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Contribution ID: **197** Type: **1 - Scientific Poster**

# Innovations in Supportive Cancer Care: Cost-Effective Integration of Exercise Oncology into Radiotherapy Care

*Thursday 23 July 2026 12:20 (5 minutes)*

Purpose/Objective
To evaluate the value and cost-effectiveness of two exercise oncology implementation models within radiotherapy care. The study aimed to determine whether embedding accredited exercise physiologists (AEPs) in cancer clinics improves patient quality of life and represents value for money compared to standard care.
Material/Methods
A mixed-methods design was employed across eight GenesisCare sites in Western Australia. Patients undergoing radiotherapy engaged in one of the following exercise programs: 1) Co-located exercise model (i.e. onsite gym and AEP consult); 2) Home-based exercise model (i.e. AEP consult and home-based program design with follow-up); 3) Control (i.e. no structured exercise program). Qualitative data were collected via interviews and focus groups with patients and radiation oncologists to explore experiences and perceived value. A cost-effectiveness analysis from an Australian healthcare-payer perspective was conducted using patient-level data. The primary outcome was cost per quality-adjusted life-years (QALYs).
Results
Patients strongly valued exercise as part of routine cancer care, citing improved control, tailored support, and consistent messaging. Radiation oncologists endorsed exercise benefits but noted limited service availability as a barrier. Provider feedback highlighted enhanced patient engagement and satisfaction when exercise services were integrated into treatment pathways. Health-Related Quality of Life trends showed sustained improvement in the co-located group, modest gains in the home-based group, and decline in controls. Cost-effectiveness analysis demonstrated the co-located model was cost-effective at $29,291 (AUD)/QALY gained.
Conclusion
Embedding AEP-led exercise programs within radiotherapy clinics improves patient quality of life and is cost-effective compared to standard care. Findings support scaling integrated exercise oncology services to enhance patient outcomes and deliver value for money. Broader implementation could inform policy and create employment opportunities for exercise professionals, advancing sustainable cancer care models.

## Keywords

health economics, exercise, implementation, cancer

## Conflict of Interest & Ethical Approval

yes

## Abstract submitters declaration

yes

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**Session Classification:** Thematic Poster Session