Changes in working ability and sports activity related to treatment modalities and long-term symptoms among women treated for breast cancer

Lise Kronborg, Physioterapist Msc,
Clinic of Occupational- and Physiotherapy, Rigshospitalet.
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Relations between treatment modalities, long-term symptoms and self-reported change in working ability and sports activity among women treated for breast cancer: a cross-sectional study


- Kronborg, Lise; Rigshospitalet; Gärtner R; Rigshospitalet. S. A. Andersen B; Metropolitan University College Copenhagen. Kroman N; Rigshospitalet. Høgdal N; Rigshospitalet. Kehlet H; Rigshospitalet.
Purpose

To study correlations between treatment modalities, long-term treatment effects and self-reported changes in working ability and sports activity among Danish women 2-3 years after treatment for breast cancer in 2005-2006.
• Every year 4000 women are treated for breast cancer in Denmark.

• A following affection of shoulder-arm function is well-known and documented but does it also affect the ability to work as usual?

• Only few studies in the literature describe relations between treatment for breast cancer and working ability.

• Studies on return to work (RTW) describe a tendency of increased prolonged RTW and a decrease in full RTW in the period 2002-2008 with breast cancer patients returning as the last of 4 cancer groups (median 30 weeks).

(Roelen, 2011, Cavanna, 2011, Cooper, 2012)
Material and method

• **2350** working, Danish women treated for breast cancer in 2005-2006.

• **Age 25-69 years** (mean 54.3 years, SD 9.1)

• **Method**: Questionnaire survey in 2008. Response rate 88% in the total study.

• **Results**: Mapping of to which extent self-reported changes in working ability and sports activity is found among Danish women treated for breast cancer.
Results – Sports activity

- 1 in 5 women (22%, n=510) reply that treatment has affected their sports activity 2 years after surgery.

- Treatment with mastectomy increased the risk with 30% (OR 1.30; CI: 1.11-1.66, p=0.003)

- Age – no relation to changes in sports activity
Results – Working ability

• 1 in 3 women (30%, n=716) reply that treatment has affected their working ability.

• Age was related to an increased risk of reporting a changed working ability by OR $1.05 = 5\%$ per year younger.

• Treatment was related to an increased risk of reporting changed working ability by:
  • *Chemotherapy* OR $1.89$
  • *Axillary dissection* OR $2.08$

• Long-term treatment effects was related to an increased risk of reporting changed working ability by:
  • *Heaviness/swelling* OR $2.35$
  • *Pain* OR $2.15$
  • *Sensory disturbances* OR $2.08$
The Black Box

Diagnose → Controlled treatment course → Rehabilitation
Conclusion

• Increased risk of reporting a change in working ability:
  • Younger age, axillary dissection, chemotherapy
  • Heaviness/swelling, pain, sensory disturbances
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