



Supporting Healthy Living in the Growing
Population of Cancer Survivors

Engaging Policy and Practice Partners

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What we know

Physical activity, healthy eating & healthy weight are important for cancer survivorship

We have effective interventions / programs

They are not part of routine cancer care

Partnerships with cancer policy and practice partners are key

What we did

Evaluated *two models* of delivering healthy lifestyle support to cancer survivors - with cancer policy and practice partners

Both telephone health coaching:

- ✓ Free 6-month programs
- ✓ Provide individualised support and advice to assist people reach their healthy lifestyle goals for:
 - Healthy eating
 - Physical activity
 - Weight loss/management

The two programs

1. Cancer survivor-specific with the Cancer Councils
2. General adult population with NSW Ministry of Health & Westmead Breast Cancer Institute

Today = compare the two programs

- patient-reported outcomes
- partner-reported outcomes

1. Healthy Living after Cancer

✿ NHMRC Partnership Project (2014 – 2018)

✿ Partners: Cancer Councils NSW, VIC, SA, WA

✿ Integrating an evidence-based, telephone health coaching intervention for cancer survivors into an existing national 13 11 20 Cancer Information and Support Service



Eakin EG, Hayes SC, Haas MR et al. Healthy Living after Cancer: A dissemination and implementation study, *BMC Cancer*, 2015; 15:992

Healthy Living after Cancer

-  6 months of telephone health coaching
-  Delivered by Cancer Council nurses
-  Any adult (post-tx with curative intent)
-  Physical activity, healthy eating, weight loss

Chief Investigators

- * **Professor Elizabeth Eakin** – [University of Queensland](#)
- * **Professor Sandi Hayes** – [Queensland University of Technology](#)
- * **Professor Marion Haas** – [University of Technology Sydney](#)
- * **Associate Professor Marina Reeves** – [University of Queensland](#)
- * **Associate Professor Janette Vardy** – [University of Sydney](#)
- * **Professor Frances Boyle** – [University of Sydney](#)
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- * **Professor Gita Mishra** – [University of Queensland](#)
- * **Associate Professor Michael Jefford** – [Peter MacCallum Cancer Centre](#)
- * **Professor Bogda Koczwara** – [Flinders University](#)

Associate Investigators

- * **Ms Kathy Chapman** – [Cancer Council New South Wales](#)
- * **Ms Sandy McKiernan** – [Cancer Council Western Australia](#)
- * **Dr Anna Boltong** – [Cancer Council Victoria](#)
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- * **Professor Christobel Saunders** – [University of Western Australia](#)
- * **Professor Afaf Girgis** – [University of New South Wales](#)
- * **Professor Wendy Demark-Wahnefried** – [University of Alabama, USA](#)
- * **Professor Kerry Courneya** – [University of Alberta, Canada](#)
- * **Professor Kathryn Schmitz** – [University of Pennsylvania, USA](#)
- * **Professor Kate White** – [University of Sydney](#)

Healthy Living after Cancer Team Members



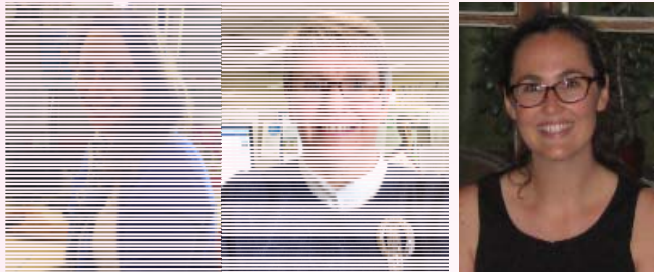
UQ – Erin Robson,
Project Coordinator



CC NSW – Liz Hing and
Indhu Subramanian



CC Vic – Clare Sutton and
Clem Byard



CC SA – Ann Branford, Polly Baldwin
and Mia Bierbaum



CC WA – Rosemerry Hodgkin
and Jo Daley

2. Get Healthy after Breast Cancer

Feasibility and acceptability of referring breast cancer survivors to the NSW 'Get Healthy Service' – a telephone-delivered program targeting physical activity, healthy diet and weight loss

Partners:



Meagan Brennan, Rosemary Winter, Bronwyn Chalmers

Led by: Sheleigh Lawler

Women with BC attending BCI (post-tx) screened by BCI nurse; referred to study; referred to GHS and tracked

Lawler S et al, Get Healthy after breast cancer. Journal of Supportive Care in Cancer, *in press*

Get Healthy Service

A banner for the 'get healthy' service. The background is blue with a faint image of a measuring tape. The text 'get healthy' is in a white, lowercase, sans-serif font with a registered trademark symbol. Below it, 'Information & Coaching Service' is written in a smaller white font. To the left, it says 'Simply call 1300 806 258' and 'www.gethealthynsw.com.au'. On the right, there is the NSW Government logo (a white lotus flower) and the text 'NSW GOVERNMENT | Health' in white.

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www.gethealthynsw.com.au

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BCI westmead
breast cancer
institute
Supporting Women with Breast Cancer Today and Every Day



Methods

Study Design

Single group, pre-post design – all participants offered the 6-month HLaC or GHS program

Common Outcomes

Patient-reported

- Changes in weight, diet, physical activity and quality of life
 - Uptake and completion rates
 - Patient experience

Partner-reported

- Nurse experience

Screening

- * **Adults (18+ years)**
- * **Diagnosed with potentially curative cancer** (i.e., localised, non-metastatic)
- * **Having completed treatment** (i.e., surgery, chemotherapy, radiation; hormonal treatment or Herceptin are OK to enrol)
- * **No contraindications to unsupervised physical activity** (e.g., active heart disease, dialysis, diabetic complications, planning a knee or hip replacement)
- * **Without cognitive or mental health impairments** that would hinder program participation (as determined during the eligibility and screening call)
- * **Able to speak and read English** sufficiently to allow for program participation
- * **Wanting support for healthy living** via exercise and healthy eating and willing to make a six-month commitment to program participation

Who took part

	HLaC (n = 300)	GHS (n = 53)
Type of cancer	breast, prostate, bowel, lymphoma, kidney, cervical, leukaemia, ovarian, thyroid, endometrial, BCC skin cancer, Ewings' sarcoma, base of tongue	breast
Gender	89% female	100% female
Age	55 \pm 11 yrs	57 \pm 10 yrs
BMI	29.0 \pm 6.0 kg/m ²	31.0 \pm 5.5 kg/m ²
Time since diagnosis	3 \pm 4 yrs	14 \pm 7 mths
Education (High school or higher)	84%	70%
Ethnicity - Caucasian	92%	74%
Language other than English	12%	27%

Patient-reported outcomes

Pre to post-program change	HLaC (n = 131)	GHS (n = 53)
Weight loss (kg)	-2.6*	-2.4*
BMI reduction (kg/m ²)	-0.9*	-1.2*
Fruit (daily serves)	+0.4*	+0.10
Vegetables (daily serves)	+1.1*	-0.30
Physical Activity (min/wk)	+133*	+55*

Patient-Reported Outcomes

Pre to post-program change	HLaC	GHS
Mental Component Score (SF-36)	+1.2	+3.5*
Physical Component Score (SF-36)	+7.5*	no change

Patient-Reported Outcomes

	HLaC	GHS
Program Uptake (of those eligible)	92%	82%
Program Completion	62%	62%
Adverse Outcomes	nil	nil

HLaC Participant Satisfaction

“I am going really well, since starting the program I have changed my life – I have gone from doing no exercise to walking every day. I feel so much better – I have dropped a couple of pant sizes and lost 5kg and my doctor is happy.”

“Your calls keep me accountable – I am eating more veggies because I know that you will call me and ask how I am going.”



GHS Participant Satisfaction

“Definitely the timing of the program was well timed as earlier in my treatment I would not have been as receptive to completing it.”

“Her regular calls have motivated me and kept me going. She was able to help me alter my program when I found the going difficult.”

“It would be great if the program included and touched on mental health.... Healthy mind and body!”

“The coach seemed to expect that one can exercise the same as young people. I don’t think the young have any idea what it’s like to be 70 upwards.”

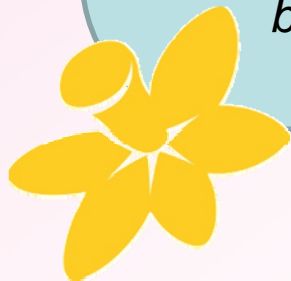


HLaC Nurse Satisfaction

“I am enjoying delivering the program and love the rapport that comes with frequent conversations with participants.”

“I believe this program is well-suited to delivery by cancer nurse specialists. The content is quite different to what I am used to delivering, but having completed a few intervention calls, I’ve found they’ve become easier.”

“I really like the flexibility of the program – the way that to an extent we can take the core intervention and apply it to the individual circumstances of the participants....I think almost everyone who has done the program with me has had some benefit, although the benefits would not have been the same for each person.”



HLaC Nurse Survey Feedback

Positives

- Application of coaching skills to other areas
- Increased knowledge of exercise and nutrition
- 'Walking the talk' in my own life 😊

Challenges

- Complexity of program protocols
- Logistics – scheduling, missed calls
- Switching 'hats' (Helpline to HLaC)
- Client psychosocial issues (eg, depression/anxiety)



GHS (Westmead) Nurse Feedback

*Easy and positive program to discuss with patients
A good progression after active treatment*

Alternative programs such as breast cancer specific group-based programs with more peer support may be better suited for some patients

Liked incorporating GHS referral into the follow-up clinic, but felt it would work best in nurse-led, rather than doctor-led, follow-up care given greater nurse propensity to focus on health promotion



Take home messages

Remarkably similar results across programs

Both cancer-specific and 'generic' healthy lifestyle programs can be safe and effective for cancer survivors with appropriate screening

Both are likely needed to address the health promotion needs of the growing numbers of cancer survivors

Cancer-specific programs will always have an important role

Partnerships made possible the successful delivery of both programs and will be key to ongoing funding for both programs

Thank you



Create change