

Lifestyle Modifications in Reducing Risk of Recurrence

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IN PURSUIT OF YOUR CURE.



@SylvesterCancer

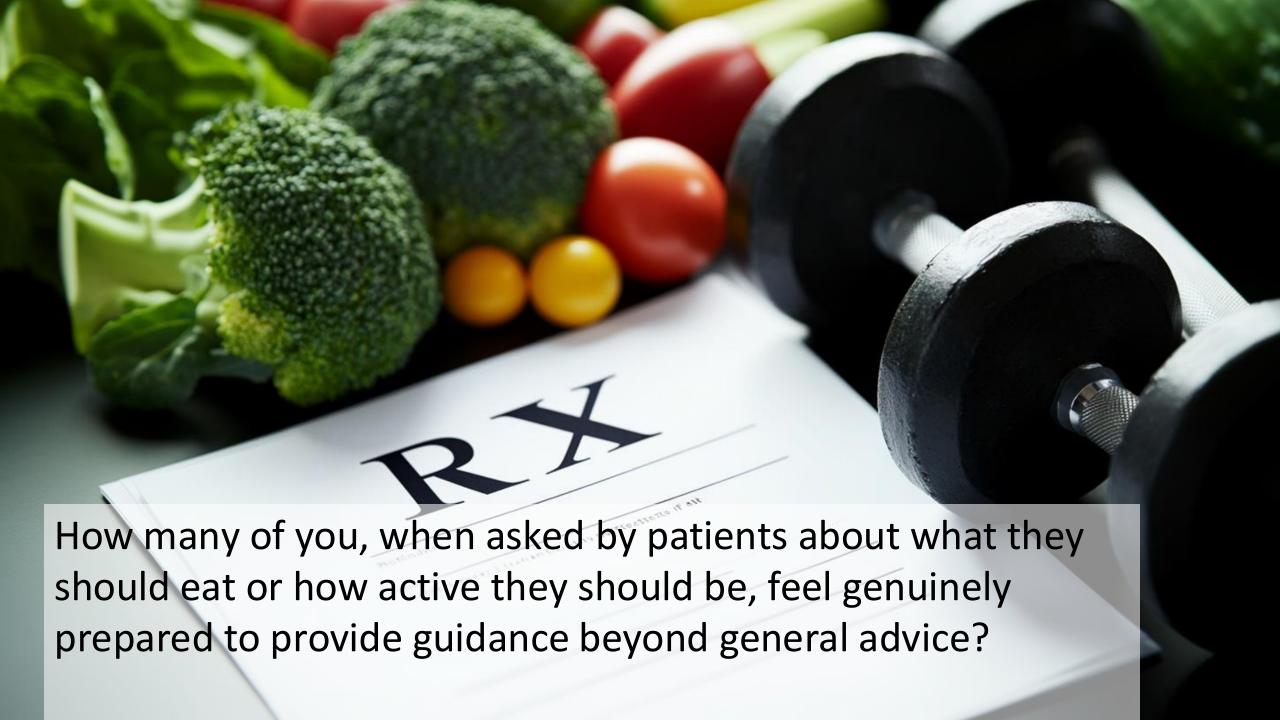










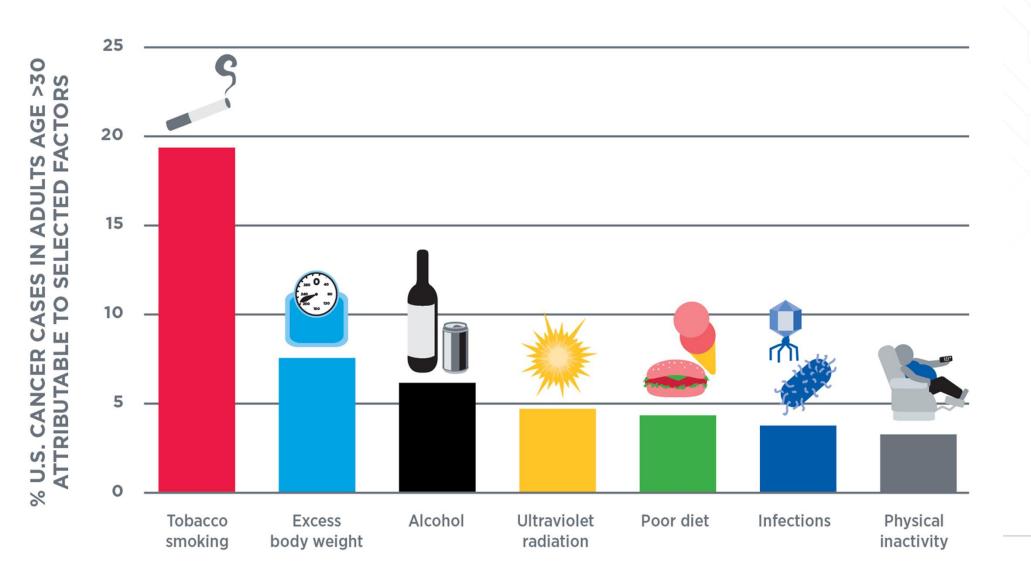


Objectives

- Understand the role of nutrition and exercise in cancer treatment.
- 2. Assess and integrate evidence-based nutritional and exercise interventions.
- 3. Recognize barriers and develop strategies for implementing nutrition and exercise programs.



INCREASING CANCER RISK





EXCESS BODY WEIGHT, POOR NUTRITION, PHYSICAL INACTIVITY, AND EXCESS ALCOHOL CONSUMPTION













OVERWEIGHT OR OBESITY RAISES A PERSON'S RISK OF GETTING ONE OR MORE OF



73.6% of US Adults are overweight or obese



Recommendations for Cancer Survivors to Improve Long-term Health and Increase Survival



Avoid obesity and maintain or increase muscle mass

Get regular physical activity



- Tailor physical activity to cancer type, treatment, side effects
- Consider comorbidities



Nutrition based on recommendations to decrease risk



 Follow the American Cancer Society Guidelines for Diet and Physical Activity for Cancer Prevention to reduce risk of a new cancer









American Cancer Society (ACS) Physical Activity and Nutrition Guidelines for Cancer Survivors



Avoid obesity and maintain or increase muscle mass



Engage in regular physical activity



Follow a healthy eating pattern

In 2024 the Health Information National Trends Survey (HINTS), only 4% of cancer survivors adhered to all four ACS guidelines



Attention to Lifestyle Behaviors

Nutrition

- A healthy diet reduces risk of cancer mortality
- <20% of cancer survivors are eating 5 servings of vegetables and fruits per day</p>



Physical Activity

- 150-180 minutes of moderate or vigorous activity per week is associated with:
 - > 24% reduction in recurrence and cancer specific mortality
 - > 41% reduction all cause mortality
- <34% of cancer survivors are exercising 150 minutes or more each week</p>



Body Weight

- Weight loss after treatment is associated with reduced recurrence and improved survival
- ~70% of cancer survivors are overweight or obese and weight gain is common post treatment







Healthcare Providers are the Key to Improve Outcomes; However, Barriers Exist

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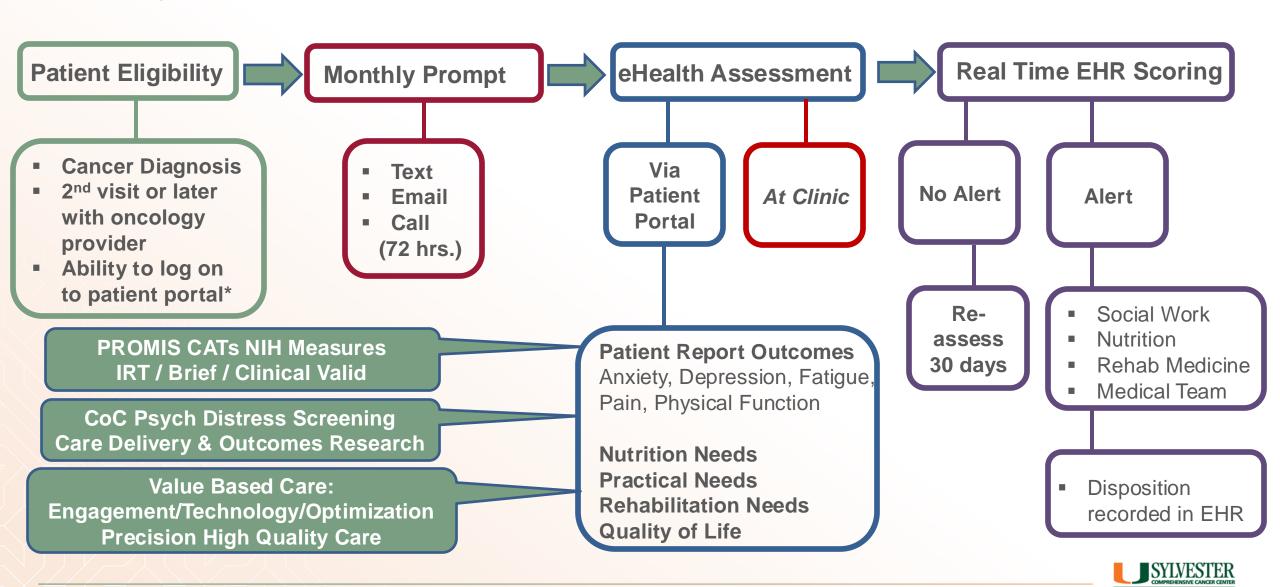
 Fewer than 10% of survivors report being asked or advised about their diet and exercise

- 0 6
- Chart reviews reveal fewer than a quarter of oncology providers engage in diet or physical activity counseling
- Lack of time and available programs key barriers
- However, survivors are highly motivated to change lifestyle behaviors!
 - Recent national survey 72% had changed some component of their diet and/or activity
 - When oncologists provided recommendations, survivors were more likely to report change versus when oncologists did not





My Wellness Check: In Pursuit of Your Wellness





PREVENTION, SUPPORTIVE CARE

& SURVIVORSHIP

LIFESTYLE MEDICINE

Nutriscore Part 1. Weight Loss and Appetite Nutriscore Part 2. Cancer and Treatment Type Have you lost weight +0 +2 **Cancer Type Treatment Type Score** involuntarily in the last 3 No Unsure months? Breast, Central Nervous System, Targeted Therapy, +2 +1 +3 + 0 **Immune Checkpoint** Bladder, Prostate, How much weight (in +4 12 to 22 23 to 2 to Colorectal, Leukemia Inhibitors, Hormone **Low Risk** Or pounds) have you lost? >33 other Lymphomas, Therapy, Other 11 33 Unsure Other Have you been eating Lung, Liver, Biliary Tract, Only Chemotherapy, Only +1 Renal, Ovaries, poorly in the last week +0 +1 Radiation **Medium Risk Endometrial** Yes because of poor No appetite? Head and Neck. Chemotherapy and, Esophagus, Gastric, Radiation, Hyper + 2 Fractionated Radiation Pancreas, Intestines, **High Risk** Lymphoma with Therapy, Hematopoietic compromised GI tract Stem Cell Transplant PART 1 SCORE + PART 2 SCORE = TOTAL SCORE (Score > 5 = Malnutrition Risk)





PREVENTION, SUPPORTIVE CARE

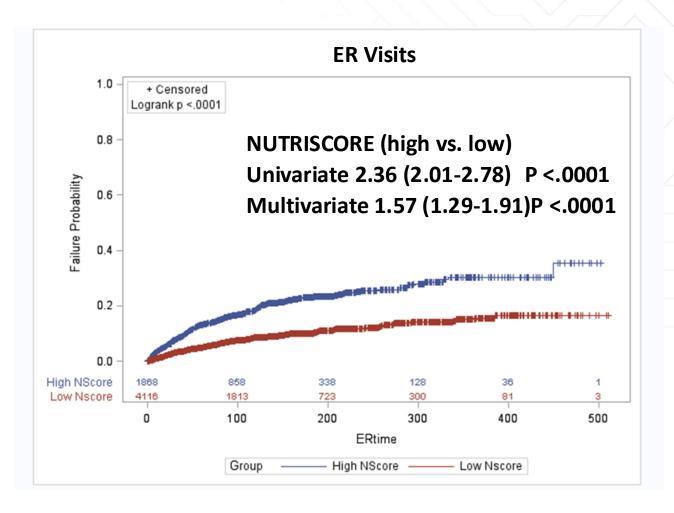
& SURVIVORSHIP

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- 5984 responses
 - 1868 High Score (31%)
 - 4116 Low Score (69%)

High versus Low Nutriscore:

- Women
- Hispanic ethnicity
- Report no/low alcohol intake
- GI, Lung, GYN, Head and neck
- Greater symptom burden







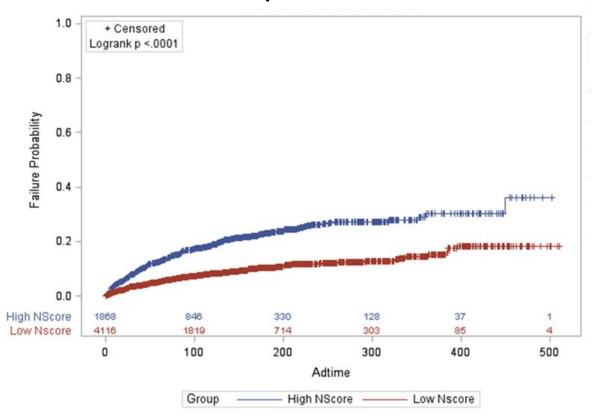
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NUTRISCORE (high vs. low)
Univariate 2.37 (2.02-2.79) P <.0001
Multivariate 1.68 (1.37-2.04)P <.0001

Hospitalizations



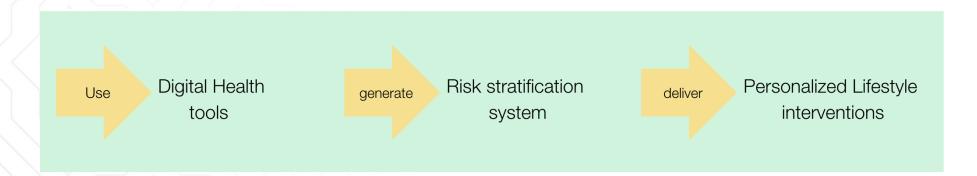




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A patient-centered pathway is needed that can guide oncology and professionals in efficient assessment of an individual's condition and enable personalized referrals to scalable lifestyle interventions depending on the individual needs, informed from their own patient-generated data.









Study Schema

Breast, prostate and colon cancer survivors
Baseline Assessments (n = 300)

1:1

Intervention Group (Risk stratification)

rication

Text SMS
Prescription Pad
Website-Newsletter

Low Needs

Moderate Needs

Low Need +
Synchronous in
person exercise
virtual nutrition
courses

High Needs

Low Need +
One on one Dietitian
+
Ex. Physiologist

Control Group (Usual care)

Sylvester Support Services

FitBit + My Wellness Research

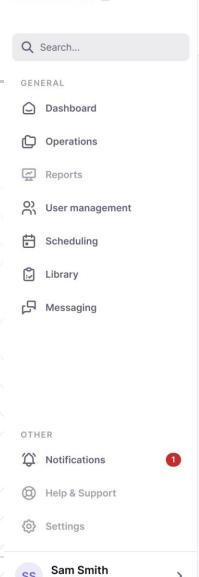
24 week Assessment post intervention

24 week Assessment post intervention

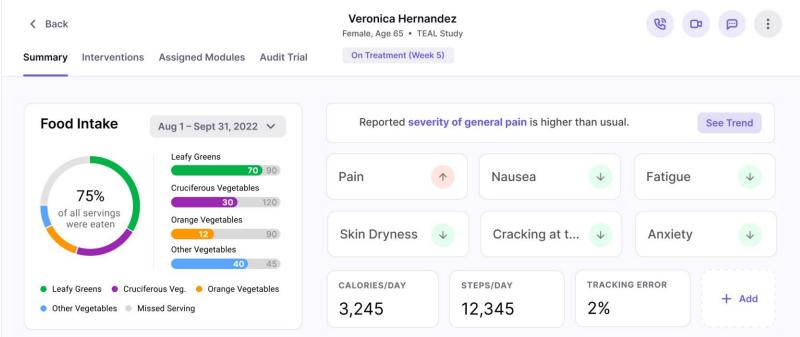




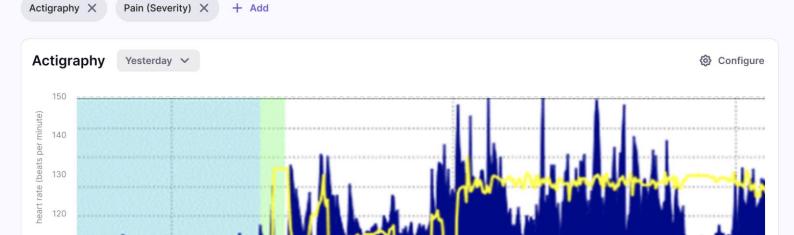




Admin









Exercise, Diet, and Weight Management During Cancer Treatment: ASCO Guideline

- Recommend regular aerobic and resistance exercise during active treatment with curative intent and may recommend preoperative exercise for patients undergoing surgery for lung cancer
- Neutropenic diets are not recommended to prevent infection in patients with cancer during active treatment
- Evidence for other dietary and weight loss interventions during cancer treatment was very limited
- Special considerations, such as exercise in individuals with <u>advanced cancer</u>, and highlights the <u>critical need for more research</u> in this area, particularly <u>regarding diet and weight loss interventions during cancer treatment</u>.



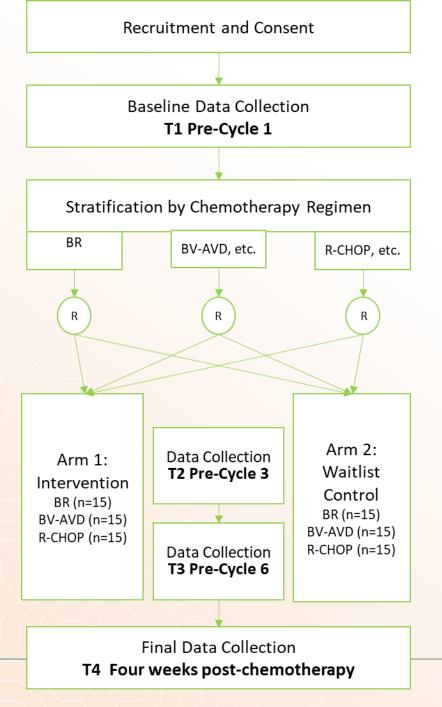


- Newly diagnosed patients with lymphoma starting treatment (n = 120)
- Primary: Reduce toxicities
- Secondary: body composition, metabolomics, PROs
- MPI: Crane/Moskowitz
- Funding: V-Foundation DT2023-008



- Newly diagnosed women with ovarian cancer starting chemotherapy (n = 200)
- Primary: Relative Dose Intensity
- Secondary: PROs, body composition
- MPI: Crane/Irwin
- Funding: NCI U01CA271278





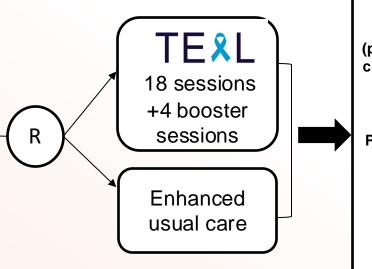


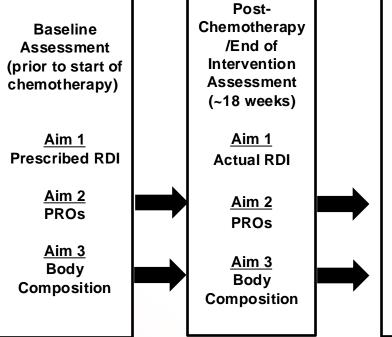




Trial of Exercise And Lifestyle (TEAL) in women with ovarian cancer

Women newly diagnosed with ovarian cancer with curative intent chemotherapy as part of care plan (n=200)





Assessment

<u>Aim 4</u>

12 months

Post

Diagnosis

Aim 4
Diet, Exercise,
PROs, CT
scans, EMR
review of
additional tx
and
healthcare
utilization

Neoadjuvant Chemotherapy:

- 3 cycles chemotherapy prior to surgery
- Surgery
- 3 cycles chemotherapy

Adjuvant Chemotherapy:

- Surgery
- 6 cycles chemotherapy







Medical Nutrition Therapy and Exercise Intervention

Nutrition Goals





- Combination of ≥5 servings of vegetables + fruits per day
- ≥ 25 grams of fiber per day
- Adequate protein 1.2 -1.5g/kg body wt
- ≥64 fl oz of water per day
- Avoid alcohol intake

Exercise Goals



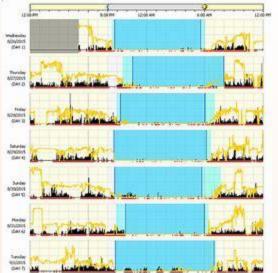
- ≥ 150 min mod or 75 min vig intensity physical activity per week
- Twice weekly strength training
- Reduce sedentary time
- Encourage 10,000 steps per day



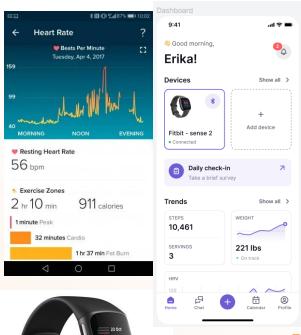


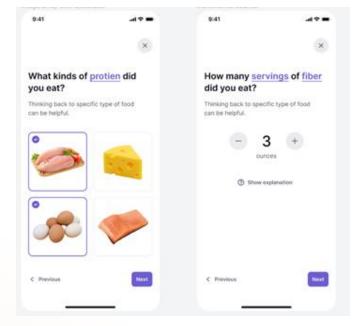


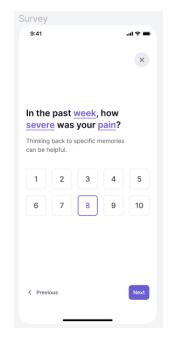
















Wellness Research





EXERCISE AND NUTRITION FOR OLDER CANCER SURVIVORS AND THEIR CAREGIVERS

- Older survivors (≥65 years) who have completed treatment for breast, prostate, colon and prostate cancer and support person (n = 764 dyads)
- MPI: Crane/Dieli-Conwright
- Primary: Physical Function and Cognition
- Secondary: PROs, Dyadic Interdependence
- Funding: PCORI



VS.







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Exercise Foundations for Cancer Survivors



Low Impact 10-Minute Aerobic Workout for Cancer Survivors



20-Minute Full Body Workout with Bands for Cancer Survivors



20-Minute Full Body Circuit Training with Dumbbells for Cancer Survivor









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Calling All Cancer Survivors

Join Our Complementary Training Program To Get Ready For THE DOLPHINS CHALLENGE XIV







2 LOCATIONS Miami & Broward

STARTING September 23rd

YOU CAN Walk, Run or Bike Register Now cranelab@med.miami.edu













Key Points

Variety of ways to manipulate dietary intake and daily activity

Patients are interested and want to know more

Rigorous testing of these behaviors are needed





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Thank you

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