Health Behaviors in Cancer Survivors

This material is protected by U.S. copyright law. Unauthorized reproduction is prohibited. To purchase quantity reprints, please e-mail reprints@ons.org or to request permission to reproduce multiple copies, please e-mail pubpermissions@ons.org.

Deborah K. Mayer, PhD, RN, AOCN®, FAAN, Norma C. Terrin, PhD, Usha Menon, PhD, RN, Gary L. Kreps, PhD, Kathy McCance, PhD, RN, Susan K. Parsons, MD, MRP, and Kathleen H. Mooney, PhD, RN

Purpose/Objectives: To describe health behaviors of cancer survivors by cancer diagnosis and to compare them to people without a personal or family cancer history.

Design: Cross-sectional secondary data analysis.

Setting: A national, list-assisted telephone survey using random-digit dialing of U.S. adults about use of cancer-related information and cancer beliefs.

Sample: 619 cancer survivors and 2,141 participants without a history of cancer from the original 6,369 Health Information National Trends Survey (HINTS) respondents.

Methods: Using the National Cancer Institute’s 2003 HINTS, further analyses were conducted.

Main Research Variables: Cancer history, current smoking, fruit and vegetable consumption, physical activity, and body mass index (BMI).

Findings: When controlling for demographic variables, no differences were found in self-reported health behaviors between survivors and those without cancer: 22.5% of survivors and 18.4% of those without cancer were current smokers, 18% of survivors and 14.9% of those without cancer consumed at least five fruits or vegetables per day, 45.3% of survivors and 53% of those without cancer were physically active at least weekly, and 58% of survivors and 54.9% of those without cancer were overweight or obese (i.e., BMI > 25). Only 7.4% of survivors and 6.4% of participants without cancer reported positively on all three health behaviors and had a healthy or normal weight.

Conclusions: Survivors did not have different health behaviors when compared to participants without a history of cancer. Neither group met the American Cancer Society or Healthy People 2010 objectives for these behaviors. Adoption of healthy lifestyle behaviors should be addressed in cancer survivors.

Implications for Nursing: Cancer survivors need to be assessed for current smoking, dietary habits, physical activity, and weight. Information and resources should be made available, if needed, to promote the adoption of healthy lifestyle behaviors.

Key Points...

➤ More than 10 million cancer survivors are living in the United States, representing 3.5% of the U.S. population. This group is expected to grow dramatically as baby boomers age.

➤ Cancer survivors have poorer health than the general population and are at higher risk for developing second cancers.

➤ Cancer survivors do not differ from the general population in their rates of smoking, eating fruits and vegetables, engaging in regular physical activity, or maintaining a healthy or normal weight. Only 7.4% of the cancer survivors and 6.4% of participants in the control group without cancer reported positively on all three health behaviors and had a healthy or normal weight. Adoption of healthy lifestyle behaviors should be addressed by nurses when caring for cancer survivors.

Tremendous progress has been made in the diagnosis and treatment of cancer since the 1950s, leading to a growing population of cancer survivors (American Cancer Society, 2007; Edwards et al., 2005). The United States has more than 10 million cancer survivors, representing 3.5% of the population; this number is expected to grow dramatically as the U.S. population ages (Institute of Medicine, 2006; National Cancer Institute, 2005). Although they are living longer, cancer survivors are not as healthy as the general population (Gotay & Muraoka, 1998; Hewitt, Breen, & Devesa, 1999; Yabroff, Lawrence, Clauser, Davis, & Brown, 2004). In addition to long-term and late effects of cancer and its treatment, more than 10% of new cancers are diagnosed in survivors, and they face increased risk for weight gain, cardiovascular disease, diabetes, and osteoporosis (Demark-Wahnefried, Aziz, Rowland, & Pinto, 2005;...