

# Impact of Resistance Based Exercises on Cancer-Associated Bone Health Changes.

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SONAL OZA, MD

RESIDENT PHYSICIAN, PHYSICAL MEDICINE & REHABILITATION

NORTHWESTERN UNIVERSITY/REHABILITATION INSTITUTE OF CHICAGO

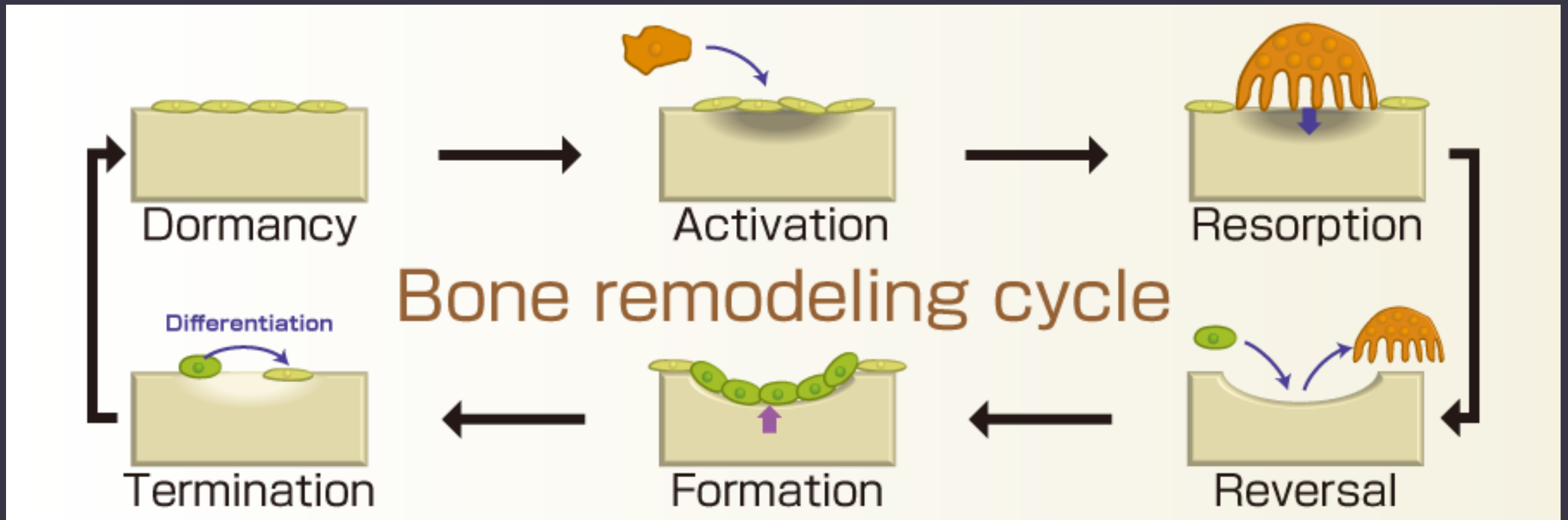
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# Overview

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- **What:** Define bone health
- **So What?** Cancer-Specific Changes in Bone Health
- **What?** Resistance Exercise
- **So What?** Resistance Exercise & Cancer
- **Now What?**

# What?



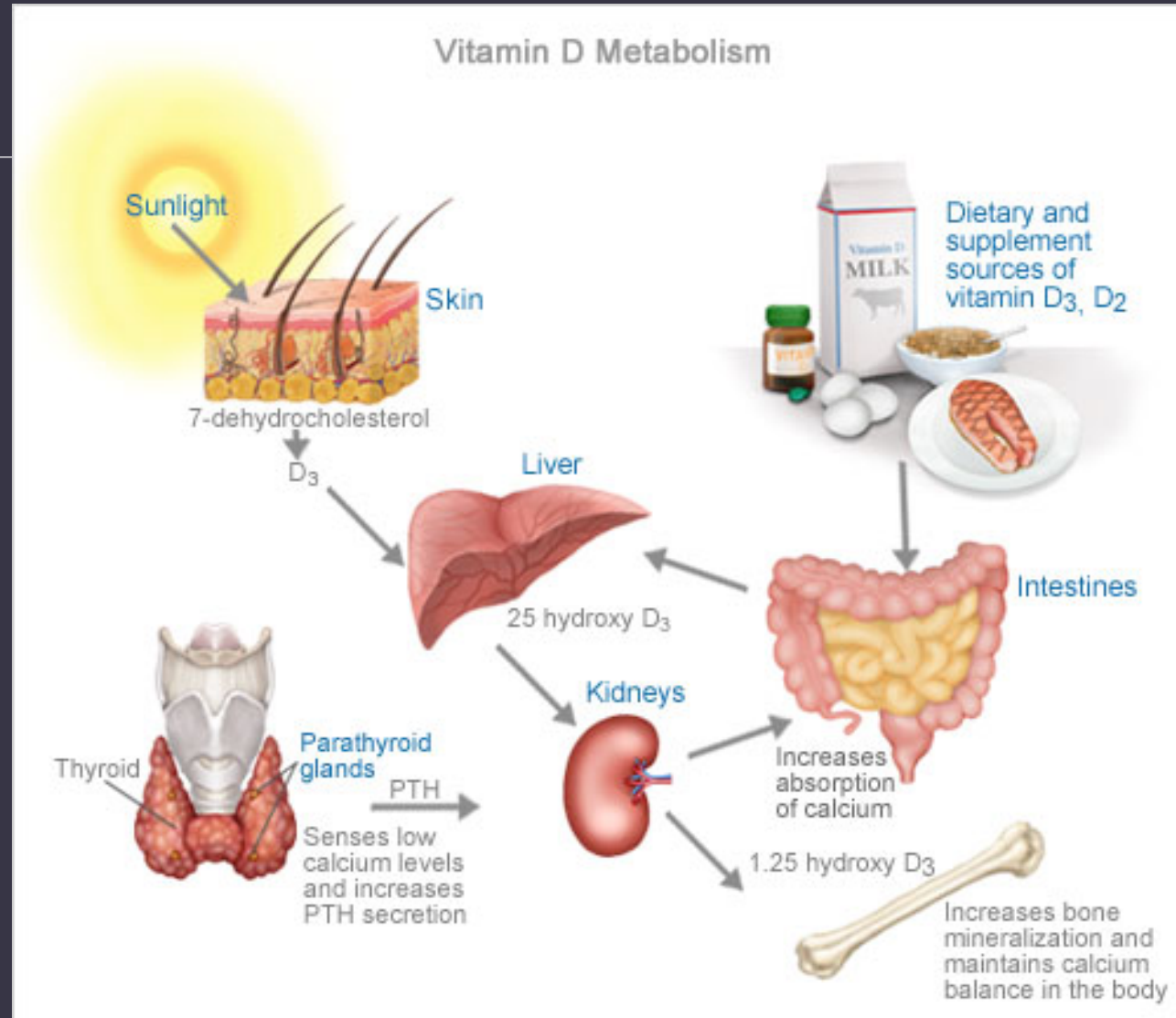
- Bones are continuously re-modeling (breaking and building)

Bone Remodelling

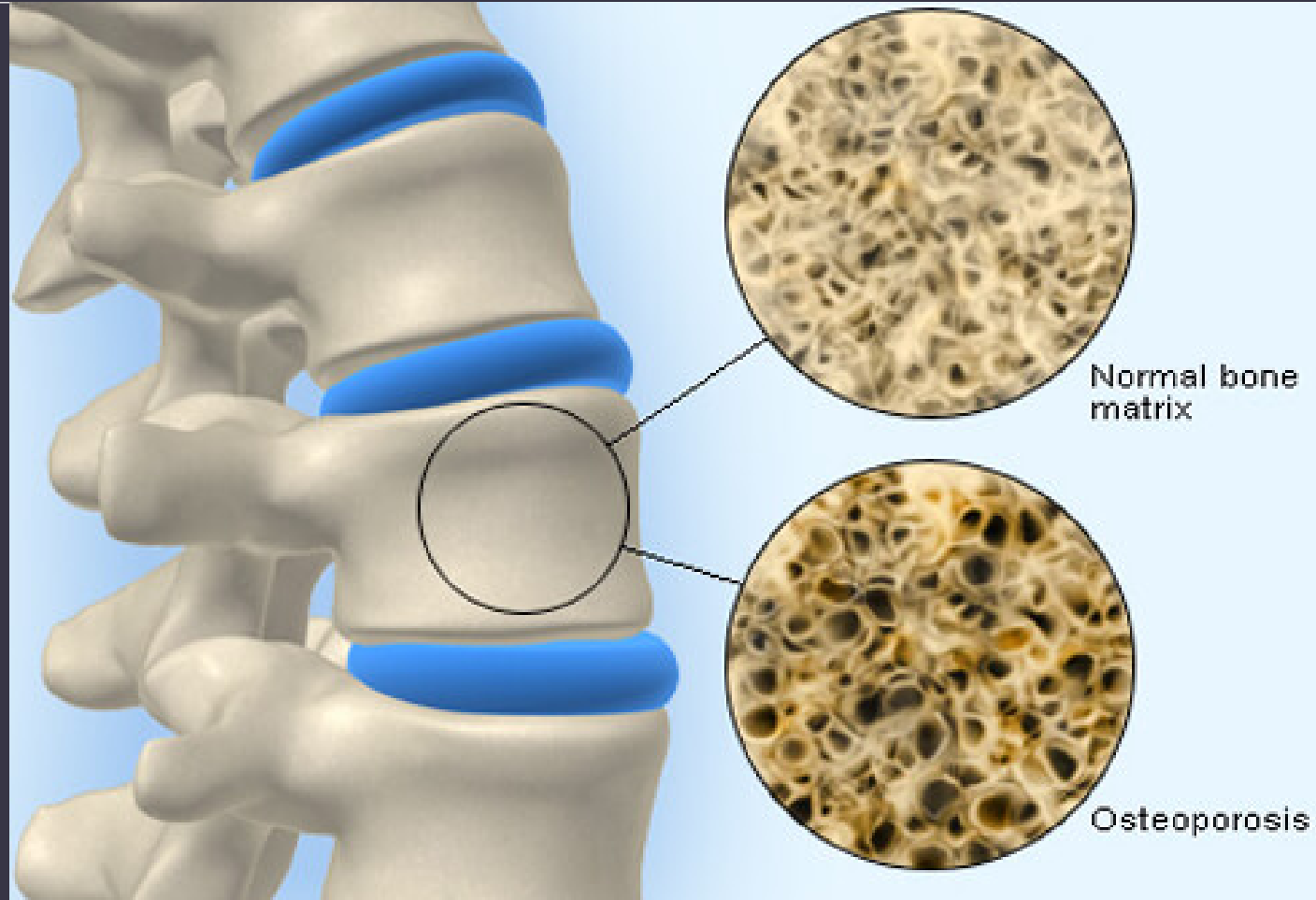


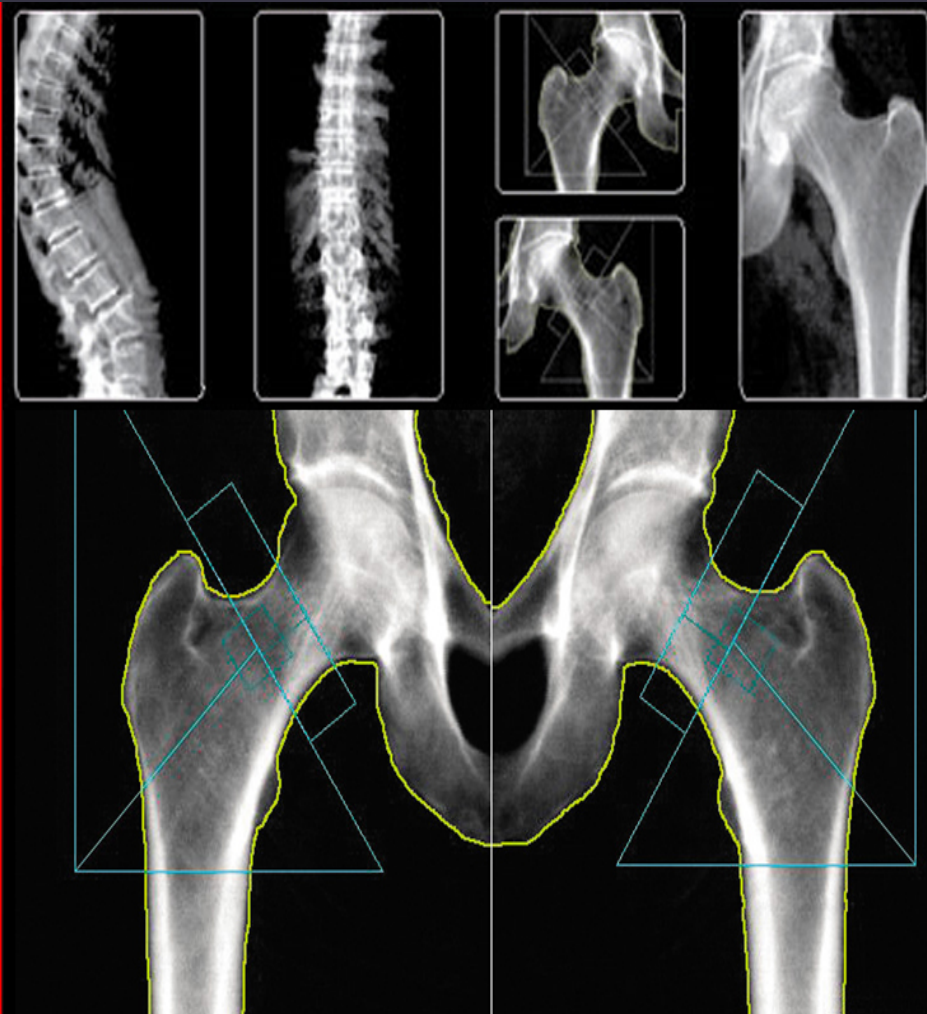
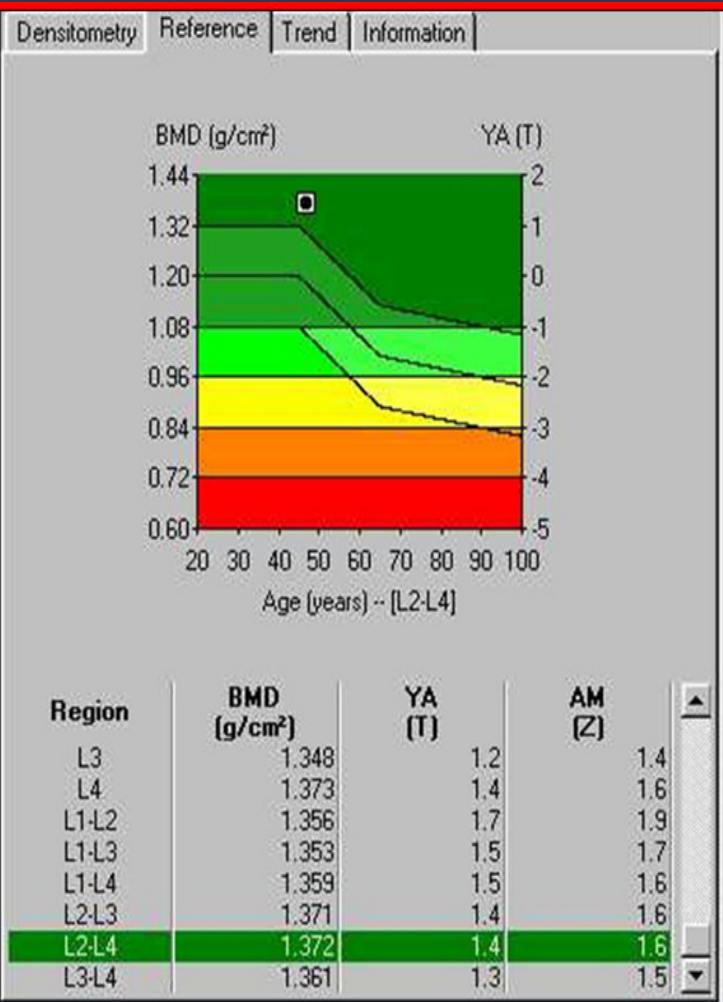
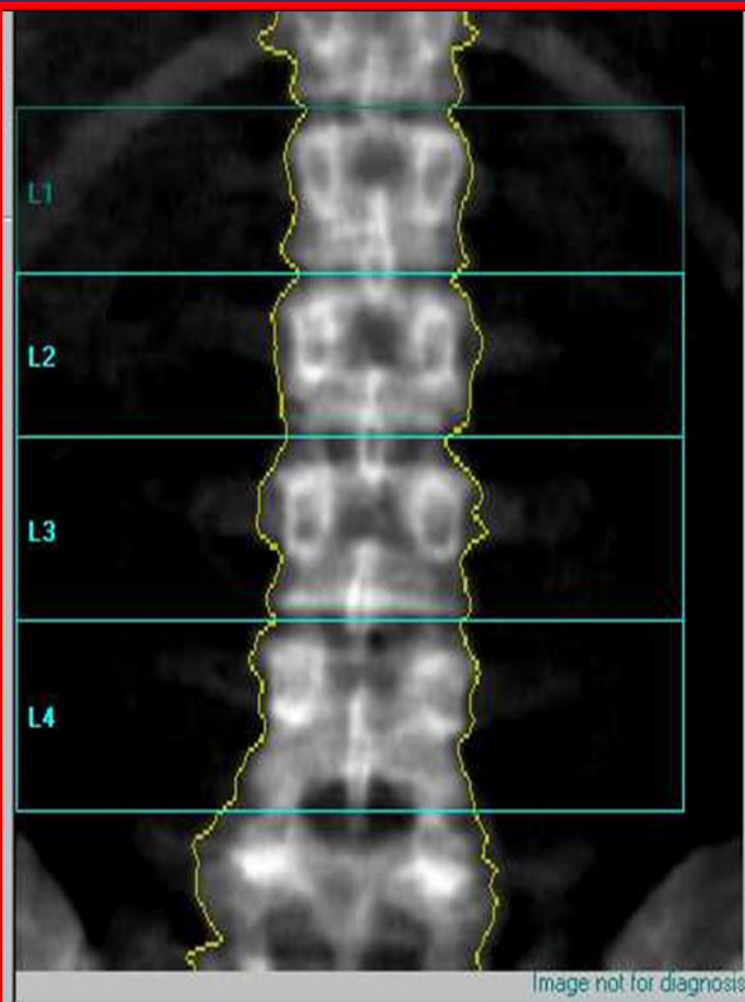
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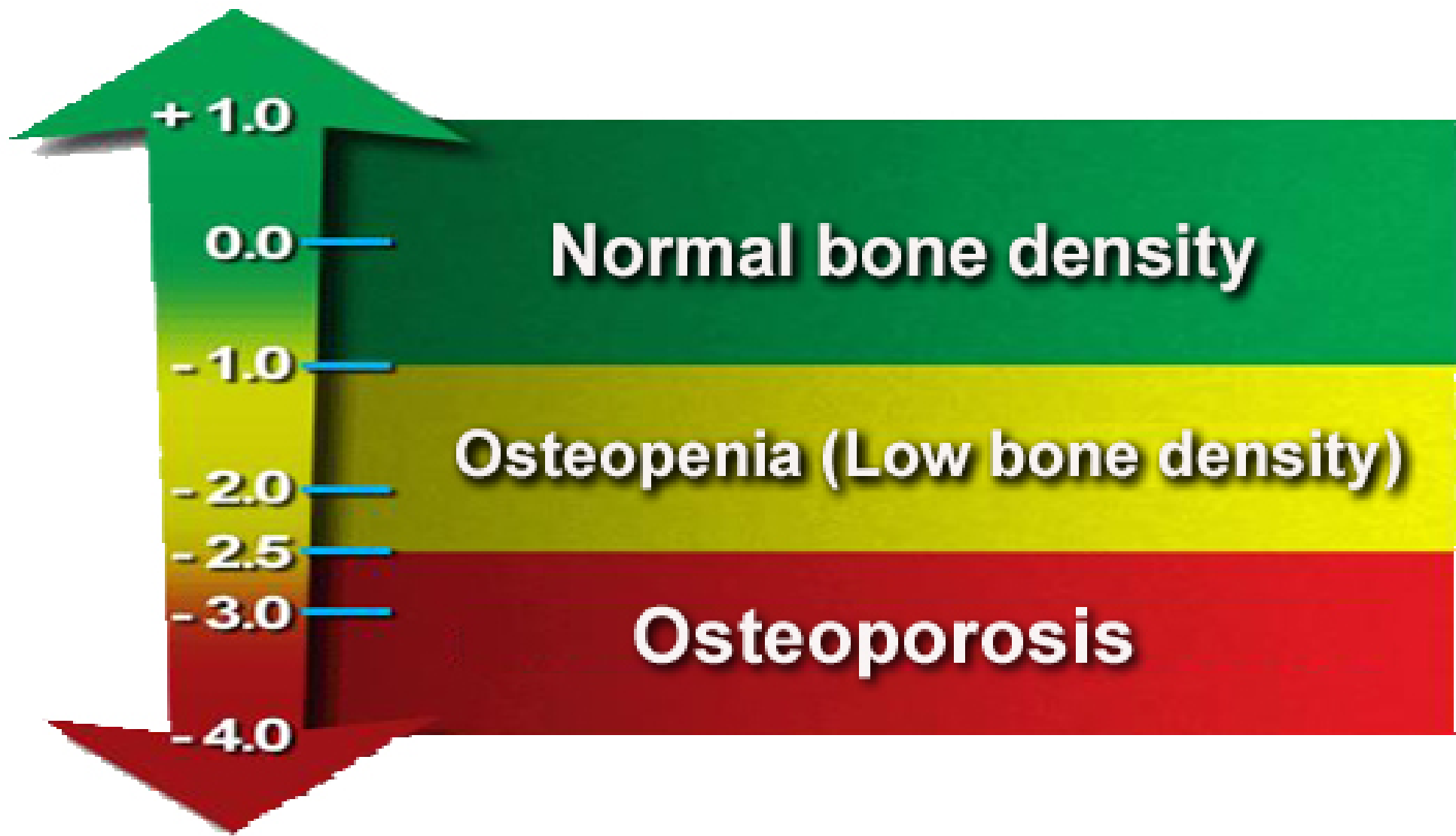
# The Sun, Vitamin D, Calcium



# What is Osteoporosis?









# Calculation Tool

Please answer the questions below to calculate the ten year probability of fracture with BMD.

Country: **UK** Name/ID:  [About the risk factors](#)

## Questionnaire:

1. Age (between 40 and 90 years) or Date of Birth  
 Age:  Date of Birth: Y:  M:  D:

2. Sex  Male  Female

3. Weight (kg)

4. Height (cm)

5. Previous Fracture  No  Yes

6. Parent Fractured Hip  No  Yes

7. Current Smoking  No  Yes


8. Glucocorticoids  No  Yes

9. Rheumatoid arthritis  No  Yes

10. Secondary osteoporosis  No  Yes

11. Alcohol 3 or more units/day  No  Yes

12. Femoral neck BMD (g/cm<sup>2</sup>)

**BMI: 24.8** 

The ten year probability of fracture (%)

**without BMD**

Major osteoporotic	<b>5.7</b>
Hip Fracture	<b>0.9</b>

# Risk Factors

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- Age over 50 years
- Female
- Low body weight
- Smoking
- 3 or more alcoholic drinks in a day

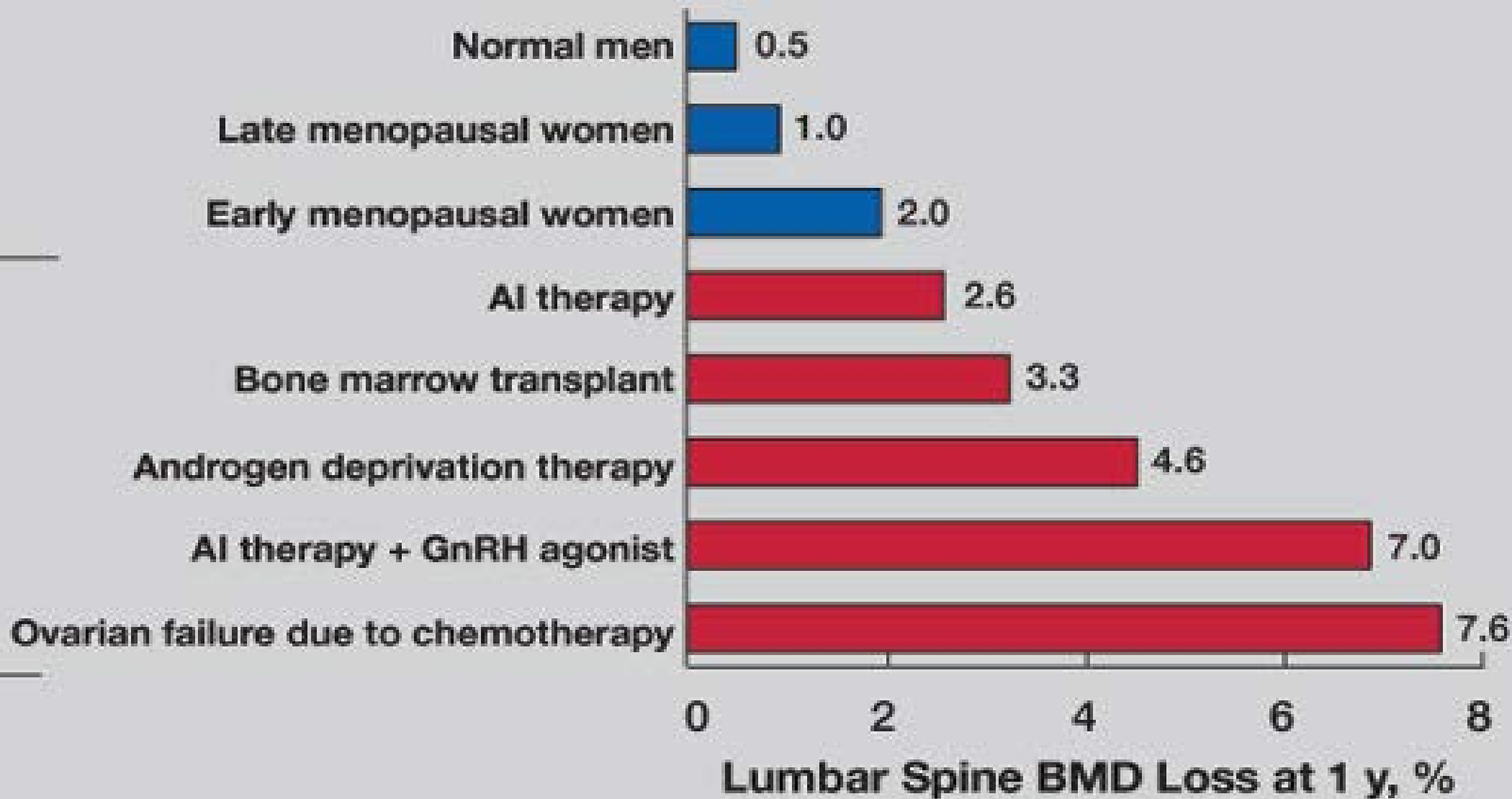
# So What?

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- Decreased Bone Mass
- Decreased Lean Body Mass
- Increased body fat

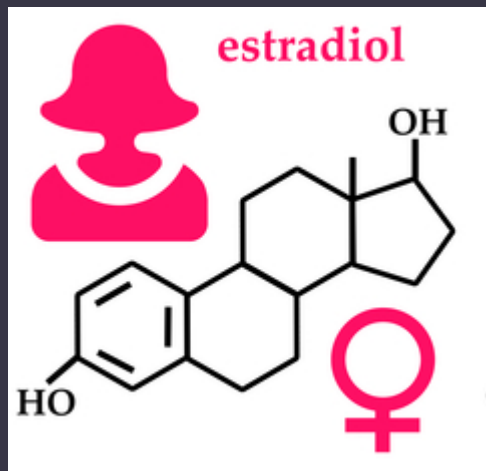
**=Increased fracture risk**

Cancer treatment-  
induced bone loss



# Breast Cancer & Bone Health Changes

*Decreased Bone Mineral Density & Increased Risk of Fractures*



Chemotherapy



Early Menopause

# Breast Cancer & Bone Health Changes

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Decreased BMD	Fracture Risk
5% loss	May increase by 55%
Decrease T-Score by 0.04 to 0.06	

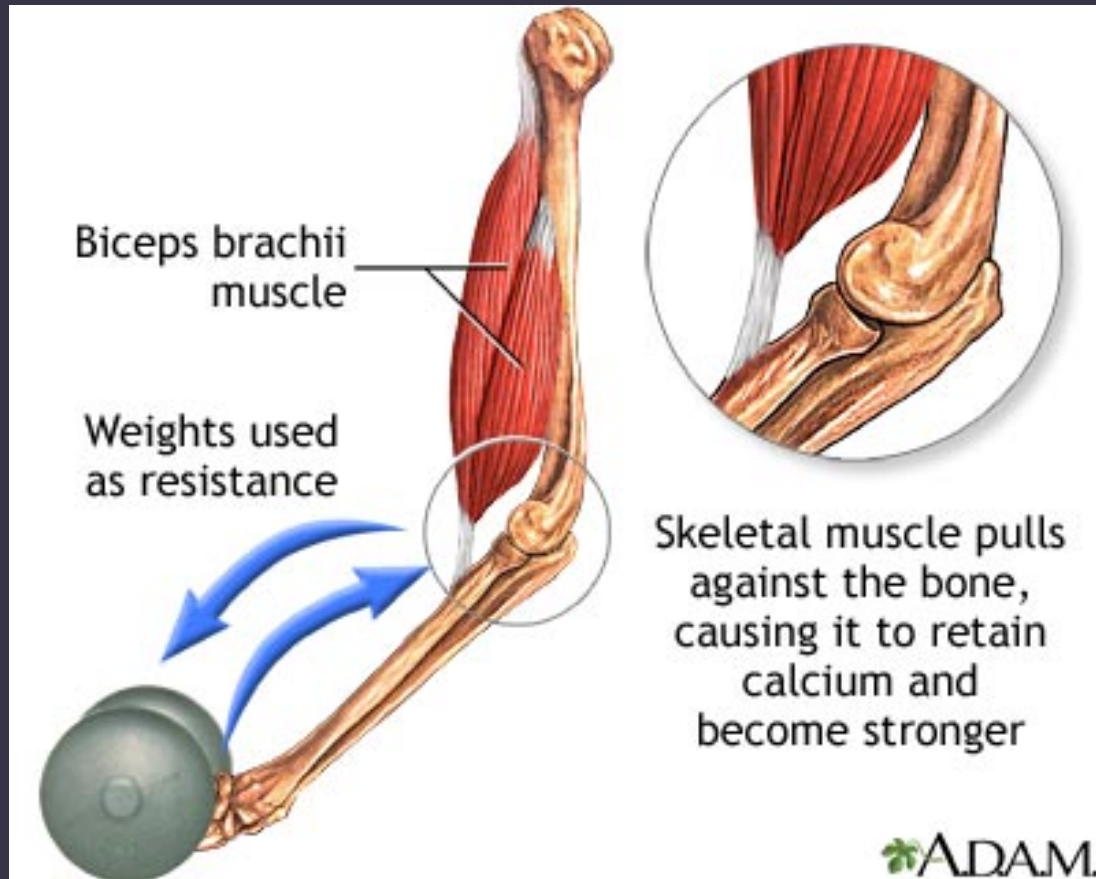
# Prostate Cancer & Bone Health Changes

## ○ *Androgen Deprivation Therapy*

Decreased BMD	Decreased Lean Body mass	Osteoporosis Risk	Fracture Risk
Up to 10 fold	2 to 3.6% (Owen)	Increased by 30-40% (Lomax 20, Gardner)	19% compared to 12%
Hip: 0.6 to 4%			
Spine: 2 to 4.8%			

## ○ *Greatest Loss is seen in the first 6-12 Months (Owen)*

# What? Resistance Exercise



Osteopenia	Osteoporosis
Jumping/hopping	Free Weights
Plyometrics	Machines
Free weights, kettle bells, resistance bands	Resistance bands
Sports that involve jumping (basketball, volleyball)	Stairclimbing
Weight bearing aerobic activities (jogging, tennis, stairclimbing)	Walking



# Benefits of Resistance Exercise?

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- In Non-Cancer Individuals, Normal Aging
  - Lose 5-10% of muscle mass every 10 years after age 50 (Strasser)
- Training 2 times/week → Increased 1-2 kg of muscle mass every 6 months (Strasser)
- Takes 8-12 weeks to see a difference (Strasser)

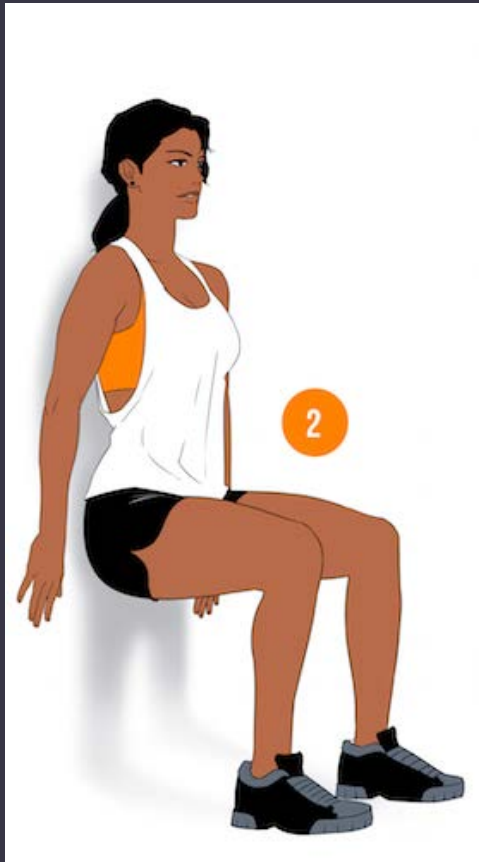


Muscle strength

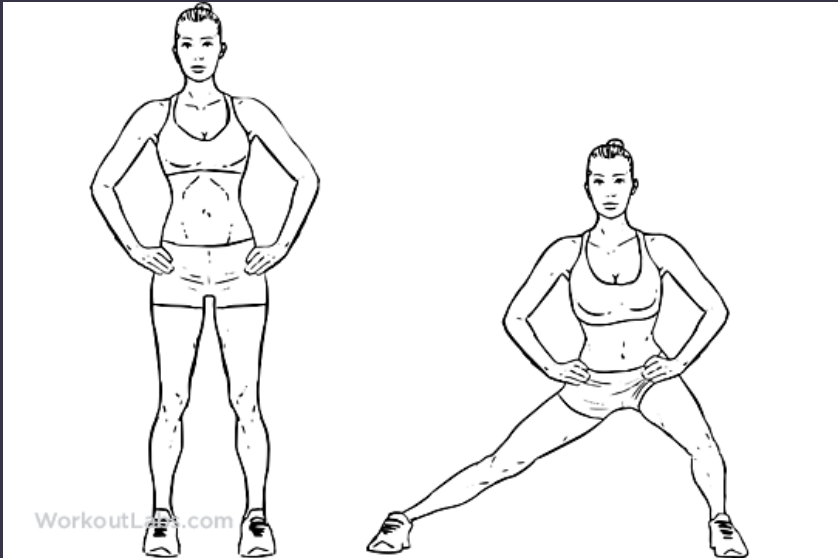
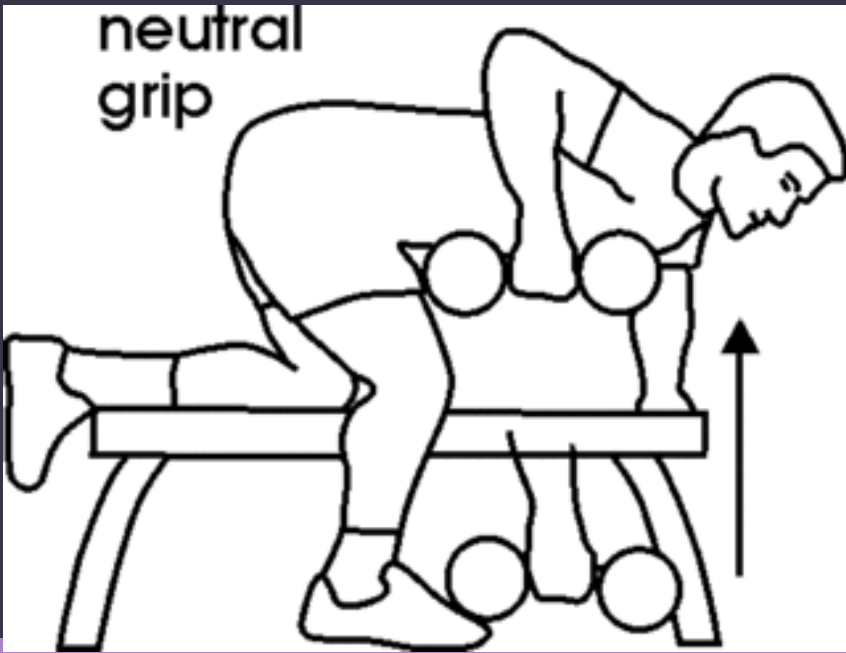
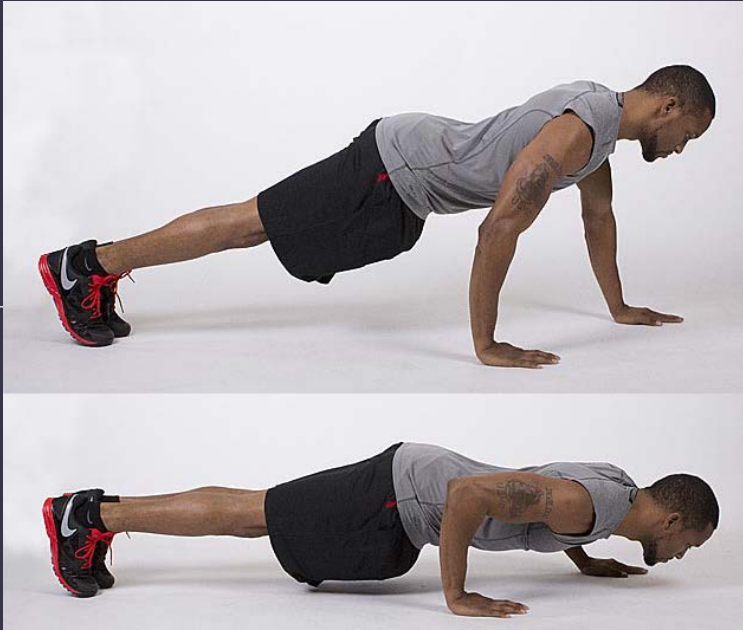
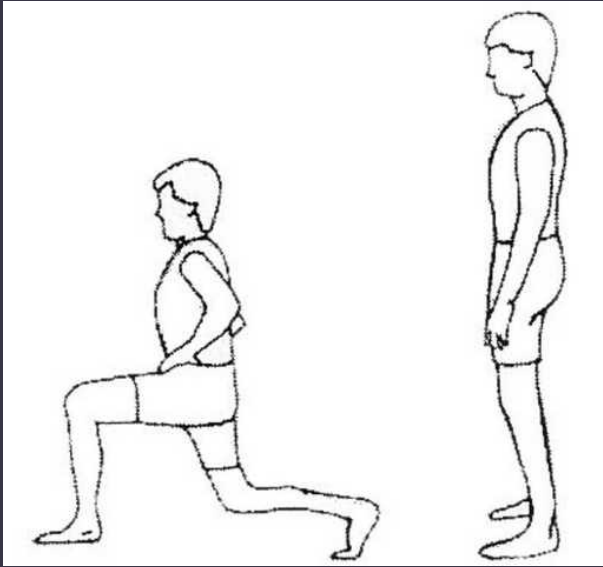
Bone Mineral Density

Fatigue

Physical Function







# So what? Resistance Exercise & Breast cancer

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Exercise Group	No Resistance Exercise group
Maintained bone mineral density (Dobek)	Greater loss of bone mineral density (3%) (Dobek)
Increased lower body strength (Dobek)	Increased lower body strength (Dobek)
Less of a delay in starting chemotherapy (Courneya)	

# So What? Resistance Exercise & Prostate Cancer

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- Fewer Studies (10-15)

Exercise Group
No change in in bone mineral density (Gardner)
Increased upper body strength (Gardner)
Increased lower body strength (Gardner)
Increased lean body mass (Gardner)

# General Conclusions

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- ❑ *These studies were done in very structured, supervised, almost “lab-like” settings*
- ❑ Resistance exercise increased upper body muscle strength by 7 kg (Strasser)
- ❑ Resistance exercise increased lower body muscle strength by 15 kg (Strasser)
- ❑ *Higher intensity does not necessarily mean greater gain in strength (Strasser)*
  
- ❑ Bone Mineral Density: Less is known but it appears to maintain or slow down loss of density
  
- ❑ See improvements with resistance exercise during and after cancer treatment
- ❑ Resistance Exercise is **SAFE** in Cancer Survivors

# To consider

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- Length of program
- Sustainability
  - Bone Mineral Density Changes may be maintained with less frequency and intensity
  - Muscle Strength maintenance requires regular frequency, maintained intensity
- Zero training over a 6 month period → reverses bone and muscle improvements

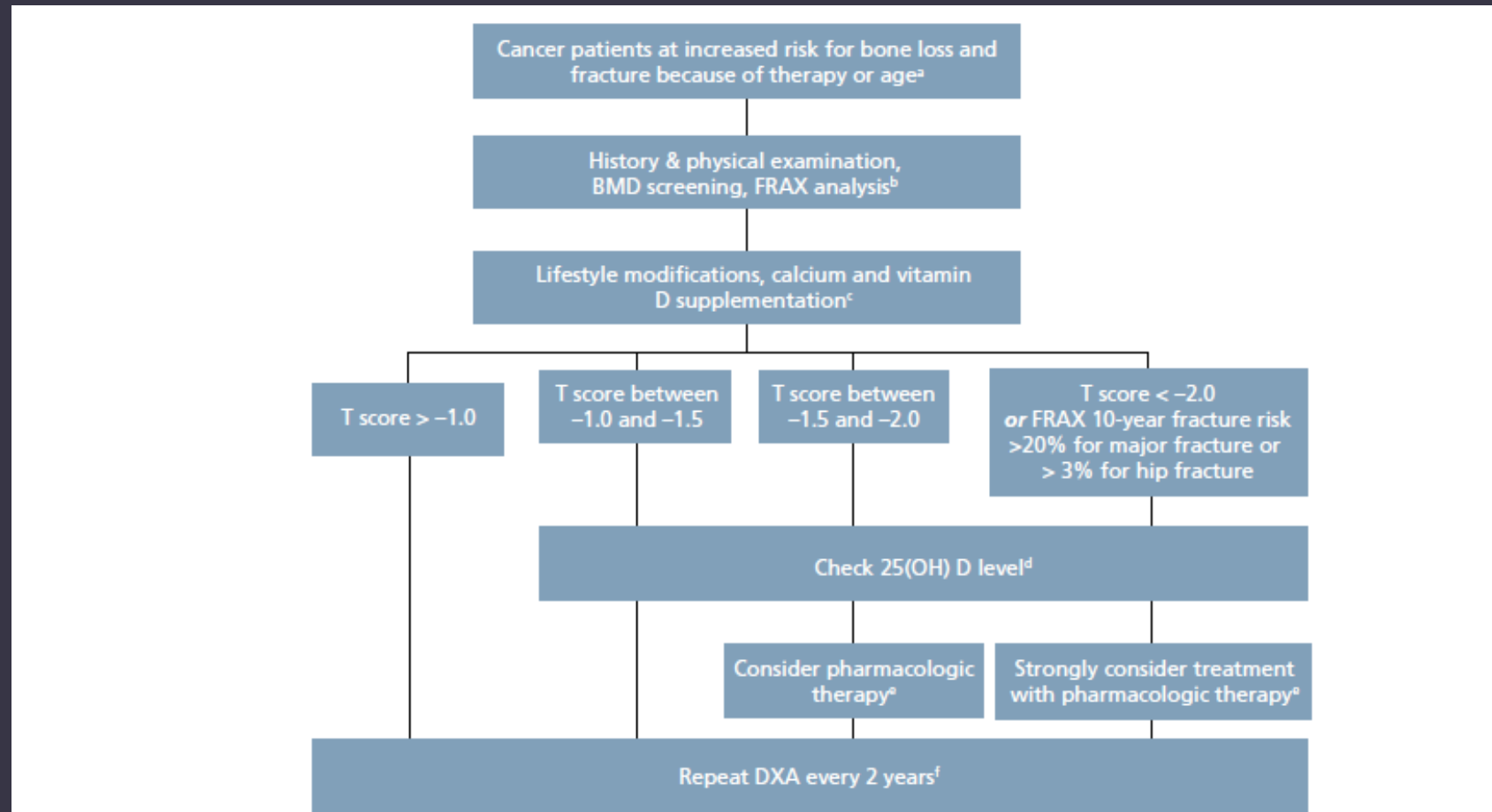


# Questions to be answered

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- Are the effects of resistance exercise long-lasting?
- How much is needed to enhance bone health?
- How does the effect vary across different cancers?
- Optimal timing during treatment course?

# NCCN Guidelines: Bone Health Screening



# ACSM Guidelines for Cancer Survivors: Resistance Exercise

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Survivors=time of diagnosis

2 days a week. Moderate intensity

Post-Menopausal:

- 60-70% of RM
- 8-12 repetitions per set
- 1-3 sets

Exercise is Medicine

# Exercise Prescription

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- 2 Times per Week
  - Upper and Lower Body
- Intensity: 50-80% of Maximum Resistance
- 2-3 Sets of 8-12 Repetitions

# Now What?

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## Talk to your Oncologist or Primary Care Physician

- Restrictions or Precautions

## To think about

- Are you interested in it?
- Do you feel ready to incorporate into your life?
- Which barriers or factors prevent you from exercising?
  - Time
  - Knowledge
  - Comfort Level
  - Fatigue
  - Weakness
  - Pain

Physiatrist or  
PM&R Doctor

Cancer  
Certified  
Exercise  
Physiologist

Physical  
Therapist

Fitness Center

# Resources

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National Cancer Institute

American Cancer Society

National Institute on Aging: Exercise & Physical Activity

## **Local Resources in Chicago**

Gilda's Club

RIC Fitness Center









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