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Contribution ID: 331

Type: 3 - Talk

Effects of supervised aerobic and resistance exercise on quality of life in men with metastatic prostate cancer: Results from the INTERVAL-GAP4 trial

Thursday 23 July 2026 16:15 (15 minutes)

Background: Many studies demonstrate exercise is an effective adjunct therapy for prostate cancer, however, limited research has focused on metastatic prostate cancer. The current study examined the effects of supervised exercise on quality of life (QoL) in men with advanced prostate cancer.

Methods: In this multinational, randomized controlled trial, men with metastatic prostate cancer were assigned to either a supervised exercise group receiving 96 weeks of supervised high-intensity aerobic and resistance training or a self-directed exercise group receiving exercise recommendations. QoL was assessed every three months using the EORTC QLQ-C30 and the EPIC-26. Adjusted linear mixed models were used for statistical analyses.

Results: A total of 145 men with metastatic castrate-resistant or hormone-sensitive prostate cancer were randomized to supervised exercise (n=75) or self-directed exercise (n=70). Median intervention adherence to supervised exercise was 84% (IQR: 61%,95%). Baseline global health status scores were 71.5 ± 19.2 in the supervised exercise group and 72.1 ± 17.2 in the self-directed exercise group. Supervised exercise compared to self-directed exercise showed a statistically significant overall beneficial effect across 96 weeks on global health status (adjusted between group difference = 4.8; 95% CI = 1.0 to 8.5; $p=0.02$) and a trend toward beneficial effects on emotional functioning ($p=0.08$) and role functioning ($p=0.10$). There was also a trend toward a time-by-group interaction for cognitive functioning ($p=0.08$) with significantly higher scores in the supervised exercise group at 15 months ($p=0.004$). There were no other significant overall or interaction effects, although several other QoL domains showed intermittent between-group differences favoring the supervised exercise group.

Conclusion: Supervised high-intensity aerobic and resistance exercise compared to self-directed exercise produced modest and sporadic improvements in some QoL measures over a 2-year intervention in men with advanced prostate cancer. These findings provide additional evidence supporting the integration of structured exercise into supportive care for this patient population.

Keywords

Prostate cancer, Exercise therapy, Quality of life, and Randomized controlled trial

Conflict of Interest & Ethical Approval

yes

Abstract submitters declaration

yes

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Session Classification: Oral Session