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A phase II randomised controlled basket feasibility trial of a personalised, remote-delivered exercise programme on disease-free survival among early-stage, high-risk cancers in Yorkshire: CANFit study in progress

Purpose
Lung, breast, and bowel cancers account for ~40% of new UK cancers and 38% of cancer-related deaths. Despite advances in diagnosis and treatment, an urgent unmet need to improve recovery from cancer treatments remains. Evidence suggests a 38% risk reduction in breast and bowel cancer-specific mortality with exercise, yet most is observational. More clinical trials are needed to build robust evidence for exercise's impact on recurrence and survival.

Methods
This UK-based, multicentre randomised controlled basket feasibility trial compares personalised, remote-delivered exercise programmes supported by trained exercise professionals against usual care (ISRCTN97662203). Participants were eligible if aged ≥18, diagnosed with high-risk early-stage breast, bowel, or lung cancer, and within 24 weeks of completing primary curative treatment. Consented participants completed objective measures of physical function (submaximal cardiovascular fitness, endurance, strength, balance), body composition (bioelectrical impedance), and self-reported outcomes (physical activity, sleep quality, general and cancer-specific QoL, exercise confidence and motivation). The 12-week programme is delivered remotely, with trainer contact tapering over a further 12 weeks (24 weeks total). Hospital case-note review provides disease-free survival outcomes at 6, 12, and 24 months. Recruitment closed 29 May 2026, with 64 participants randomised.

Analysis
Descriptive statistics will be reported for feasibility outcomes: recruitment, adherence, retention, data quality, adverse events, acceptability, and fidelity. Due to recruitment, survival will be summarised with descriptives at 24 months. Secondary outcomes (physical function, general and cancer-specific QoL, determinants of meeting activity guidelines) will be reported at each timepoint. Process evaluation will provide in-depth understanding of what worked and what needs improvement.

Implications
Though recruitment targets were not met, this trial can strengthen evidence for exercise as a complementary cancer treatment to improve outcomes in those at higher risk of recurrence and will inform future delivery of personalised exercise as standard cancer care.

Keywords

personalisation, feasibility, basket trial, process evaluation

Conflict of Interest & Ethical Approval

yes

Abstract submitters declaration

yes

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