

Einflussfaktoren auf die Trainingsadhärenz von Patienten mit Kopf-Hals-Tumoren: Ergebnisse der multizentrischen OSHO #94-Studie

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Abstract Text

Introduction: Patient participation in cancer research is a goal of the *National Decade Against Cancer*. In the OSHO #94 trial (*Evaluation of an individualized home training program for patients with head and neck cancer (HNC) in terms of feasibility, safety and effectiveness*), we collaborated closely with local and supra-regional self-help groups in regards to the designing and the realization of the study. The current analysis focuses on the influence of self-help group membership involvement and regional factors on patient characteristics, motivation, adherence, and dropout rates.

Methods: This prospective, multicenter, single-arm intervention study enrolled HNC patients ≥ 18 years, either in aftercare or palliative care with stable remission with immunotherapy. Three university hospitals—Rostock (UMR), Halle (UKH), and Greifswald (UMG)—participated in recruitment. Participants were instructed to follow an individualized home exercise program (≥ 3 x/week for 15–30 min) and endurance training (≥ 2 –3x/week for 30 min) over 12 weeks, documented in a training diary. Broad clinical data were recorded. Membership in a self-help group, demographic data, and quality of life (QoL) were assessed using questionnaires prior to the intervention. Motivation (1=none, 4=high) was recorded weekly by phone. Dropout rates were calculated.

Results: Between January 2021 and May 2024, 53 patients were enrolled (UMR=25, UKH=20, UMG=8). No significant differences in clinical data or QoL were found between centers before the intervention. However, there were significant differences in the proportion of participants from self-help groups (UKH 55%, UMR 28%, UMG 0%; $p=0.015$), in sex distribution (male: UKH 40%, UMR 56%, UMG 100%; $p=0.015$), and in education level (>10 years: UKH 40%, UMR 44%, UMG 13%; $p=0.022$). The motivation score was 3.4 at UKH, 3.3 at UMR and 2.7 at UMG ($p=0.08$). Average weekly training time was 78 min (UMG), 245 min (UMR), and 323 min (UKH; $p=0.015$). Adherence ranged from 0% (UMG) to 84% (UKH; $p=0.012$), and dropout rates from 5% (UKH) to 38% (UMG; $p=0.101$).

Discussion: HNC patients are heterogeneous in several regards. Local factors—such as the existence of self-help groups and their participation in studies—can introduce a selection bias as they might influence study adherence. Therefore, in particular multicenter studies should address these influencing factors by defining distinct inclusion criteria to ensure representative results.

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