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Feasibility of Live Remote Exercise for Adults with Advanced Cancer and Cachexia: Results from the ACE Trial

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Background: Cancer cachexia is a debilitating syndrome in advanced cancer, characterized by reduced physical function, high symptom burden, poor quality of life (QOL), and shortened survival. Despite the prevalence of cancer cachexia, supportive care options remain limited. Exercise is recommended in oncology, yet few trials have specifically targeted patients with advanced cancer and cachexia, and access to supervised programs is scarce. Methods: The Advanced Cancer and Cachexia Exercise (ACE) Trial was a two-arm, phase II randomized controlled trial evaluating an 8-week, live remote, tailored aerobic and resistance exercise intervention (3 sessions/week, 30-45 minutes) combined with post-exercise protein supplementation versus usual care. Adults with metastatic or locally advanced cancer meeting international criteria for cancer cachexia were enrolled. Primary outcomes were feasibility (recruitment >40%, adherence >66%, attrition <40%, safety: 0% serious adverse events) and acceptability. Secondary outcomes included physical function (e.g., 30-s sit-to-stand), body composition, physical activity, QOL, fatigue, cachexia-related symptoms, and psychological outcomes. Results: Thirty-three participants were randomized (male n=17, 52%, age (mean \pm SD): 63 \pm 12 years), and all feasibility benchmarks were achieved. Acceptability for the live remote format was high, with a strong willingness to continue exercising and to recommend the program to others. While no significant between-group differences were observed, participants randomized to the exercise intervention demonstrated greater clinically meaningful improvements in several patient-reported outcomes and superior gains in 30-s sit-to-stand performance over time (Δ 3.1, 95% CI: 0.4–5.8). Conclusions: Live remote, tailored exercise is feasible and acceptable for adults with advanced cancer and cachexia. Preliminary benefits in physical function and patient-reported outcomes support progression to a phase III trial and highlight the potential role of exercise in cancer cachexia care.

Keywords

Cachexia, Telehealth, Exercise, Metastatic Cancer

Conflict of Interest & Ethical Approval

yes

Abstract submitters declaration

yes

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