Rehabilitation in Palliative Care: The Active Palliative Rehabilitation in Lung Cancer (APRIL) study

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APRIL

Active Palliative Rehabilitation in Lung Cancer

Lung cancer is the second most common cancer diagnosis in men and women in Northern Ireland with ~ 1,200 new cases diagnosed each year. (Cancer Research UK)

The APRIL study explored the feasibility and acceptability of palliative rehabilitation through the development and testing of physical activity and nutritional guidance for people with advanced inoperable non-small cell lung cancer (NSCLC) receiving systemic therapy (chemotherapy or epidermal growth factor receptor inhibitor treatment).

STUDY RECRUITMENT

Forty-nine patients were screened for the study over a ten month period. Eighteen people were found eligible based on cancer stage, treatment potential and physical fitness. Eleven people were recruited to the study of which eight completed final assessment. Methods

Participants completed a daily activity diary and record daily pedometer step count for six weeks alongside their cancer treatment. Individual goals for exercise and nutritional intake were reassessed weekly dependent on barriers and enablers to behaviour change.

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KEY FINDINGS

1) Many people diagnosed with advanced NSCLC (non small cell lung cancer) are both willing and interested in engaging in palliative rehabilitation research.

2) Participation in APRIL led to perceived improvements in physical and psychosocial well-being.

3) Palliative rehabilitation to support people to live as they wish, for as long as they are able, should be a key consideration for all those diagnosed with a life-threatening or life-limiting condition.

PATIENTS AND HEALTH CARE PROFESSIONALS

1. … it was good for me … I'm always up for the challenge of doing something (patient)

2. plain simple walking, talking, doing, eating (patient)

3. whenever somebody is on the phone saying "So how did you get on this week… It does give you the spur to keep going…when somebody is trying to help you, it does give you a bit of motivation (patient)

4. it was the perfect vehicle for disciplining (patient)

5. Getting me out of the house has to be a good thing …Keeping me thinking a bit. … food wise you've sorted me out (patient)

6. I must admit I was sceptical…. would the patients enjoy it, would they engage in it? (HCP)

7. It's all very well saying it is good for you to keep active but if … someone is checking up on what you are doing , that's a bigger incentive than someone saying just do it yourself. (HCP)

8. …we have to try and do things to improve things… I always was somebody who believed in people who are active will do better (HCP)

9. I expected more patients not to want to do it than want to do it but that wasn't my experience (HCP)

10. I was also surprised how keen patients were to be enrolled in the study … I was delighted with how pleased people were to take part and how well they did (HCP)

11. I think it's the support they get, and doing something that's non-clinical was very nice … something that's for them.(HCP)

12. another string to that bow of saying "We're going to treat you. This is going to be an active thing" (HCP)

13. I'm a much stronger believer after the study than before it having seen the positive benefits (HCP)