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Feasibility and implementation of digital cancer rehabilitation in South Baltic Countries - Study protocol and preliminary results from the AMBeR eRehab study

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Introduction

Research in exercise oncology has consistently provided evidence supporting the integration of exercise into all phases of cancer care but less is known about how this can be implemented across patient groups, geographical borders and health care systems. This study, part of the Interreg South Baltic Program-funded project “AMBeR”(Advanced Modelling of Baltic E-cancer caRe), aims to evaluate the feasibility and implementation of digitally supported physical rehabilitation during and after systemic cancer treatment in five Baltic Sea countries (DK, SWE, GER, POL, LTU).

Methods

This international, multicenter, prospective study includes two single-arm feasibility trials (“early rehab” and “rehab@home”). Each participating site targets enrollment of 30 patients in each arm, in total 300 adult cancer patients. Feasibility assessment includes recruitment rate and acceptability (patients’ and physiotherapists’). Implementation assessment includes evaluation of Reach, Effectiveness, Adoption, and IMplementation (REAIM). Non-participant information will be analyzed regarding demographics and reason for refusal. Each site uses digital rehabilitation solution available in their country.

Results

Recruitment started for the first site in October 2024 and is expected to end in May 2026. Until now, 109 and 80 patients have been enrolled in the early rehab and rehab@home arms respectively. At the conference we will present preliminary results for feasibility and reach, including referral and recruitment patterns, e-health literacy, and the differences between participants and decliners in terms of anthropometrics, socio-demographics, clinical characteristics and reasons for declining.

Discussion

Personalized digitally supported physical rehabilitation has the potential to overcome barriers in integrating exercise in oncology. However, unbalanced implementation may increase inequity in cancer rehabilitation rather than reducing it, if improvements are unavailable for patients with fewer resources. In this report we present reach and feasibility of implementation across 5 South Baltic countries.

Keywords

Cancer rehabilitation, Quality of life, implementation, remote digital intervention

Conflict of Interest & Ethical Approval

yes

Abstract submitters declaration

yes

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