ALIVE!
About Living Enhancements
After Breast Cancer

Nutrition-Energy Balance SIG
Nutrition SIG CT Working Group
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RESEARCH AND CLINICAL GAP

• Breast cancer patients experience multiple treatment-related metabolic, physiologic and psychosocial changes.

• Increased risk of cardiovascular disease, peripheral neuropathies, declines in mental acuity, declines in functional performance

• Multiple changes across many health domains

• Many of these domains are on the LILAC baseline and annual questionnaires
LILAC QUESTIONNAIRES

• Baseline (F340)
  • Questions on anxiety, fatigue, depression, social isolation, physical symptoms (joint pain, neuropathies, memory problems), weight/weight changes
  • Includes whether treatment received

• Annual (F370)
  • More specific questions on physical activity, symptomology (neuropathies, ADL, memory issues) medications
RESEARCH AND CLINICAL GAP

• Yet, most interventions have focused on one area such as weight loss, sleep hygiene, body image, depression and other single modalities, typically using a single level intervention design

• This represents a research and clinical gap
ALIVE!

A randomized controlled semi-pragmatic trial to test whether a comprehensive intervention focused on the promotion of a nutrient-dense healthy dietary pattern, functional fitness related to activities of everyday living, social support, sleep and mental acuity among WHI women with a prior diagnosis of breast cancer will lead to better health, independent living and greater quality of life and longevity compared to usual care.
ALIVE! ELIGIBILITY

• Consented to participate in LILAC and returned baseline LILAC questionnaire
• Vital status = alive at start of trial
• Living independently at start of trial
• Breast cancer diagnosis received during WHI
ALIVE! INTERVENTION

• Participants in the intervention will receive materials or be contacted, more frequently (2x/mo) at first then tapering:
  • Each contact will contain 1-2 topics related to living healthy after breast cancer. Some content could be personalized based on LILAC questionnaire responses (e.g., neuropathies)

• Contacts will occur via:
  • US mail (i.e., newsletter)
  • Internet (participant website with content and videos)
  • Text message
  • Live coaches by telephone, skype

• Content can be stepped up and personalized as needed
• Participant preference will be sought re: contact type
ALIVE! OUTCOMES

• Outcomes
  • QOL and other on Form 155
  • LiLAC annual questionnaire, contingent on LiLAC competitive renewal
    • Weight (self-reported)
    • Q8 (neuropathies)
    • Q10 (mental acuity)
    • Q11 (physical activity and walking)
  • Medical history updates on Form 33