



The HEALTH4CLL study: Optimization of behavioral intervention for patients with chronic lymphocytic leukemia

Che Young Lee¹, Max J. Gordon¹, Melissa M. Markofski², Emily C. LaVoy², Susan K. Peterson¹, Liang Li¹, Miranda Baum¹, Margaret Pace¹, Danielle Walsh¹, Karen Basen-Engquist¹, Alessandra Ferrajoli¹

The University of Texas MD Anderson Cancer Center¹, University of Houston²

Introduction

Chronic lymphocytic leukemia (CLL) is the most prevalent leukemia in the US and advanced age and comorbidities increase the risk of cancer-related fatigue in patients with CLL.

ACSM Guidelines for cancer patients: Exercise could improve common health outcomes, including anxiety and depressive symptoms, fatigue, physical functioning, and health-related quality of life.

Lifestyle changes such as smoking cessation, healthy diet and weight, and exercise/physical activity would benefit for patients with CLL

However, optimal health behavior intervention methods for patients with CLL are unknown.

We conducted a pilot study of digital diet and physical activity intervention tools (HEALTH4CLL) designed to reduce fatigue in patients with CLL.

Study Design & Methods

A pilot study of randomized factorial design (n=37)

16-week of behavioral change strategies to promote physical activity and healthy diet, reduce fatigue and improve health-related quality of life and physical functions

Multiphase optimization strategy (MOST)

Intervention:

- Wearable physical activity tracking device (Fitbit)
- Weekly educational materials about exercise, diet, and weight management adapted from Diabetes Prevention Program (DPP).
- Intervention components:
 - Telephone vs. email coaching; 2) Text Message reminder vs. No reminder; 3) Aerobic vs. Aerobic + Resistance exercise; 4) Weekly vs. Daily self-monitoring

Table 1. Randomization: behavior change intervention components

Group #	Coaching	Text Message	Resistance Training	Self-monitoring
1	Email	Yes	Yes	Daily
2	Email	Yes	Yes	Weekly
3	Email	Yes	No	Daily
4	Email	Yes	No	Weekly
5	Email	No	Yes	Daily
6	Email	No	Yes	Weekly
7	Email	No	No	Daily
8	Email	No	No	Weekly
9	Telephone	Yes	Yes	Daily
10	Telephone	Yes	Yes	Weekly
11	Telephone	Yes	No	Daily
12	Telephone	Yes	No	Weekly
13	Telephone	No	Yes	Daily
14	Telephone	No	Yes	Weekly
15	Telephone	No	No	Daily
16	Telephone	No	No	Weekly

Effects coding: Email=1/Telephone=-1; Text message reminder=1/No reminder=-1; Resistance+Aerobic=1/Aerobic alone=-1; Daily=1/Weekly=-1

Measures

- Fatigue: Functional Assessment of Cancer Therapy-Fatigue (FACT-F)
- Physical functioning: PROMIS-PF and Rikli Senior Fitness Battery tests
- Feasibility: Attendance (%) and satisfaction (mean score)
- Weight
- Physical activity: Godin leisure time PA scores Fitbit, Accelerometer
- Quality of life: PROMIS Global Health 10
- Diet intake: Dietary History Questionnaire II
- Program satisfaction and retention

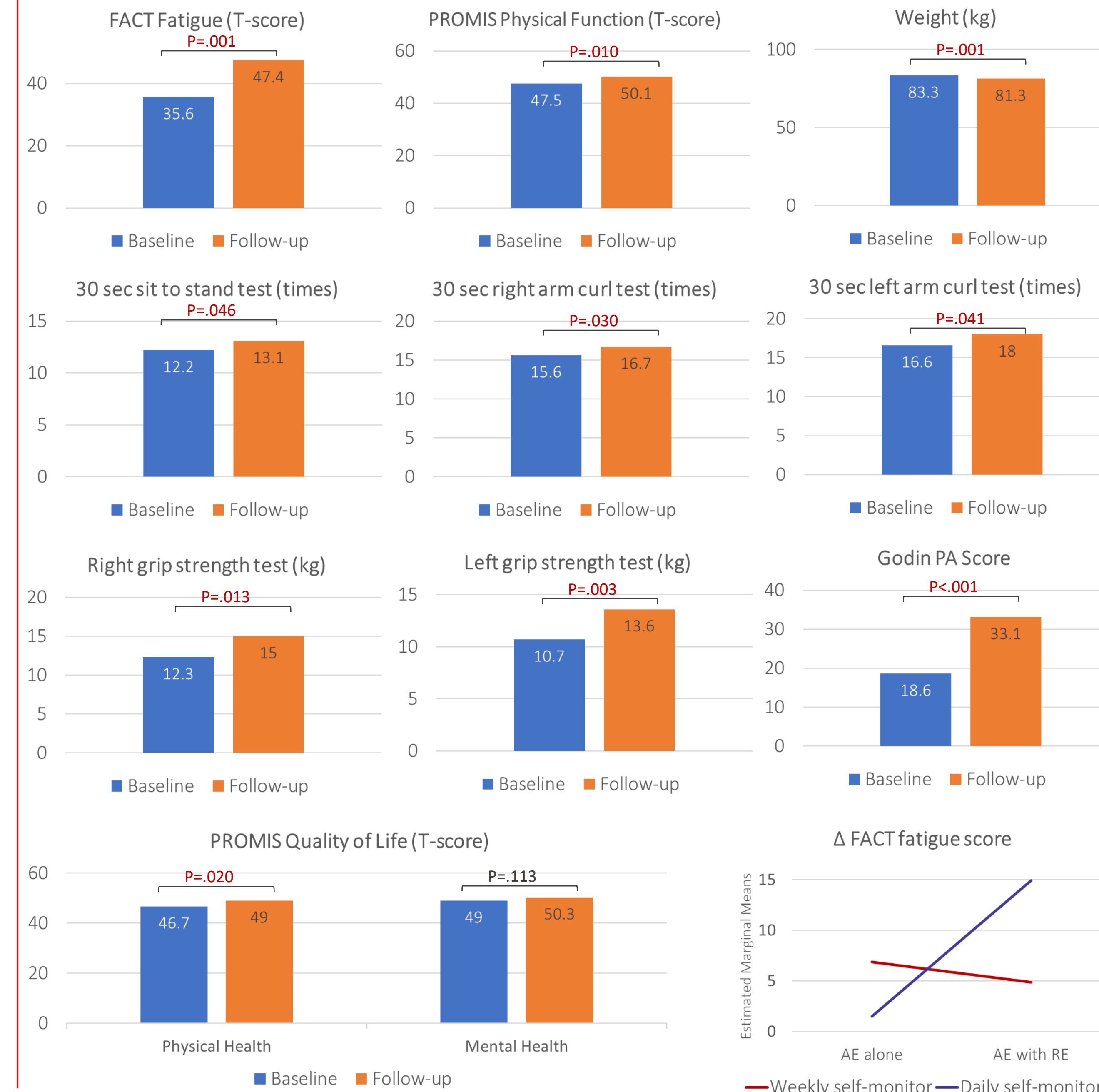
Statistical analysis:

- Paired T-tests: examined changes in outcomes from baseline to follow-up
- Factorial ANOVA: examined effective intervention components regarding improvement in fatigue and physical function scores

Results

Total 31 patients completed. Patients' mean age was 63 yrs (SD=8.8), 61% were female, 94% were white, mean BMI was 31.6 kg/m² (SD=13.8), 68% had Rai stage 3-4, 42% had unmutated IGHV and 6% has a TP53 aberrancy, 32% had not received prior treatment for CLL, and 76% were receiving a BTK inhibitor.

Figure 1. Improved fatigue, physical function, and weight after the intervention



Analysis of the individual components of the MOST design demonstrated greater improvement in the physical function score with resistance plus aerobic exercise than with aerobic exercise alone (p=0.048).

We identified telephone coaching, text message reminders, and Fitbit use as feasible interventions.

Conclusion

These findings demonstrated the feasibility and effectiveness of behavioral interventions in reducing fatigue and improving physical function in patients with CLL.

Combined aerobic and resistance exercise, daily self-monitoring, and remote coaching were associated with improved physical function and reduced fatigue.

Acknowledgement

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Alessandra Ferrajoli:
aferrajo@mdanderson.org