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# Does a Multidisciplinary Prehabilitation and Rehabilitation Program Improve Anxiety and Depression in Patients Undergoing Colon Cancer Resection? Preliminary Results from the ONCOFIT Randomized Controlled Trial

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## Background

Colon cancer is the fifth most common type of cancer worldwide. Its diagnosis and treatment impose substantial physical and psychological stress, frequently leading to anxiety and depression rates that exceed those observed in the general population. These conditions negatively affect postoperative outcomes and quality of life, with effects that may persist during and after treatment. Although non-pharmacological strategies are increasingly recognized as useful complementary approaches, it remains unclear whether a multidisciplinary prehabilitation and postoperative rehabilitation program can improve mental health in patients undergoing colon cancer resection.

## Objective

To examine the effects of a multidisciplinary prehabilitation and rehabilitation program on depression and anxiety symptoms in patients undergoing colon cancer resection.

## Methods

This preliminary analysis of the ONCOFIT randomized controlled trial included 89 patients scheduled for colon cancer resection. They were assigned to an usual care group or to a multidisciplinary prehabilitation and postoperative intervention group which consisted of (i) supervised concurrent exercise training, (ii) dietary behavior changes, and (iii) psychological support. The Hospital Anxiety and Depression Scale was administered at diagnosis, before surgery (after 4 weeks of prehabilitation), and 12 weeks after surgery.

## Results

Postoperatively, the intervention group exhibited a reduction in anxiety symptoms (change: -1.2; 95% CI: -2.2 -0.2;  $P < 0.05$ ), although no significant between-group differences were observed (mean difference: -1.1; 95% CI: -2.6 0.4;  $P > 0.05$ ). Regarding depression, a significant between-group difference favoring the intervention group was observed preoperatively (mean difference: -1.5; 95% CI: -2.9 -0.1;  $P < 0.05$ ). Postoperatively, both groups showed significant reductions (Intervention: -0.1; 95% CI: -1.5 1.4;  $P < 0.01$ ; Control: -2.5; 95% CI: -3.5 -1.5;  $P < 0.01$ ), but no significant differences were detected between them.

## Conclusions

This preliminary evidence suggests that the multidisciplinary prehabilitation and rehabilitation implemented program may help mitigate depressive symptoms in patients undergoing colon cancer surgery, although it does not appear to produce a significant effect on anxiety.

## Keywords

colon cancer, mental health, prehabilitation and rehabilitation

## Conflict of Interest & Ethical Approval

yes

## **Abstract submitters declaration**

yes

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