

Walking can help alleviate fatigue after a cancer operation

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Researchers have affirmed that pancreatic cancer patients can literally take a step-by-step approach to combat fatigue. A study published in the April issue of the *Journal of the American College of Surgeons* reports that patients who underwent an operation as part of their cancer treatment and then started a regular walking regimen experienced less fatigue than cancer survivors who did not do the walking program.

It is estimated that each year, approximately 50,000 people are diagnosed with pancreatic or periampullary cancer. The latter forms near the ampulla of Vater, an enlargement of the ducts from the liver and pancreas where they join and enter the small intestine, according to a definition put forth by the National Cancer Institute (NCI).

Further, the NCI reports that <u>chronic fatigue</u> affects up to 96 percent of people being treated for cancer. It's so common that "sometimes it's overlooked as normal and people tend to write it off," said the study's lead author Theresa P. Yeo, PhD, MPH, MSN, associate professor of nursing at the <u>Thomas Jefferson</u> University School of Nursing, Philadelphia, and associate director of the Jefferson Pancreas Tumor Registry at the hospital's department of surgery. "But this is not the normal 'I-stayed-up-too-late' fatigue. It's really being exhausted, and it doesn't go away with sleep. It hits patients in their daily activities — simple things like doing your personal hygiene in the morning, getting up and getting dressed, going from the bedroom to wherever you eat breakfast." This type of fatigue can also lead to anxiety and depression.



Dr. Yeo and colleagues recruited 102 patients who had undergone surgical resections for pancreatic or periampullary cancer. Most study participants were Caucasian men and women aged 66 or 67 years old with Stage IIA or Stage IIB cancer. The patients also had similar rates and types of chronic conditions, such as hypertension or diabetes, but no conditions that could severely limit mobility. The patients were randomized into two groups just before hospital discharge: The usual care group went home with normal discharge instructions that did not include a walking or exercise routine. The intervention group was charged with walking for increasingly longer intervals each week for three months. The first month, for example, included walking sessions for 20 minutes with five minutes to warm up and five minutes to cool down. "But if people could only walk for three minutes, we said start with that and work your way up," Dr. Yeo explained. If patients felt any discomfort or shortness of breath while walking, they were instructed to slow down or stop. The goal was to increase walking time 90 to 150 minutes each week by the end of the three month program.

Patients in the walking intervention group mailed in monthly logs of their walking durations and distances. Each month, researchers followed up with patients in the walking intervention group to ask a set of outlined questions about their medical condition, adherence to the walking program and their current fatigue and pain level, along with other symptoms such as diarrhea, insomnia, or depression.

Researchers contacted all patients after three months for final reports on fatigue level using standardized survey tools. At the beginning of the study, 85 percent of all patients reported moderate to severe fatigue. Three months after discharge, the intervention walking group reported a 27 percent improvement in <u>fatigue</u>, compared with a 19 percent improvement in the usual care group. The intervention walking group also reported greater improvements in experiencing less pain than the usual care group.



"The beauty of this program is that we're not asking for high intensity aerobics or a target heart rate," Dr. Yeo said. "It's low to moderate intensity and they can sit if they need to. They don't have to push through it if they are not feeling well that day." Though the study authors acknowledge that more research is needed, patient discharge instructions have already been changed at Thomas Jefferson University Hospital to encourage walking or some form of aerobic activity as patients recover. She added that walking is accessible to everyone, whether they go to a gym, a local mall or just walk around the house several times a day to build stamina.

"The message in pancreatic <u>cancer</u> care has typically been that these patients are just too sick to do this, but that's not true anymore," Dr. Yeo explained. "With increased surgical expertise and the use of postoperative critical care pathways [care maps], more patients are feeling better sooner and going home earlier after their operations. There is no reason that <u>patients</u> can't become active, even if they did not exercise before."

Provided by American College of Surgeons

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