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PERSONAL FITNESS

Said the Doctor to the Cancer Patient: Hit the Gym

By [ANAHAD O'CONNOR](#)

AS the group of women trickled into the aerobics studio at the Bendheim Integrative Medicine Center in Manhattan on a recent Thursday morning, there were subtle signs that this was no ordinary fitness class.

One woman told the instructor that she had missed a string of previous classes because she was grappling with fatigue, a side effect of her new [cancer](#) medication. Others wore colorful wraps on their arms, containment sleeves meant to protect against [lymphedema](#), a painful [swelling](#) of the arm stemming from [breast cancer](#) surgery.

Sponsored by [Memorial Sloan-Kettering Cancer Center](#), this class for cancer patients has been around for some time, mostly in a league by itself. But in recent years, following studies that found exercise to be beneficial in combating the effects of cancer, the class has gained some company.

Gyms and fitness centers have begun stepping in to meet a small but growing demand for programs designed to not only hasten recovery but to address the fatigue of [chemotherapy](#), the swelling of lymphedema and the loss of muscle tone.

There have always been athletically inclined patients who stayed active, even competitive, in the wake of a diagnosis. A recent high-profile example is Eric Shanteau, an American Olympic swimmer who decided to put off testicular-cancer surgery until he had competed in Beijing.

But most of the roughly 10 million cancer survivors in the United States are not amateur Lance Armstrongs. Many, though, are inspired by celebrities like Mr. Armstrong, seeing them as models for how to come out on the other side of often-debilitating treatment regimens.

A new program from the [Y.M.C.A.](#), in partnership with the [Lance Armstrong](#) Foundation, offers cancer fitness classes at more than a dozen Y's in 10 states. At the women's gym Curves International, researchers from Fox Chase Cancer Center in Philadelphia are looking at whether overweight breast-cancer patients can keep to a five-day-a-week Curves routine for six months. And survivors are organizing their own classes.

“There used to be this understanding that if you're getting treatment you're supposed to be in your bed,” said Pam [Whitehead](#), an architect and survivor of [uterine cancer](#) who started the Triumph Fitness Program at gyms in Modesto and West Sacramento, Calif.

In some cases, oncologists are prescribing exercise, gently prodding patients to tackle whatever activity they can manage: light walking, simple stretches, exercise with resistance bands.

“I started in 1992 and that was really a time when not as many patients were exercising,” said Dr. Alexandra Heerdt, a breast surgeon at Sloan-Kettering who is conducting a pilot program involving exercise. “If a patient came to me back then and asked about exercise, I would have said there wasn’t really any information.”

But now, she added, “they have a lot of options.”

Wendy Rahn, 46, an associate professor of political science at the [University of Minnesota](#), knows this well. After a double [mastectomy](#), her shoulders hurt so much that she was often hunched in pain. Then, while researching her illness, she discovered a 2005 study on cancer and exercise.

“The effects — what we call effect sizes in statistical research — were enormous,” she said, “and I was like ‘How come no one is talking about this?’ ” She had given up exercise a decade earlier, but the study inspired her to go back to the gym.

“I started feeling so much better,” she said. “And it struck me that if I’m feeling this good, then every cancer survivor should.”

So she founded a nonprofit group called Survivors’ Training, and in January opened a fitness studio in White Bear Lake, Minn., offering yoga, strength training, Pilates and Nia, which combines dance and martial arts. “I like to think of it as a support group that moves,” she said.

Cancer experts say the shift in thinking began in the mid-1980s, coinciding with a greater awareness of health and fitness. Oncologists were faced with questions about exercise that they had never heard before: how much was allowable and when?

Scientists also took notice of studies showing that those who were physically active and eating well were less likely to develop cancer. They then asked what impact exercise and [diet](#) would have on those with the disease, said Dr. Charles Fuchs, an oncologist at the Dana-Farber Cancer Institute in Boston who studies cancer and exercise.

In the last eight years, a dearth of research has become a flood of studies. Among them is one sponsored by the [National Cancer Institute](#) in 2006 that looked at the effects of moderate exercise on groups of breast and [prostate cancer](#) patients undergoing [radiation therapy](#) for six weeks.

Those assigned to a daily program — taking walks of increasing distance and doing exercises with a resistance band — had less fatigue, greater strength and better aerobic capacity than those who were not instructed to exercise. This finding, and similar ones, has been replicated many times.

Other studies indicate that moderate exercise has additional benefits like strengthened immune function and lower rates of recurrence. Studies at Dana-Farber found that nonmetastatic [colon cancer](#) patients who routinely exercised had a 50 percent lower mortality rate during the study period than their inactive peers, regardless of how active they were before the diagnoses.

Dr. Fuchs, a study author, said it influenced his advice. “I am counseling all of my patients to increase their activity,” he said, “or if they were regularly exercising before their diagnosis, to continue.”

But every recommendation has its caveats. There will be days during treatment when meaningful activity is not possible, oncologists say, and that's fine. The [American Cancer Society](#) promotes moderate exercise but encourages patients to discuss their exercise plans with their oncologists, and lists on its Web site 13 precautions ([cancer .org/docroot/MIT/MIT_o.asp](http://cancer.org/docroot/MIT/MIT_o.asp)).

In the biweekly Focused Fitness class at the Bendheim Integrative Medicine Center in New York, the instructor, Donna Wilson, seeks to ease her charges back into exercise after, and often during, physically draining treatments.

Arm extensions and other range-of-motion exercises that can help relieve lymphedema were first on the agenda on a recent morning, followed by heart-pumping lunges and core exercises. A woman who had breast cancer slogged through a set of isometric exercises. "It looks easy," she said, "but try keeping your arms up all the time when your nerves have been cut."

Ms. Wilson, a [registered nurse](#), encouraged the woman to keep pushing. Then she looked at the class and turned to a visitor. "They're amazingly strong," she said.

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