

H.O.P.E.

Helping Oncology Patients Exercise

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HAPPY NEW YEAR!

As each new year begins we find ourselves in a somewhat state of confusion. We often re-examine the past year and look for things/habits we did that we don't want to repeat. Then we make our New Year resolutions to bring about some positive changes. But the reality of it is, we don't have to wait until another year comes along - we can always decide to make changes in how we live our lives.

So it is with our commitment to our health. It is never too late to begin again. And although the holidays are over, and many of us over did, over ate, over whatever, etc., there is still time for us to begin again. If you are one of those people who has exercised in the past, you already know of its' importance; both to your overall well being and for those around you. It's a proven fact, when we feel better, whether physically or psychologically, we also treat people better. And it is that interaction with one another that provides an important stimulus for our lives.

Therefore, be good to yourself, your family and your friends, by beginning again. You know that research concludes that moderate exercise at least 3 times a week can improve everything about you. This same research proves that the effects of exercise can actually empower us and give us back some of the control we lose when fighting a disease such as cancer. For these reasons, don't be confused, resolve to continue, start or even increase your commitment to exercise and take control of the parts of your life you can! Determine to live your life to its' fullest - and let CFFL help.

On a personal note, this is my last letter. I am leaving CFFL and taking some of my own advice and "beginning again". I shall never forget our patients, our staff or our mission and will carry these memories with me where ever I go.

Pam Lisner

Doctor's Corner

Dr. Joyce O'Shaughnessy
Baylor Sammons Cancer Center

Although the exercise train has left the station and is journeying to transform the way cancer care is administered in our country, it is still in the first leg of its expedition with a great many more miles yet to cover before exercise is as important a component of oncologic care as is surgery, radiation therapy and chemotherapy. Data such as the Harvard Nurses Health Study which showed a 50% reduction in the risk of mortality in breast cancer survivors who exercised moderately for about 3 hours a week provided the scientific rationale to launch prospective randomized trials evaluating the impact of exercise on early stage breast cancer outcomes. One such pioneering trial will be launched by CFFL in 2009.



Aware that the exercise train is steadily picking up clinical investigator and cancer survivor passengers as it ventures forward, I thought it would be interesting to review the abstracts from San Antonio Breast Cancer Symposium, 2008 that focused on the study of exercise in breast cancer patients. In querying the SABCS.org website under 'enduring materials' to determine how many abstracts had the word 'exercise' in their titles, I was reminded how early in its odyssey the exercise train is when only 7 abstracts appeared out of the several thousand from SABCS, 2008 abstracts-on-line. Indeed, only 3 of the 7 were actually focused on exercise as a means to improve the outcome, overall health and quality of life of breast cancer survivors, while a fourth studied dietary interventions to improve insulin resistance in breast cancer survivors.

It is interesting to have a look at the designs and findings of these 4 SABCS studies.

Greenlee, et al attempted to recruit minority (African-American and Hispanic) breast cancer survivors into an ongoing exercise program. Their chief finding was that the women who committed themselves to the exercise program and who were adherent to it were those who believed that exercise would decrease their chances of breast cancer recurrence and improve their overall survival. This important finding reminds us to be very clear with our cancer patients that regular exercise will improve their chances of remaining alive and free of breast cancer. I believe we can relay this with confidence based on the Harvard Nurses Health Study and the growing association between insulin resistance and worse outcome from breast cancer.

R.S. Young, et al focused on enrolling African American breast cancer survivors into a comprehensive exercise and dietary intervention program. Sixty-eight percent of the women completed the planned 12 month program and involvement and adherence to the fitness program at 4 months predicted for continued involvement at 12 months. In this study, the African American women who were largely sedentary at study entry increased their exercise to approximately 2.5 hours per week.

Harvie, Cuzick and Howell, et al. randomized 107 overweight or obese premenopausal women who were at high risk for developing breast cancer to a dietary intervention consisting of intermittent versus continuous energy restriction. The caloric restrictions in both groups represented an overall 25% decrease in energy from their usual daily intake. The subjects on the intermittent energy restriction study arm had approximately 550 kcal on 2 days per week and ad lib food intake on the other days. The continuous energy restriction subjects had approximately 1500 cal per day, 7 days per week. 15% of the women withdrew from the study before 6 months, 12 in the intermittent and 7 in the continuous energy restriction groups. At 6 months, both the intermittent and continuous groups had lost approximately 7% of their weight and approximately 6% of their waist circumference. Both dietary interventions were effective in lowering serum leptin and C-reactive protein levels. Intermittent energy restriction was more effective in improving insulin-resistance at 6 months compared with the continuous energy restrictions (21.6 versus 15.3%, $p > 0.05$). This interesting study provides our breast cancer survivor patients with two ways to practice energy restriction (along with their exercise program, of course) - intermittent 2 days a week versus daily continuous -- towards the goals of weight loss and improvement in insulin resistance and the inflammatory state that accompanies obesity and the metabolic syndrome.



Lastly, and perhaps most pertinent to the very successful ongoing efforts of the CFFL, Ligabel and Winer and colleagues from the Dana Farber Cancer Institute conducted a single-arm pilot exercise trial in 41 women who were newly diagnosed with breast cancer and who were just beginning adjuvant chemotherapy. 33 of these 41 patients (80%) completed the 12 week program of 150 minutes per week of home-based exercise training during their adjuvant chemotherapy. The 33 patients went from an average of 13 minutes per week of exercise at baseline up to an average of 115 minutes per week. During the 12 week exercise program and while they were receiving their adjuvant chemotherapy, the patients lost weight and body fat, improved their fitness level (as measured by the modified Bruce ramp protocol treadmill test), improved their overall quality of life and reported decreased fatigue. It is remarkable that

the patients reported improved fitness, quality of life and less fatigue at 12 weeks compared to their pre-study baseline, in spite of having undergone adjuvant chemotherapy. Drs. Ligabel and colleagues suggest that this pilot study provides support for a randomized trial to evaluate the impact of exercise during and after adjuvant chemotherapy on patients' breast cancer outcomes. As luck would have it, the CFFL is already far along in executing such a trial and it will be open to all of our cancer centers that are participating in the FitSTEPS for Life program.

Although the exercise train has only recently left the station, this powerful locomotive is pushing ahead into the research frontier which focuses on improving the overall health of the host, the cancer patient, as a therapeutic strategy to reduce the foothold of cancer. As we ask each of our patients every day in the clinic whether they are walking 3 hours a week and staying as physically active as is possible with the help of the FitSTEPS for Life program, it certainly will be interesting to watch the fitness of the host clinical research data accumulate. Year by year more studies will give our patients even more evidence that their exercise efforts will pay off for them with a reduced risk of cancer recurrence, improved overall health and greater vitality.

Dr. Joyce O'Shaughnessy
Baylor Sammons Cancer Center



The Rose - A Cancer Survivors View

Going through cancer is like a rose
The lower part of the stem with thorns
Is the time when you are diagnosed,
And the thorns represent the procedures
You go through.
The middle part of the stem having not
as many thorns
Is the time as you are finishing your treatment.
There are still some rough times during it,
The upper part with no thorns
Is the time just after treatment when you start recovering,
The stem that goes off to the side and the rosebud
Are the times when problems come back up
The main bloom of the rose represents
When you are cancer free and tests are clear,
The baby's breath represents
All the people who have been around you to help
You and to support you from the beginning on,
The ribbon represents
The other cancer victims and survivors who
Are there to give you the type of support that
Only Survivors can,
The vase represents
The Lord's presence though He may not be seen
He is always there to support you.

Cindy Northwood, Cancer Survivor

2008

Exercise Strengthens Immune System After Chemotherapy



Written by **Matthew Ebert, Clinical Director**

A study out of Penn State University has found evidence that an exercise program started within 30 days of chemotherapy for breast cancer speeds up the recovery process by strengthening the immune system. The study was done on a group of 49 women who had been through surgery followed by chemotherapy. Most of the women had done little exercise before their diagnosis. The groups of women were split into an exercise group (28) and a non-exercise group (21). The group consisting of 28 in the exercise group began conditioning 3 days per week with an exercise specialist. Their daily exercise routine consisted of aerobic and resistance training. The intensity of the exercise was set at an appropriate level by each exercise specialist.

The results of the study were measured at 3 and 6 months. All measurements taken on the exercise group indicated improved immune system function. They had increased levels of healthy white blood cells. The research also suggested that the exercisers were able to replace white blood cells that were damaged or killed by their chemotherapy. The researchers found that levels of inflammatory substances caused by chemotherapy decreased in the exercise group, but actually increased in the non-exercise group after three months. Other improvements found in the exercisers were an increase in physical endurance, upper body strength, quality of life, and a decrease in fatigue. The physical improvements continued to increase throughout the study.

One of the most common side effects of chemotherapy is neutropenia (reduction in white blood cells) and depression of the immune system. A significant number of scientific studies demonstrate the benefit of cancer patients participating in an exercise program like FitSTEPS for Life® when receiving chemotherapy. Stimulation of the immune system and improving neutropenia increases the opportunity to receive and complete chemotherapy in a timely fashion. This in turn can lead to an improved response to treatment. Other benefits of exercise during chemotherapy are a significant reduction in fatigue, nausea and depression.

Matthew Ebert
FitSTEPS for Life
Clinical Director

Source: Penn State University / Ederly College of Science (2005 June 13). Exercise Helps Recover From Chemotherapy For Breast Cancer.

Featured Staff



Emily Voss - Research Coordinator

My name is Emily Voss and I have worked with CFFL since December 2002 when I started as a cancer patient. I gained so much from the exercise program myself that I wanted to give something back which lead me to join the small team of volunteers in 2004. I started my actual employment with CFFL March 2005, splitting my time between patient facilitation and developing the volunteer program. With the advent of surveys, I began working on the research project(s) and, currently, I am not as involved with FitSTEPS for Life, clinically. I miss interacting directly with the patients but I still have a lot of fun teaching a Swiss Ball Class (to the tunes of the 50's) for the participants at our Jacksonville center as well as getting together with the patients for lunches or other celebrations, both at and outside of the center.

I am originally from Tennessee but, as they say, got to Texas as soon as I could, after graduating from Vanderbilt University (too many years ago to mention). I studied to be a teacher but found a career in computers and healthcare reimbursement. My interests are people and crafts, the latter of which I have little time to pursue except when I want to make something special for family (including 8 grandchildren) or friends.

I have developed a lot of close relationships since my early days of exercising at First Christian. I always have maintained that the camaraderie among the participants is a large part of our program and its success. I truly respect and applaud those who have participated in FitSTEPS for Life, in an attempt to overcome the effects of cancer or whatever condition with which they are dealing. My gratification comes from seeing someone accomplish what they thought they could not or seeing a family member beam when they comment on the positive changes (both physical and emotional) they see in their loved one. Everyone with whom I have worked in the exercise program holds a special place in my heart.

Recipe



Corn Chowder

To turn it into a seafood or chicken chowder, add chopped raw or cooked shrimp or scallops (10 minutes before the soup is done) or chicken (when you add the milk and broth).

- 2 Tbsp. olive oil
- 1 onion, diced
- 5 garlic cloves, minced
- 2 Tbsp. all purpose flour
- 2 red bell peppers, seeded and chopped
- 2 carrots, peeled and chopped
- 2 cups corn niblets or kernels (frozen or fresh)
- 1 potato, peeled and diced
- 3 cups fat free milk
- 2 cups lower-sodium vegetable broth
- 1 tsp. dried thyme
- ½ tsp. black pepper
- 1 ½ cups canned cannelloni, Great Northern, or other white beans, drained and rinsed

Heat the olive oil in a medium stockpot over a medium-high heat. Add the onion and garlic and sauté for 2 minutes. Stir in the flour and cook for 1 minute, stirring constantly. Add the peppers, carrots, and corn and stir well. Stir in the potato, milk, broth, thyme, and pepper. Bring to a boil, reduce the heat, and simmer 15 to 20 minutes or until the potatoes are tender. Meanwhile, mash the beans with a fork in a small bowl until they form a paste. Stir the beans into the soup and cook until warmed through. Makes 10 servings.

Per serving (1 cup):

- Calories: 150
- Sodium: 240 mg
- Total Fat: 3 g
- Cholesterol: 0 mg
- Sat Fat: 0 g/ Trans Fat: 0 g
- Protein: 7 g
- Carbohydrates: 25 g
- Fiber: 4g

CFFL 2009 Calendar

We still have a few of the first ever Cancer Foundation for Life® Inspirational Calendars. This Calendar includes pictures of our participants and an inspirational quote for every month. They are available at all the exercise centers and if you would like more information please call 903-561-0149. The cost of the calendar is \$10.00.



Cancer Foundation For Life®
2009 Inspirational Calendar
www.cancerfoundationforlife.org

Please notice that our newsletter will be published quarterly from this point on. Expect the next issue in April, 2009.

If you would like additional information about our program, please contact your local office.

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Until Next Time!
CFFL Staff