Making Fitness Essential to Cancer Treatment

One California nonprofit makes it easy for people with cancer to work with a personal trainer certified in exercise oncology.

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Once upon a time, if you were diagnosed with cancer, your oncologist would tell you to take it easy. Rest. Don't exert yourself. Save your strength for treatment and recovery.

Then again, doctors used to tell people with back problems to rest too, which is the opposite of current advice. They also advised pregnant women not to exert themselves and certainly not to run; that, too, has been overturned.

For cancer, the evidence for exercise benefits keeps growing. Exercise before, during and after treatment reduces symptoms of anxiety and depression, helps counter cancer-related fatigue and has been found to improve survival and lower recurrence rates for people with breast, colorectal and prostate cancer. Major groups, including the American College of Sports Medicine (ACSM), the American Cancer Society and others, have endorsed a formal evidence-based statement that an exercise program should be part of everyone's cancer treatment plan.

But how might that work? To find out, I called Sunflower Wellness, a nonprofit organization in the Bay Area. Its origins date to the work of personal trainer Christopher Goad, whose own experience with cancer led him to write a manual about exercise and cancer. Goad also ran popular fitness classes for people with cancer that served more than 200 people over five years. He died in 2004, at age 35, but his work became the basis of Sunflower Wellness that year.

The key to incorporating fitness is to make it a part of your treatment plan at your hospital or clinic, explained Derek Barnes, Sunflower's board chair. "With moderate levels of directed, programmatic fitness, you can reach a higher state of well-being during your treatment," he said. There's also an emotional and social context. "When you are diagnosed with cancer, you're overwhelmed with information, you're being directed by your physician and you're exhausted," he said. "There's a value in connecting, to finding yourself in an exercise class with other people who are going through similar things."

In the Bay Area, many clinics and hospitals have arrangements with Sunflower. "We work with these institutions to prescribe assistance in the prescription of exercise in their settings," Barnes said. First, the patient, who is referred to as a "client", has a free on-site consultation with a

Sunflower personal trainer, who is accredited by the ACSM as a certified cancer exercise trainer. The result is a personalized fitness plan tailored to their specific medical case.

To put that plan into practice, clients may become Sunflower members, which includes two one-hour counseling sessions and routine annual check-ins, deeply discounted (by as much as 75%) gym memberships in area fitness clubs, and access to an online library of exercises specifically developed for people with cancer. Membership costs $25 a month or $250 a year. Scholarships are also offered for those who need financial assistance.

To expand exercise access nationally, Sunflower recently partnered with the Maple Tree Cancer Alliance, which runs its fitness program during cancer treatment in 15 hospitals in Pennsylvania, Florida and Ohio. The goal is to create a national organization with a Comprehensive Exercise Oncology (CEO) program that becomes the standard in treating cancer with individualized care—integrating cancer treatments and exercise, in person and via virtual platforms. “We’re working with Maple Tree to create a standard platform and certification program that fitness instructors can be put through,” he said. “We hope to license this approach and technology so others may develop their own CEO programs inside and beyond hospital settings.”

Barnes also had advice for anyone not in the Bay Area. “Many progressive hospitals may already have piloted fitness programs,” he said. The first step is to find an knowledgeable resource where you are being treated. “Ask the nurse, resource navigator or patient advocate what’s available—they may know more than the doctor,” he advises. (To find an ACSM-certified trainer in your area, click here.)

The biggest obstacle to widespread availability of these programs? Insurance. It’s a very different story from nutrition services. “When a person with cancer is referred to a nutritionist, insurance generally covers the service,” Barnes noted. That’s not yet true for even a trainer with ACSM cancer certification. “What will change the game is when these services are billable,” he said. He believes that will happen in the next two or three years.

He’d like to see a more integrated wellness movement where other fitness programs, such as yoga for people with cancer, join together in a national network of certified wellness providers and make a variety of exercise programs for people with cancer essential elements of cancer treatment in the United States. “We know these programs work,” said Barnes. “We have enough research. Now we need to move the needle in terms of expanding the standard of care.”

To learn more, see “Prescribing Exercise as Cancer Treatment.”

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