

LEVEL 4 CANCER REHABILITATION

Group Presentation – Doreen, case study 2

1

A brief summary of the client's details

- Doreen is 65years old
- She is living with breast cancer
- She has had breast cancer surgery – single mastectomy
- She is undertaking biological therapy (Herceptin) and chemotherapy (Taxotere)
- She may go onto hormone therapy
- She has developed paronychia
- Is feeling good generally but gets tired easily
- Increased blood pressure of 138/88, RHR - 85
- Doreen is feeling lonely, she's done aquafit previously and enjoyed
- She likes dancing

2

Information about the client's treatment

Biological therapy

Doreen is currently on a biological therapy of Herceptin, this is the brand name of a medicine called trastuzumab and can be used to treat early-stage HER2 positive breast cancers following surgery and/or radiotherapy and chemotherapy, to reduce the risk of the cancer coming back.

Herceptin is given to Doreen during visits to a hospital via an infusion, she has received treatment for a number of weeks now and now received her medicine slowly through a drip which takes about 30 minutes per week.

Some of the side effects of Herceptin that Doreen is experiencing are:

- difficulty sleeping most nights
- A noted low number of white blood cells, which has the potential for risk of infections
- a regular high temperature and hot flushes
- Increased blood pressure of 138/88

Chemotherapy

Doreen is also undergoing chemotherapy treatment of Taxotere which is medically referred to as Docetaxel. She has her treatment takes about an hour and every 3 weeks.

Docetaxel can cause an allergic reaction, in order to try to prevent this, her nurse gives her a steroid tablets to take, usually for 3 days, starting the day before each treatment.

Some of the side effects of Taxotere that Doreen is experiencing are:

- Mouth sores and ulcers
- Hair loss
- Paronychia (nail disease)

3

Potential treatment side-effects to exercise programming

Single mastectomy

- reduced ROM, adaptation of movement and weight needed
- pain in area
- No lymphoedema so no recommendation to wear compression sleeves, will continue to monitor this.

Postoperative

Watch wound and others

- can be painful, consideration of pain and discomfort, ensure access to room temp water

Key risk

↳ awareness of reduced confidence and increased self awareness/body changes, offer classes at quiet times, ability for 1-3 sessions over group based if more comfortable, able to adapt to home/virtual delivery if needed

Postoperative foot disease

↳ careful in the shower around the hot bed, painful and tender, cautious and aware when using weights, consider cotton glove use if condition is flaring up, if treated and is under control, continue to monitor

Contraindications

- difficulty seeing most signs - stressors in session, slight irritability, discuss around the importance of a good bedtime routine (avoiding exercising 2 hours before, reduced caffeine intake in the PM, avoid elective work, get bedded), acknowledgement of stresses and training in more quiet times if needed, nutrition support offered if needed
- Blood pressure, regular testing and monitoring
- A noted low number of white blood cells, which has the potential for risk of infections - regular cleaning of equipment, good air ventilation, bring own towel/water/sanitary etc
- a regular high temperature and hot flashes, bases of clothing that can be altered accordingly, good air conditioning/ventilation considerations, understanding of instructor to make feel comfortable, infection techniques, access to water/contact lenses

4

If Doreen was to progress onto Hormone therapy, the considerations would be:

She is already post menopausal (this affect the type of therapy), like to tamoxifen (blocks estrogen from causing cancer cells to proliferate) .

1 tablet a day on 5yr course (potential for longer).

Side effects, worst initially and then level out.

- hot flushes and sweating
- low libido
- vaginal dryness and discharge
- nausea (consideration within PA session, more comfort breaks)
- joint pain (PA considerations, altered movement patterns, lighter weights etc)
- mood changes and lethargy (PA consideration, to keep the sessions engaging and interesting, instructor awareness)

* Consideration around osteoporosis (regular weight bearing movement, e.g. adapted seated leg extension in current circuit, and nutritional support around vit D and calcium intake/supplementation if needed – referral back to multidisciplinary team/dietetics (to understand the wider prescription/lifestyle needs).

5

Potential contraindications to exercise that the client may have

- Contraindications due to breast surgery (single mastectomy)
 - o Acute arm / shoulder problems – Could have impact on potential upper body exercises and ROM. If pain was severe, refer back to consultant
- Extreme Fatigue / Anaemia:
 - o Could cause other issues such as concentration, dizziness, balance problems - If this was occurring, there would be issues with carrying out the exercises safely and effectively.
- Paronychia:
 - o Severe redness, cracking, swelling could cause discomfort / pain – Referral back to consultant if necessary. Client should take extra care with hygiene of hands and apply any medicated creams if these have been provided. Use of cotton gloves to keep hands clean and also will help when touching equipment.
- Hormone Therapy (possible):
 - o If hormone therapy does proceed, it could cause depression/mood swings which could have massive impact on motivation and willingness to exercise. Client may not want to take part in group based activities, therefore alternative exercise delivery could be considered such as completing prescribed exercises in comfort of own home and in their own time. 1:1 virtual sessions could also be offered.
 - o Breakable severe joint pain – If this occurs a referral back to consultant. Exercises taken part in to be carried out at low-moderate intensity client to really listen to their body and know their own limitations.

6

A client-specific exercise session

Considerations prior to the session.

- Hygiene
- Toilets
- Room temp drinking water
- Wearing gloves
- Injury ask, how are you feeling today
- Good ventilation
- Berg scale – balance
- Piper scale – fatigue
- A range of other outcome measures/paperwork completed (range of movement etc)

7

A client-specific exercise session

Doreen's intensity measurements

- Blood pressure reading 130/90 - 95, 5 minutes per exercise. Circuit to be completed
- FITT - 2 to 3 times per week; RPE Scale 11-12, HR 110 - 130bpm, Talk Rest; Piper-Fatigue Scale to be taken into account. Session 45 to 60 minutes session, Circuit, Aerobic - Resistance - Balance based

Client exercise session - RAG circuit

Prior to session - exercise equipment to be disinfected and cleaned prior and through, advise clients to bring cotton gloves to wear to reduce risk of infection & to support Paronychia. Bring in water to keep hydrated. Ensure room temperature is comfortable & air con system in use. Client to wear loose appropriate clothing.

Warm Up - 10 to 15

- Circulation booster - 1. Marching on the spot 2. Shoulder rolls 3. Small Bird (progress to Big Bird) 4. Hip rotations. 5. Heel digs. Warm up to focus on dynamic exercises, can be performed seated or standing depending on clients preference/fatigue levels.

Main Session 20 to 30 minutes

- 1. Sit to Stand 2. Face Pull (Dyna band) 3. Seated Leg Extension(Ankle Weights) 4. Bridge. 5. Step Ups. 6. Front Raise 7. One Leg Stand. 8. Stand Leg Cur.

Cool Down 10 minutes

- Marching on the spot, Shoulder Stretch, Upper back stretch, Hamstring, Calf, Quadricep (can be performed seated or standing) - Static stretches to be performed.

Rationale (ACSM 2021 Cancer Guidelines for Exercise & Prescription)

- "Arms/shoulders should be exercised but proactive injury prevention approaches should be encouraged"
- RAG session implemented "Progress resistance at small increments, reduce resistance or stop specific exercises according to symptom response"
- "Social aspect of group setting"

8

Dietary guidelines that you feel would benefit the client

- Eating regularly to regulate blood sugar levels – mouth ulcers/fatigue

• Eatwell guide (washing of F&V, potential to be more vegetable based, ensure good fibre content – complex carbs consideration of protein intake (use 10day food diary if needed – sarcopenia consideration), avoid the foods high in fat, sugar and salt – easy and tasty options, often when attempting to take away the 'chemo taste')



- Avoid acidic foods – mouth ulcers
- Hydration, 1-2litres of water a day - room temp but encourage variety, milk potential to explore
- Vit D and calcium supplementation potential

9