Energy for Living With Cancer®: Preliminary Findings of a Cancer Rehabilitation Group Intervention Study

Sandra Holley, PhD, ARNP, AOCN®, and Deborah Borger, MS, RN, AOCN®

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Purpose/Objectives: To evaluate the acceptability and efficacy of a rehabilitation group intervention for people with cancer experiencing cancer-related fatigue (CRF) and examine the effects of the program on CRF distress, quality of life (QOL), and depression.

Design: Prospective, pre-/post-test intervention.

Setting: An outpatient area of a 551-bed tertiary-care community hospital in the southeastern United States.

Sample: 20 participants have completed the program in four different groups. The preliminary mean age was 63.6 (range = 38–86). These participants had six different types of cancers, and 15 patients were receiving some form of cancer therapy during their participation in the program.

Methods: After providing informed consent, participants completed the Cancer-Related Fatigue Distress Scale, the Center for Epidemiological Studies–Depression, the Functional Living Index–Cancer, and a demographic information form. The intervention consists of eight weekly, 90-minute sessions with educational and sharing components. At the eighth session, participants were asked to complete the three instruments plus a program evaluation.

Main Research Variables: CRF distress, depression, QOL.

Findings: Preliminary results indicate that the program provided information, support, and management strategies for CRF. The mean for the program evaluations overall was 9.8 (0–10 scale, range = 9–10). Statistically significant differences were found for pre- and post-test fatigue distress and QOL scores.

Conclusions: Preliminary findings indicate that this intervention is appropriate and beneficial for patients with cancer experiencing fatigue, even for those patients who are very debilitated.

Implications for Nursing Practice: The program can be used as a rehabilitation program to help people with cancer to manage the sequelae of their illness and treatments.

Key Points . . .

- A growing population of people with cancer are achieving long-term periods of remission, survival, and even cure, so cancer rehabilitation is becoming even more important.
- Many people with cancer experience physical, social, physiologic, psychological, and cognitive distress as a result of their cancer-related fatigue.
- Cancer-related fatigue has been documented as a problem up to four years after cancer treatment.

More than 8 million people are living with cancer. People with cancer have identified fatigue as a major symptom that causes them distress as they experience cancer and its treatment sequelae (Dean et al., 1995; Driever & McCorkle, 1984; Kurtz, Kurtz, Given, & Given, 1993; Pickard-Holley, 1991). Literature on cancer-related fatigue (CRF), distress, quality of life (QOL), depression, support groups, and rehabilitation in people with cancer and previous work conducted by the principal investigator were used as the background and rationale for the rehabilitation group intervention (Holley, 2000a). This article reports the preliminary findings of the first 20 participants of an ongoing cancer rehabilitation group intervention project.

Background and Literature Review

Fatigue is a phenomenon characterized by increased feelings of discomfort and by decreased functional status. Both are related to decreased energy. Factors and dimensions that may be involved are physical, mental, emotional, environmental, physiologic, and pathologic—plus a voluntary component (Pickard-Holley, 1991). Fatigue affects cognitive/attentional functions, alters one's expectations, has physical sequelae, and adversely affects one's psychosocial and spiritual self. CRF has been documented as a problem 4–28

Sandra Holley, PhD, ARNP, AOCN®, is a postdoctoral nursing research fellow and a nurse scientist at James A. Haley Veteran's Administration Medical Center and an assistant professor of oncology nursing in the College of Nursing at the University of South Florida, both in Tampa. Deborah Borger, MS, RN, AOCN®, is an oncology clinical nurse specialist at the University Community Hospital in Tampa. *This study was funded, in part, by the Veteran's Administration Postdoctoral Nursing Research Fellowship, funded through the Office of Academic Affairs, Washington, DC; University Community Hospital Foundation, Tampa; and Ortho Biotech Inc., Raritan, NJ. (Submitted December 2000. Accepted for publication June 1, 2001.)*