



**Service Priorities and Programmes**  
**Electronic Presentations**

**Convention ID:** 155

**Submitting author:** Ms ON YAN, Jasmine TAM

**Post title:** Physiotherapist II, Tuen Mun Hospital, NTWC

**In-patient physical re-conditioning program on managing cancer-related fatigue in advanced cancer patients – a qualitative analysis for a 2-year experience**

*Tam OY(1), Lee YT(1), Ma FC(1), Wong MC(2), Lo SH(2), Poon YH(1)*

*(1)Department of Physiotherapy, Tuen Mun Hospital, (2)Department of Clinical Oncology, Tuen Mun Hospital*

**Keywords:**

Physical re-conditioning

Cancer-related fatigue

Cancer

**Introduction**

Cancer-related fatigue (CRF) is a common yet often unrecognized and under-treated symptom experienced by cancer survivors with prevalence ranged from 46% to 96%. CRF is defined as “a distressing, persistent, subjective sense of physical, emotional and cognitive tiredness or exhaustion related to cancer or cancer treatment that is not proportional to recent activity and interferes with usual functioning”. It has significant impact on patients' lives and activities of daily living and may have some economic consequences for both patients and medical system. Currently, physical exercise/activity has the strongest evidence among non-pharmacological interventions on treating cancer-related fatigue.

**Objectives**

(1) To examine the feasibility of a physical re-conditioning program for advanced cancer patients (life expectancy less than 6 months) in in-patient palliative care setting aiming at reducing CRF and maximizing physical function. (2) To increase the awareness of health care professionals in managing CRF for cancer population.

**Methodology**

The physical re-conditioning program was carried out in an acute palliative care ward. All patients in cancer palliative care ward received a tailor-made physical re-conditioning training once the medical condition was stabilized. The program included mobilization, strengthening, mobility training, fall risk education conducted by physiotherapists specialized in palliative care. Advice on energy conservation strategies, relaxation techniques and coping skills were incorporated in the program.

**Result**

Results: 1,445 patients received the program with a total of 11,903 attendances were recorded from January 2012 to December 2013. The mean number of treatment session was 8.2 per patient. No adverse event was found. Both patients and health care professionals of palliative care team appreciated the program. Patients were subjectively found to cope better with physical activities during the hospital stay. Their

self-confidence and independence were enhanced. As the patients' physical conditions are being optimized throughout the course of hospitalization, the patient readiness for discharge was increased from the observation of our palliative care team. Conclusion: The physical re-conditioning program appeared to have a positive effect on CRF, which was shown feasible in advanced cancer patients. Most importantly, the awareness of CRF was increased among the disciplines in palliative care team after these two years program. As patients physical conditions are optimized after the training, which in turn may enhance their coping skills and quality of life. However, further quantitative analysis is suggested to examine the effects of the program on fatigue level, functional performance, length of stay and quality of life.