

October 11, 2016

Yoga as Therapy: Connecting occupational performance and well-being in cancer survivors.

COMMENTARY

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The prevalence of cancer is on the rise. The lifetime probability of a cancer diagnosis in Canada is 45% in males and 42% in females, with 63% of cancer survivors living 5 or more years post-diagnosis (1). These statistics demonstrate not only cancer's prevalence, but also that Canadians are living for years with the disease. Cancer has the potential to adversely impact well-being at all illness stages, including diagnosis, treatment, and post-treatment. Some survivors experience physical, social, and emotional problems that persist years or even decades after treatment (3). Given the prevalence of cancer and the increasing longevity of individuals impacted by the disease, it is essential for rehabilitation scientists to better understand cancer survivors' needs in order to devise effective, evidence-based interventions. Such therapeutic interventions may not only improve specific health outcomes, but also overall well-being.



The literature tackling the issues faced by cancer survivors across their lifespans is quite robust. Well-being is a major outcome of interest in cancer research, usually defined as: "...the presence of positive emotions and moods...the absence of negative emotions...satisfaction with life, fulfillment and positive functioning" (2). Some of the most prevalent problems identified by cancer survivors are: feelings of fearfulness concerning the return of illness, fatigue, loss of strength, and fears for the future (3). These issues demonstrate how outcomes associated with cancer survivorship have the potential to impact all aspects of well-being.

Given the evidence of ongoing problems affecting the well-being of cancer survivors, such as decreased ability to function, presence of negative emotions, and dissatisfaction with life (2,3), there is a clear need for evidence-based interventions to enhance the well-being of this particular group. Yoga has recently become an increasingly popular intervention for cancer survivors. The existing literature on yoga therapy in cancer has primarily focused on the physiological and psychosocial effects (4-6). A recent systematic review by Buffart et al. (4) demonstrated that yoga intervention groups have been associated with reductions in fatigue, improved mood, and improved

social and emotional functioning for cancer survivors. The same review also indicated that yoga led to increased functional well-being and enhanced quality of life, as well as significantly reduced distress, stress, anxiety, and depression in cancer survivors. Another evidence-based review indicated that yoga can potentially improve awareness levels, sleep quality, spiritual well-being, and quality of life (5), while a recent randomized controlled trial revealed that following yoga therapy nausea, vomiting, pain, appetite loss, and hot-flashes were reduced in cancer survivors (6).

The evidence cited above stands in clear support of yoga as an effective intervention for improving well-being in cancer survivors. Among the healthcare providers working with cancer survivors, occupational therapists (OTs) are in a unique position to potentially address survivor needs with an approach that includes yoga therapy. OTs use a holistic approach to enable people to participate in activities that are meaningful to them, which can include self-care, productivity, and leisure. This is known as occupational performance. One of the primary tenets of occupational therapy is that occupational performance is inextricably linked to health and well-being (5). Given yoga's positive effects on health and well-being, as well as preliminary evidence linking occupational performance and well-being (11), it is reasonable to hypothesize that yoga may be an effective tool in facilitating occupational performance.

However, yoga is still currently under-utilized in healthcare (7) by practitioners, including OTs. Despite evidence in support of positive outcomes of yoga therapy, very little is known about its potential to enhance survivors' occupational performance. OTs therefore may not

consider the benefits of alternative interventions such as yoga when providing services to cancer survivors. Although no studies have investigated the effects of yoga therapy on occupational performance among cancer patients, yoga therapy's effects on occupational performance have been demonstrated in another clinical population (9). In particular, Willis (9) suggested that yoga therapy can increase occupational performance, as measured by the Canadian Occupational Performance Measure (COPM), in adult diabetic patients with peripheral neuropathy. However, this is the only study conducted to date linking yoga with occupational performance. Although it strengthens the argument for yoga's potential to show the same effects in cancer survivors, more research is needed to confirm this hypothesis.

Ongoing research and knowledge translation are needed to delineate the nature of the connection between yoga therapy and occupational performance. This work could strengthen the bridge between yoga therapy and OT by further substantiating the utility of yoga therapy by OTs in cancer care, opening the door to its future inclusion in mainstream healthcare.

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