

Impact of pain, fatigue and dyspnoea on everyday activities in people with advanced cancer: A cohort study

REHPA

The Danish Knowledge Centre
for Rehabilitation and
Palliative Care

Marc Sampedro Pilegaard^{1,2}, Karen la Cour¹, Åse Brandt², Mario Lozano-Lozano^{3,4,5}, Lisa Gregersen Oestergaard^{2,6,7}

- 1. REHPA, The Danish Knowledge Centre for Rehabilitation and Palliative care, Odense University Hospital, 5800 Nyborg, Denmark
- 2. The Research Initiative of Activity Studies and Occupational Therapy, Research Unit of General Practice, Department of Public Health, University of Southern Denmark, 5000 Odense C, Denmark
- 3. The Department of Physical Therapy, University of Granada, Spain
- 4. The "Cuidate" Support Unit for Oncology Patients (UAPD), Granada, Spain
- 5. The Sport and Health Joint University Institute (IMUDS), Granada, Spain
- 6. Department of Physiotherapy and Occupational Therapy, Aarhus University Hospital, 8000 Aarhus C, Denmark
- 7. Centre of Research in Rehabilitation (CORIR), Aarhus University Hospital and Aarhus University, 8000 Aarhus C, Denmark

INTRODUCTION

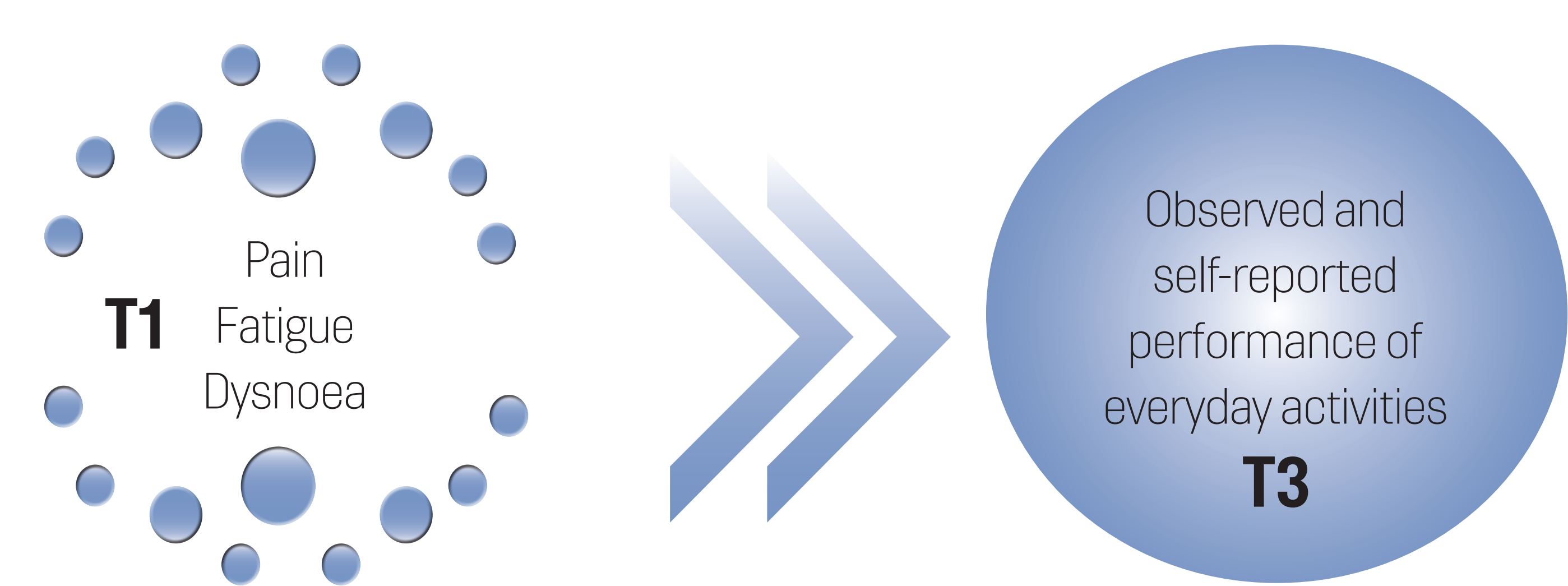
- People with advanced cancer value to continue performing their everyday activities because this gives them better quality of life.
- They often experience high levels of pain, fatigue and dyspnoea, and many interventions address these symptoms with an eye to improving their everyday activities.
- Yet, it is not known whether these symptoms actually impact everyday activities over time.

AIM

- To study impact of pain, fatigue and dyspnoea on performance of everyday activities over time.

METHODS

- Cohort study including 242 people with advanced cancer assessed at baseline (T1) and after 12 weeks (T3).
- Mixed linear models were performed, and p values below or at 0.05 were considered statistically significant.



RESULTS

Exposure	Observed motor performance T1-T3 [95 % CI]	p value	Observed process performance T1-T3 [95 % CI]	p value	Self-reported performance T1-T3 [95 % CI]	p value
Pain:		p=0.01*		p=0.17		p=0.85
No problem	-0.24 [-0.37 to -0.12]		-0.14 [-0.22 to -0.05]		-1.08 [-1.94 to -0.22]	
Moderate problem	-0.06 [-0.23 to 0.10]		-0.01 [-0.13 to 0.10]		-1.14 [-2.15 to -0.12]	
Severe problem	0.09 [-0.09 to 0.27]		-0.04 [-0.16 to 0.09]		-1.12 [-2.20 to -0.05]	
Fatigue:		p=0.98		p=0.21		p=0.28
No problem	-0.08 [-0.27 to 0.11]		-0.06 [-0.19 to 0.07]		-1.43 [-2.87 to 0.00]	
Moderate problem	-0.13 [-0.26 to -0.00]		-0.04 [-0.12 to 0.05]		-1.47 [-0.25 to -0.68]	
Severe problem	-0.12 [-0.28 to 0.04]		-0.16 [-0.27 to -0.05]		-0.47 [-1.41 to 0.47]	
Dysnoea:		p=0.22		p=0.29		p=0.10
No problem	-0.08 [-0.20 to 0.05]		-0.07 [-0.16 to 0.01]		-1.75 [-2.57 to -0.92]	
Moderate problem	-0.24 [-0.40 to -0.07]		-0.14 [-0.26 to -0.03]		-1.14 [-2.17 to -0.12]	
Severe problem	-0.04 [-0.23 to 0.15]		-0.01 [-0.14 to 0.12]		-0.01 [-1.10 to 1.08]	

CONCLUSION

- Only pain had a statistically significant impact on observed performance of everyday activities over time.
- Participants with no pain problems experienced the largest decrease in everyday activities.
- Pain, fatigue and dyspnoea did not seem to impact performance of everyday activities.

The authors have no conflicts of interests.

