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Research News from Around the World and Across the Motu

Structured exercise after adjuvant chemotherapy for colon cancer

KS Courneya et.al. and CHALLENGE Investigators
New England Journal of Medicine 2025;393:13-25.
DOI: 10.1056/NEJMoa2502760

This study tested whether a three-year structured exercise programme could improve cancer-related survival outcomes in people with colon cancer who had recently completed adjuvant chemotherapy.

Researchers followed 889 colon cancer patients in 55 centres in Australia and Canada. Half took part in a 3-year structured exercise programme, while the other half received general health education only.

After nearly 8 years of follow-up, the study showed those in the exercise programme lived longer without their cancer returning. The magnitude of benefit from the exercise programme was similar to that of many currently approved standard anti-cancer drug treatments. Those who exercised also showed better overall survival, physical fitness, and daily functioning.

Overall, this large clinical randomised trial is important because it provides strong evidence that regular, supported exercise after treatment can meaningfully improve survival and wellbeing for people with colon cancer, highlighting exercise as an important part of cancer care.

Willingness to pay for oncology services: a mixed methods study

P Cormie, A Bradford, CM Doran, BA Potts, P Martin, M Chiswell & M Krishnasamy
Supportive Care in Cancer (2025) 33:77
<https://doi.org/10.1007/s00520-024-09105-x>

This Australian study looked at whether people with cancer are willing to pay for exercise programs designed specifically for their needs, and how this compares to what healthcare professionals think. Researchers surveyed 450 people with cancer and 300 oncology health professionals.

They found that most people with cancer would pay for expert exercise support—94% said they would pay for an initial consultation, and many were willing to pay for ongoing supervised sessions. People often saw this as an investment in their health, valuing personalised advice, safety, and motivation.

However, healthcare professionals tended to underestimate patients' willingness to pay and often assumed cost would be a major barrier. While affordability is still a concern for some, especially those unable to work, only a small minority said they would not pay.

Overall, the findings suggest exercise services are valued by many patients, and better alignment between patient and clinician expectations could improve access to beneficial exercise care.

Prehabilitation for patients with cancer in Aotearoa New Zealand

H van Waart & M Seretny

2023 Apr 28; 136(1574). ISSN 1175-8716

<https://journal.nzma.org.nz/> ©PMA

This paper describes the importance of 'prehabilitation', which is support given to people with cancer before treatment, especially before surgery.

Prehabilitation aims to help patients prepare physically and mentally for treatment. It can include exercise, nutrition support, help to stop smoking, and stress management. The goal is to improve fitness, maintain strength, and build resilience so people can better cope with surgery and cancer treatment.

Research shows prehabilitation is safe and can improve physical function, quality of life, and emotional wellbeing. It may also reduce complications after surgery and shorten hospital stays.

However, evidence is still limited in New Zealand, and not all patients find a 'standard' programme suits them. The authors highlight the need for co-designed, culturally appropriate programmes tailored to patient needs, to ensure prehabilitation is effective and accessible for everyone.