Exercise Programming and Counseling Preferences of Breast Cancer Survivors During or After Radiation Therapy

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Exercise participation after breast cancer diagnosis has been associated with a number of positive outcomes, including enhanced quality of life, reduced risk of recurrence, and improved survival times (Holick et al., 2008; McNeely et al., 2006). Despite those benefits, many breast cancer survivors do not achieve recommended amounts of physical activity (Courneya & Friedenreich, 1999; Haskell et al., 2007). Based on the National Coalition for Cancer Survivorship’s definition, the term cancer survivor refers to people anywhere along the cancer spectrum from diagnosis until the end of life (Leigh & Logan, 1991).

A myriad of variables influence exercise behavior, including demographic, biologic, psychological, behavioral, social, and environmental factors (Trost, Owen, Bauman, Sallis, & Brown, 2002). This article focuses on exploring exercise-related beliefs and features of programming and counseling that may influence exercise behavior in breast cancer survivors during or after radiation therapy. Although those variables represent only a small proportion of the factors that influence exercise behavior, they are important to study because they may be changed as a result of exercise interventions targeting social cognitive variables and thoughtful program design.

Few studies have examined exercise counseling and programming preferences in cancer survivors (Jones & Courneya, 2002; Jones et al., 2007; Karvinen, Courneya, Campbell, et al., 2007; Karvinen et al., 2006; Rogers, Courneya, Shah, Dunnington, & Hopkins-Price, 2007; Rogers, Markwell, Verhulst, McAuley, & Courneya, 2009; Vallance, Courneya, Jones, & Reiman, 2006), but almost all of them have been with survivors who were post-treatment. In general, cancer survivors indicated an interest in receiving exercise counseling and programming, preferred moderate intensity activity, enjoyed walking as a modality, and indicated a preference for starting exercise programming. Exercise interventions may be most effective if tailored to the unique needs of treatment status.