Exercise and the Breast Cancer Survivor: The Role of the Nurse Practitioner

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Background: Patients with cancer are living longer with their disease and have improved survival rates because of early detection and more effective cancer treatments. Lifestyle modification and exercise improve clinical outcomes in breast cancer survivors.

Objectives: Exercise has important implications for the survivor and should be integrated into the aftercare trajectory of survivorship.

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Methods: A literature review of articles published from 2002–2014 was conducted using the key words cancer survivor, survivorship, breast cancer, collaboration, and exercise. PubMed, Cochrane Database of Systematic Reviews, and CINAHL® databases were searched.

Findings: Nurse practitioners can build an environment to motivate patients to exercise, empowering them to be active participants in their own survivorship care. Collaboration is necessary to ensure that healthy lifestyle choices, including exercise, are being discussed and implemented in survivorship care plans to help optimize patient outcomes.

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urse practitioners (NPs) are key figures in the coordination and collaboration of cancer survivorship care. They can bridge the gap and ensure coordination of care between cancer specialists and primary care providers (PCPs) to ensure quality care once active treatment is completed. Survivors often encounter changes in physical activity along with anxiety and depression, fear of cancer recurrence, and increased risk for chronic conditions (Cooper, Loeb, & Smith, 2010; de Moor et al., 2013; Ellsworth, Valente, Shriver, Bittman, & Ellsworth, 2012). Lifestyle modifications and exercise can improve clinical outcomes in the breast cancer survivor, and NPs are integral to build environments motivating patients to exercise and supporting them in their choice of exercise. This article examines the background of cancer survivorship, exercise and its importance in breast cancer, and the coordination and collaboration of breast cancer survivors through survivorship care plans (SCPs).

Background

Early detection of cancer and its treatment has made an impact on patients' outcomes (National Cancer Institute [NCI],

n.d.; Parry, Kent, Mariotto, Alfano, & Rowland, 2011). Based on data gathered from 2006-2010 (NCI, n.d.), roughly 41% of men and women will be diagnosed with some kind of cancer during their lifetime. The American Cancer Society ([ACS], 2015) reports that breast cancer is the most common cancer in women, with an incidence of one in eight. ACS (2015) estimates that 231,840 women will be diagnosed with invasive breast cancer in 2015, and more than 40,000 will die. More than 2.8 million women in the United States are breast cancer survivors (ACS, 2015).

This increase in cancer diagnoses during the lifespans of survivors is attributed to improved survivorship rates, resulting from advances in early detection and improved cancer treatment and the increase in the average age of the population (Parry et al., 2011). Cancer incidence increases with age, leading to a larger portion of the general population diagnosed with cancer. An estimated 66% of cancer survivors will be 65 years or older by 2020 (de Moor et al., 2013).

In 2005, the Institute of Medicine (IOM) report, From Cancer Patient to Cancer Survivor: Lost in Transition, found gaps in the coordination of care in the post-treatment phase of the cancer care trajectory (Hewitt, Greenfield, & Stovall, 2005). The