

Movement Is Medicine

Five years into a clinical trial, those assigned to an exercise program had a 28% lower risk of cancer recurrence, new malignancies or death

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A structured exercise program after surgery for colon cancer was associated with a reduced risk of disease recurrence and improved survival, according to study results presented at the American Society of Clinical Oncology annual meeting. Prior research has linked greater physical activity to lower cancer risk and better outcomes among patients and survivors, but these were mostly observational studies without a control group.

The Phase III CHALLENGE trial enrolled 889 colon cancer patients who had undergone surgery and completed adjuvant chemotherapy; they reported that they did not get the recommended 150 minutes of moderate physical activity per week. They were randomly assigned to either participate in the exercise program—including a tailored “exercise prescription,” coaching from a physical activity consultant and supervised exercise sessions—or receive health education materials.

At six months, people in both groups saw an improvement in physical function, but this was significantly greater in the exercise group. At five years, people assigned to the exercise program had a 28% lower risk of cancer recurrence, new malignancies or death and a 37% improvement in overall survival.

Senior study author Christopher Booth, MD, of Queen’s University, noted that the magnitude of benefit of the exercise program was comparable to—or exceeded—that of many standard medical therapies. “As oncologists, one of the most common questions we get asked by patients is ‘What else can I do to improve my outcome?,’” he says. “These results now provide us with a clear answer: An exercise program that includes a personal trainer will reduce the risk of recurrent or new cancer, make you feel better and help you live longer.”
