT et al. Prospective evaluation of the prevalence and severity of fatigue in patients with prostate cancer undergoing radical external beam radiotherapy and neoadjuvant hormone therapy. *Can J Urol* 2006;13:3139-46
 3. Visser A et al. Changes in health-related quality of life of men with prostate cancer 3 months after diagnosis: the role of psychosocial factors and comparison with benign hyperplasia patients. *Patient Educ Couns* 2003;49:225-32
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PCa survivors

- Significant declines in muscular strength, aerobic fitness & overall PFC ⁴
- 91% moderate-severe erectile dysfunction ⁵

4. Galvão D et al. Reduced muscle strength and functional performance in men with prostate cancer undergoing androgen suppression: a comprehensive cross-sectional investigation. *Prostate Cancer Prostatic Dis* 2009;12:198-203

5. Hoffman R et al. Cross-sectional and longitudinal comparisons of health-related quality of life between patients with prostate carcinoma and matched controls. *Cancer* 2004;101:11-9

Exercise for PCa survivors

- Exercise has a positive impact on QoL for PCa survivors ⁶
- RT and/or AT can reduce fatigue & improve QoL, muscular strength & aerobic fitness ^{7,8}

6. Keogh JWL, MacLeod RD. Body composition, physical fitness, functional performance, quality of life, and fatigue benefits of exercise for prostate cancer patients: A systematic review. *J Pain Sym M* 2012; 43:96-110

7. Newton R, Galvão D. Exercise in Prevention and Management of Cancer. *Curr Treat Options Oncol* 2008;9:135-46

8. Antonelli J et al. Exercise therapy across the prostate cancer continuum. *Prostate Cancer Prostatic Dis* 2009;12:110-5

Sexuality education

- Education and support in a group setting improves optimism about future functioning, normalises the experience and reduces anxiety ⁹
- Partners of PCa survivors benefit from group education sessions by learning alternative coping mechanisms & form realistic expectations regarding sexual functioning ¹⁰

9. Lepore SJ et al. Improving quality of life in men with prostate cancer: a randomized controlled trial of group education interventions. *Health Psychol* 2003;22:443-52

10. Manne S et al. Psychoeducational group intervention for wives of men with prostate cancer. *Psychooncology* 2004;13:37-46

Aims & significance

- For intervention programs to be successful, participants must be engaged in the process
 - First time exercise intervention combined with sexuality education program
 - Feasibility study
 - Documented PCa survivors' experiences
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Participants

- Prostate Cancer Foundation of North Queensland
 - Age range 44-80yrs (mean 66 ± 14.5 yrs)
 - Treated for/diagnosed with PCa over the last 3 years:
 - free of cardiovascular or musculoskeletal conditions that may preclude safe participation in the exercise programs;
 - have medical consent from their primary clinician; and
 - not have participated in any structured exercise/sexuality education program within the last six months
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Outcome measures

- Fatigue
 - Brief Fatigue Inventory (BFI)
 - Nine items scored 0-10
 - Quality of Life
 - EORTC QLQ-C₃₀
 - 28 questions (4-pt scale) & 2 questions (7-pt scale)
 - Scores for global health, 5 domains & 9 symptoms
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Outcome measures

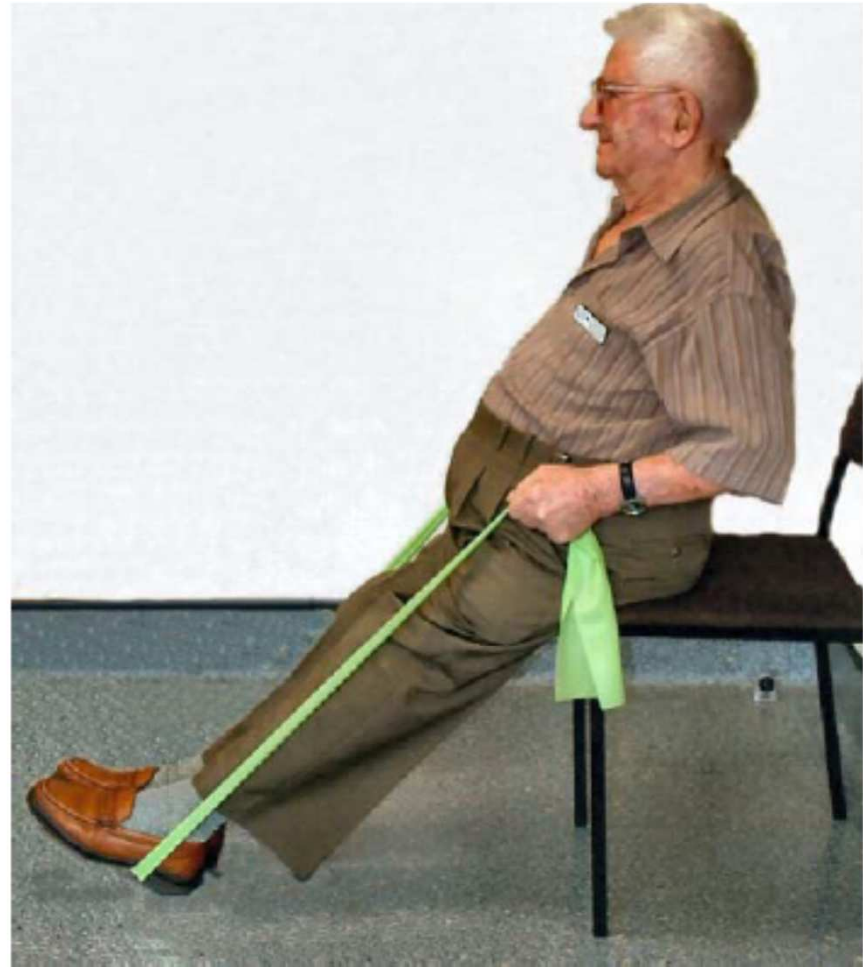
- Sexual function
 - Index of sexual satisfaction (ISS)
 - 25 Likert type items
 - Muscular strength & endurance
 - 30 sec sit to stand test
 - Aerobic fitness
 - 2min walk test
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Exercise intervention

- Eight-week group-based exercise intervention & sexuality education program
 - Exercise intervention
 - 3 exercise sessions/week
 - 5 minute warm-up, 25-30 mins of RT, 15-30 mins of AT & 5 minute cool-down
 - RT component involved nine progressive RT exercises that target the main muscle groups of the body
 - AT involved walking and was performed at a perceived exertion of 11-13 on Borg scale
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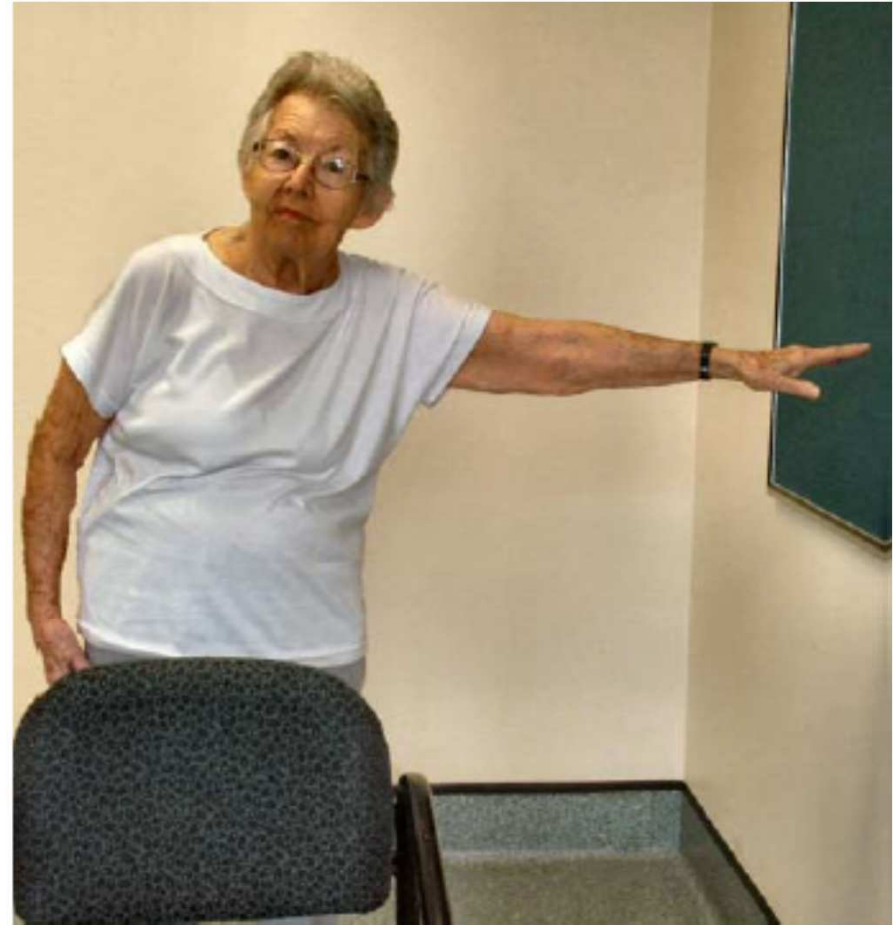




















Sexuality education

- Sexual education program
 - 4 sessions, 45-60 mins
 - Short talk/presentation
 - Questions & answers & group sharing of problems & solutions
 - Sessions covered:
 - impact of PCa on sexual function
 - sexuality, relationships and intimacy
 - enjoying intimacy and sexuality despite limitations
 - function and formation of self-help groups
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Data analysis

- One-on-one semi-structured interviews
 - One hour interview on strengths & weaknesses of program & how it could be improved
 - Partners of 3 participants attended program & were asked for feedback
 - Transcriptions analysed thematically to understand strengths & weaknesses as perceived by participants
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Results of outcome measures

- Five participants achieved 90% attendance
 - All participants increased sit-to-stand reps & distance achieved in 2min walk test
 - Four participants decreased symptom score on EORTC QLQ-C30
 - Three participants decreased their fatigue index score & increased in QoL score on EORTC QLQ-C30
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Results of interviews

- Strengths of intervention program
 - Motivation
 - Social aspect
 - Identifying with others
 - Exercise facilitator
 - Area for improvement
 - Intensity of exercise
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Theme - motivation

“It forced me to do something, get out of bed”

“It got me up, moving & doing exercise as I have a tendency to be a slug”

“Enjoyed the exercise- just getting out and ‘doing it’”

“...started losing weight after two weeks...where I wanted to lost it too”

Theme – social aspect

“I didn’t feel alone”

“Meeting new people”

“Great group of people, welcoming & encouraging”

“The group situation”

Theme – identifying with others

“Talking to other men & being able to identify with them”

“(The program was) particularly designed for us...felt I got a lot out of it”

“People shared things they wouldn’t have otherwise talked about/known”

“Camaraderie – being with others who were facing the same issues”

Theme – exercise facilitator

“The facilitator had a very helpful & sympathetic attitude”

“ The facilitator did a fantastic job”

“A great instructor”

Theme – exercise intensity

“I didn’t get much out of the walking”

“I found the walking pace a bit slow”

“ Could have gone a bit more vigorous”

“Increase the intensity of exercises”

Sexuality education

“The content was sufficient & relevant”

“Would like more information on aids or alternatives...”

“...more information on how men & women see themselves now...how have things changed”

“ Felt a bit outside the scope of the thing due to my age (80yrs)”

Future considerations

Sexuality education

- Participant age
 - Younger & older participant's experience different
 - Personal situation
 - Relationship status has bearing on attitude to sexuality
 - Future research
 - Initial focus group teaching basic information
 - Determine participant's attitude towards sexuality
 - Administer questionnaire to identify individual needs
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Future considerations

Exercise intervention

- Individual fitness levels
 - Resistance & aerobic training
 - Include partners when possible
 - Role of facilitator vital to create a positive atmosphere
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Acknowledgements

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