

quality of life of cancer patients has been proved. Thereby we propose a specific program for these patients inside our rehabilitation unit.

**Methods.**— The program is proposed to adults cancer patients during treatment phase or during remission, after an inclusion consultation by a rehabilitation doctor. The program consists of 24 by one hour group sessions, of aerobic and against resistance physical activity supervised by a teacher experimented in adapted physical activity.

**Results.**— The program is evaluated on these following criteria: personal satisfaction, quality of life and functional walking test.

**Discussion.**— The implementation of this program, organised with the joint collaboration of oncologists, allows us to propose a global coverage for cancer patients during treatment or during remission.

**Further reading**

Irwin MI, et al. *J Clin Oncol* 2008.

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P415-e

### Modern methods of conservative treatment of anal incontinence



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**Keywords:** Fecal incontinence; Biofeedback

**Introduction and objective.**— Study was aimed to evaluate the efficiency of biofeedback, vortex magnetic currents and electrical stimulation for the treatment of patients with faecal incontinence.

**Methods.**— Twenty-eight patients aged 57 + 12 years with anal incontinence were included. Patients were randomized into three groups: First – 13 patients with moderate anal retention of feces, 2nd – 8 patients with complete anal incontinence, the 3rd – 7 patients with denervated anal sphincter and complete anal incontinence. Wexner Scale was administered at the 1st and 10th day of therapy. Daily treatment (day 1 to 10) included: two-channel electrical stimulator “Cefar Peristim Pro”, biofeedback complex “UROSTYM”, electromagnetic stimulation on “BIOCON-2000W”.

**Results.**— Patients of 1st and 2nd groups showed an increase in the compression force of the anal sphincter by 80–95% (average 88%). Seven patients achieved complete anal holding, the remaining 14 patients were able to significantly reduce the number of acts of defecation per day. Three patients showed an increase in the compression force of the anal sphincter by 10–25% and achieved the possibility of containing short time dense faeces.

**Discussion.**— The proposed treatment in the early recovery period after surgery for colon cancer is a highly effective method of faecal retention recovery.

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### Age, gender and symptom intensity influence test taking parameters on functional patient reported outcomes



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**Keywords:** Physical function; Item response theory; Psychometrics; Outcome measures

**Objective.**— Item response theory-based patient reported outcomes (PROs) such as the Activity Measure for Post-Acute Care Computer Adaptive Test (AM PAC CAT) are gaining use due to their flexibility and ease of administration. Their psychometric properties are being explored but little is known about how respondent characteristics may impact precision. The goal of this study was to assess the effects of age, gender, and symptom intensity on respondents' test-taking behaviours and scores.

cal records of 311 adults with late stage lung cancer. Participants were followed monthly by telephone: administration of the AM PAC CAT, followed by numerical rating scoring (NRS) of their pain, fatigue, and dyspnea.

**Results.**— Among > 250 CAT sessions, women and older patients took longer to complete CAT sessions, were more likely to skip items, and produced scores with larger standard errors. Respondents with higher levels of dyspnea and fatigue, but not pain, completed their CAT sessions more rapidly and were less likely to skip items.

**Conclusions.**— Women, geriatric patients, and patients with intense symptoms, differ systematically in the time they are willing to devote to testing and the precision of their responses.

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### Physical activity for management of cancer-related fatigue: A new paradigm



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**Keywords:** Cancer-related fatigue; Physical activity; Sedentary lifestyle process; Cancer

**Background and objectives.**— Of all the cancer-related side effects, fatigue is the most frequently reported symptom: the first to appear and often the last to disappear. The mechanisms of cancer-related fatigue (CRF) are not fully understood and management is still based on the treatment of associated pathologies or recommendations to rest.

**Methods.**— We provide a new approach of CRF management using the 3H syndrome, the vicious circle of the sedentary lifestyle process, as a model. It provides a framework for understanding both the CRF process and re-involving patients in regular physical activity.

**Discussion.**— The main challenges is to convince patients and clinicians that rest is not an appropriate response to fatigue and may even worsen the patient's health status. Against fatigue, physical activity is the most effective care, without side effects. But just presenting the benefits of physical activity is insufficient to convince patients to adopt an active lifestyle. To change behaviors, clinicians and patients must understand the reason why rest is not the best response to CRF. Until now, no analysis had accounted for the entire process involved. Our model is easy to implement and should facilitate awareness and behavior changes.

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P418-e

### Evaluation of a program of exercise training performed in patients with breast cancer



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**Introduction and objective.**— The main objective was to evaluate the adherence of patients with breast cancer program reconditioning programs implemented by service Sports Medicine CHU de Rennes, and the rate of pursuit regular physical activity (PRA) after the period of reconditioning. The secondary Objectives were to determine the causes of the failure of adherence and the pursuit of APR.

**Methods.**— This is a retrospective study of 269 patients.

**Results.**— It has shown that this program of exercise training has a high rate of membership once it started (93.4%) and more than 80% of patients requesting