

# Movement as Medicine: An Action Guide for Cancer Related Fatigue

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## Purpose:

This guide helps nursing and clinical staff develop a personalized exercise plan to help patients with cancer related fatigue, acknowledging that exercise may be the last thing on their mind currently.

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## 1. Why Exercise Matters

Cancer-related fatigue (CRF) is not ordinary tiredness. It's a full-body, sleep-resistant exhaustion that can persist for months- even years. You're not imagining it - and you're not alone. But it *can* be managed.

Exercise is part of treatment - not an add-on. Exercise has measurable biological impact on fatigue, function, and mood. It helps regulate inflammation, preserve strength, and improve recovery outcomes – and is one of the most effective ways to manage fatigue.

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## 2. Redefining Success: Micro-Movements as Therapeutic Dose

You don't need to "exercise." You need to "move".

Even short, simple movements recalibrate fatigue, prevent deconditioning, and support functional independence. But exercise does not need to be strenuous.

Today's Wins Could Be:

- Sitting upright in bed for 10 minutes
- Walking to the kitchen and back
- 5 ankle circles or shoulder rolls
- Stretching arms overhead while seated
- Pacing during a phone call
- Standing during a commercial break

- ✓ Movement doesn't have to be perfect. It just has to happen.
  - ✓ Good days or bad—movement helps both.
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### 3. Core Principles for Movement Integration

#### ✓ Safety-First Screening and Precautions:

- **Absolute contraindications:** Platelets <20K, Hb <8 g/dL, active DVT, uncontrolled pain
- **Relative precautions:**
  - Lymph node dissection → compression + modified upper body load
  - Bone metastases → aquatic or seated non-weight bearing options
  - Neuropathy → seated, stable surface movement

#### 🌀 Personalized Movement Prescription

- **During treatment:**
  - 2–5 min “movement snacks” hourly
  - Isometric holds: wall leans, seated leg presses
- **Post-treatment:**
  - 20-min blocks: tai chi, resistance bands
  - Virtual walking for cognitive/energy recovery

#### 🌀 Dynamic Adjustment Framework

- Fatigue ≤4/10 → Introduce one new movement variation daily
- Fatigue ≥7/10 → Prioritize breathwork, 90/90 hip shifts, positional rotation
- Post-infusion days → Use low-load chair yoga sequences; avoid upright load

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### 4. Functional Movement Tiers

| Capacity Level      | Suggest Movements                           | Duration/ Frequency           |
|---------------------|---------------------------------------------|-------------------------------|
| Bed-bound           | Ankle pumps, diaphragmatic breathing        | 2 minutes hourly, while awake |
| Assisted ambulation | Seated marching, light resistance band rows | 5 minutes, 3x daily           |
| Independent         | Wall push-ups, hallway pacing               | 10 minutes, 2x daily          |

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## 5. Track What Matters: Movement as a Vital Sign

| Metric              | Target                        | Why it Matters                                    |
|---------------------|-------------------------------|---------------------------------------------------|
| Daily Vertical Time | 90–120 min upright/day        | Correlates with 41% lower hospitalization risk    |
| Joint Excursions    | Full ROM x major joints daily | Reduces stiffness, preserves ADL function         |
| Movement Diversity  | ≥3 distinct patterns/day      | Associated with improved energy regulation & mood |

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## 6. Intensity Definitions (Borg RPE scale):

- Low (RPE 2–3): Can talk easily, not winded
- Moderate (RPE 4–6): Breathing heavier, can speak short sentences
- High (RPE 7+): Can't talk comfortably – not recommended unless cleared

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## 7. Custom Plan Builder

Let's build your movement plan—together.

### I will try to move...

☐ \_\_\_ minutes in the morning

☐ \_\_\_ times a day

### My preferred formats:

☐ Short walks

☐ Chair stretches

☐ Bed mobility movements

☐ Breathing / meditation app

☐ Tai Chi or yoga

☐ Other: \_\_\_\_\_

### Interested in referral for:

☐ Physical therapy

☐ Psycho-oncology (CBT)

☐ Mindfulness or movement app based support

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## 8. Sample Weekly Plan - Modify based on current phase of treatment or recovery

| Day       | Activity                                                     |
|-----------|--------------------------------------------------------------|
| Monday    | 20 min walk + 15 min full-body resistance (bands/bodyweight) |
| Tuesday   | 15 min yoga (stretch focus) + balance drills                 |
| Wednesday | 25 min brisk walk or cycle                                   |
| Thursday  | Resistance training + posture/stretching                     |
| Friday    | 30 min aerobic + 5 min balance work                          |
| Saturday  | Active rest: gardening, light hike, yoga                     |
| Sunday    | Rest or light flexibility movement (foam rolling, breathing) |

## 9. Notes and Recommendations

[illegible]

## 10. Phase-Based Sample Movement Protocols

### DURING ACTIVE TREATMENT

**Goal:** Preserve function, reduce fatigue/anxiety, and prevent deconditioning

| Type        | Frequency          | Duration       | Intensity | Sample Activities                                             | Notes / Modifications                                           |
|-------------|--------------------|----------------|-----------|---------------------------------------------------------------|-----------------------------------------------------------------|
| Aerobic     | 3–5 days/week      | 10–30 min/day* | Low       | Short walks, slow stationary bike, step counts                | Break into 5–10 min bouts. Okay to skip when severely fatigued. |
| Resistance  | 1–2 days/week      | 10–15 min      | Very Low  | Sit-to-stand, wall push-ups, resistance bands, grip exercises | Avoid high loads. Focus on large muscle groups.                 |
| Flexibility | 5–7 days/week      | 5–10 min       | Gentle    | Neck rolls, shoulder circles, seated stretches                | Do in morning and evening to ease stiffness.                    |
| Balance     | Optional (2x/week) | 5 min          | Gentle    | Heel-to-toe walk, stand-on-one-leg (near support)             | Especially helpful if neuropathy is present.                    |

#### Cautions:

- Fatigue: prioritize movement windows when energy peaks
  - Neuropathy: seated exercise or supported standing
  - Neutropenia: avoid public gyms
  - Lymphedema: light resistance okay with gradual progression
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## POST-TREATMENT RECOVERY

**Goal:** Rebuild strength, function, endurance, and emotional confidence

| Type        | Frequency     | Duration      | Intensity       | Sample Activities                                          | Notes / Modifications                                                  |
|-------------|---------------|---------------|-----------------|------------------------------------------------------------|------------------------------------------------------------------------|
| Aerobic     | 3–5 days/week | 20–40 min/day | Low to Moderate | Brisk walking, low-impact aerobics, cycling                | Start with lower duration; increase ~10% weekly                        |
| Resistance  | 2–3 days/week | 20–30 min     | Low             | Resistance bands, light weights, core activation exercises | Monitor swelling if risk of lymphedema                                 |
| Flexibility | 5–7 days/week | 10–15 min     | Gentle          | Yoga, postural stretches                                   | Focus on surgery/radiation-affected areas                              |
| Balance     | 2–3 days/week | 5–10 min      | Gentle          | Tai chi, single-leg stands, BOSU or foam pad work          | Particularly important for those with lingering neuropathy or weakness |

**Progression:** Gradual. Avoid muscle soreness >48h. Use RPE (Rate of Perceived Exertion): stay between 2–4/10 for most patients.

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## LONG-TERM SURVIVORSHIP

**Goal:** Maintain strength, reduce recurrence risk, support long-term health

| Type        | Frequency     | Duration      | Intensity | Sample Activities                                             | Notes / Modifications                                         |
|-------------|---------------|---------------|-----------|---------------------------------------------------------------|---------------------------------------------------------------|
| Aerobic     | 4–5 days/week | 30–45 min/day | Moderate  | Brisk walking, swimming, biking, dance classes                | Goal: ≥150 min/week of moderate activity (or 75 min vigorous) |
| Resistance  | 2–3 days/week | 30–40 min     | Moderate  | Circuit training, weights, resistance bands                   | Progress loads slowly; full-body sessions preferred           |
| Flexibility | 3–5 days/week | 10–15 min     | Gentle    | Dynamic & static stretches, yoga                              | Emphasize postural work and full joint ROM                    |
| Balance     | 2–3 days/week | 5–10 min      | Gentle    | Tai chi, unstable surface exercises, agility drills (if safe) | Adapt based on mobility/stability level                       |

### Enhancements:

- Add **intervals** (e.g., 1 min brisk / 2 min easy) to cardio after 3+ months
  - Integrate **group classes** or apps for motivation
  - Consider **fitness tracking** to reinforce consistency
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