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Exercise in Oncology: Variations in Clinical Practice and Barriers by Professional Role and Years of Experience in Latin America

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Background: Exercise is an important component of cancer care, yet physicians' engagement in assessment, referral, and prescription varies widely. Understanding how physician characteristics influence these practices, and the barriers they report, is essential to improving exercise implementation in oncology.

Methods: A cross-sectional survey was conducted among physicians from 21 Latin American countries. Exercise-related practices and perceived barriers (classified as low, moderate, or high impact) were compared by professional role and years of experience using chi-square tests.

Results: Among 454 respondents, oncologists reported higher engagement in exercise assessment (69.2% vs. 35.4%), referral (51.1% vs. 27.5%), and prescription (72.9% vs. 36.5%) compared with other specialties. Years of experience showed a graded effect: physicians with >10 years of experience reported the highest rates of assessment (64.8%), referral (45.2%), and prescription (74.1%), while those with <5 years reported the lowest. Significant differences in perceived barriers were observed by both experience and professional role. Physicians with >10 years of experience were more likely to report high impact barriers related to fatigue ($p=0.018$), emotional symptoms ($p=0.040$), social limitations ($p=0.003$), lack of motivation ($p=0.010$), and lack of evidence ($p=0.001$). Less experienced physicians (<5 years) reported higher rates of "not knowing how to prescribe exercise" ($p=0.034$). By specialty, oncologists were significantly more likely to report high-impact barriers related to patients' lack of motivation ($p=0.003$), lack of qualified professionals ($p=0.003$), and lack of information about exercise resources ($p=0.001$).

Conclusions: For our knowledge, this is the first effort to understand Latin American physicians' practice on exercise oncology. Physician characteristics, both professional role and years of experience, shape not only how exercise is integrated into care but also which barriers they perceive as most limiting. Tailored strategies are needed: early-career clinicians may benefit from training on exercise prescription, while more experienced oncologists may require support addressing patient-level barriers and resource limitations.

Keywords

Exercise, Latin America, Clinical Practice

Conflict of Interest & Ethical Approval

yes

Abstract submitters declaration

yes

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