

Welcome

Welcome to our final e-digest of 2020. This year has been dominated by COVID19 although we all know that cancer prevention, screening and diagnosis and treatment remain as important and challenging as they always have been. The Scottish cancer coalition (<https://scottishcancercoalition.org.uk/>) have never been busier with communicating issues and challenges about cancer care. For more information about their work and concerns see their new twitter account (@ScotCancerCo).

One area that is set to develop further in 2021 and beyond is Prehabilitation services (see article below). Lifestyle behaviours including nutrition, physical activity/exercise, alcohol and smoking issues are important at all life stages to reduce cancer risks but also very important after a diagnosis. The space and time between diagnosis and treatment can be short in days but can appear long for patients who come to terms with the unknowns that lie ahead and filled with frustration as test after test is undertaken and worries increase. Prehab offers the chance to focus on preparation for treatment – and everyone can benefit both physically and mentally even if they come to this stage being sedentary and in older years. Post treatment we hope to see more signposting and support for people living with and beyond cancer who struggle with managing high body weight. Trying to follow healthy ways of life following treatment can be challenging for many reasons but the added difficulties posed by the aches, pains and weariness of obesity means it can be even more challenging.

The recent survey on prehab services in Scotland (see below) suggests there is much work to be done but 2021 is clearly going to be a year of action!

Annie S. Anderson Robert JC Steele

In this issue we have:

- **Highlights from the SCPN blog**
- **Prehabilitation in Scotland**
- **Research Round Up**

- Upcoming Events
- Alternative Advent

Highlights from the SCPN Blog

Don't miss out and make sure you have signed up to the SCPN blog page <https://scpnblog.wordpress.com/> to receive all of our latest blogs straight to your inbox.

Here are some our most recent blogs:-



Dr Suzanne Zaremba, Registered Nutritionist and SCPN Fellow, clears up some of the confusion with regard to vitamin D intakes, with evidence of Scots being unaware of the benefits of taking vitamin D supplements and uncertainty of which supplements to take – [You can have your Vitamin D and eat it.](#)

Our twitter campaign #scpnswaptober saw many of you get involved in making mindful, simple and healthier swaps during the month of October. But why stop there? Read our blog by Professor Anderson for examples of creating healthier habits during



the covid pandemic.
[STOP, Swap and GO!](#)



And finally, with December just around the corner, here are the SCPN's top five 'fun for all the family' and healthier alternatives to the traditional chocolate advent calendar! Who needs chocolate anyway?! [Alternative Advent Calendar](#)

Don't forget all of our blogs can be viewed here:
<https://scpnblog.wordpress.com/>
and if you haven't already

[Click to have our latest blogs straight to your inbox](#)

Prehabilitation in Scotland

Scottish Government in conjunction with Macmillan Cancer Support have recently convened a short life working group (SLWG) on Prehab(ilitation) in Scotland. Rehabilitation programmes have been well established for many conditions but there is now growing evidence that providing support to people with cancer as soon after diagnosis as possible and prior to treatment can be beneficial for short and long term health outcomes. Current evidence suggests that three key factors should be considered within the design of prehabilitation programmes: physical activity/exercise, nutrition (individualised requirements in relation to under nutrition, otherwise keeping to a healthy balanced diet) and psychological support. However, we know little about prehab practices in Scotland. To remedy this the SLWG undertook a nationwide survey to identify the availability of relevant services.

A total of 295 responses were obtained from people working in a variety of professional backgrounds and care settings including primary and secondary care, local authority and third sector. The responses indicated that less than

one-third of respondents (28%, n=81) could identify prehabilitation activities within their local area. None of the identified services offered a multi-modal, multi-phasic, multi-professional intervention with clear access routes and embedded outcome measures. However, many respondents indicated further interest in developing this area with requests for support, guidance on approach and mentions of sharing practice. Perceived challenges in delivery, funding and resources, pathway redesign and timing, evidence and willingness of patients to participate were highlighted. On the other hand, it was reported that clinical and managerial support could clearly facilitate action.

This work forms the basis of future action in this area – watch this space.

More details on this work are available here:-

<https://www.woscan.scot.nhs.uk/wp-content/uploads/Prehabilitation-Services-in-Scotland-for-Cancer-FINAL-150920.pdf>

Research Round Up

There has been some fantastic research published since our last e-digest! Here are some recently published articles we have found interesting at the SCPN.

NIHR Collaboration in Cancer and Nutrition working group on cancer prevention

In 2019 the NIHR Collaboration in Cancer and Nutrition working group on cancer prevention held a satellite research meeting in Dundee supported by The Scottish Cancer Foundation, World Cancer Research Fund and Association for Study of Obesity. Participants heard about national and international research and aspirations for future research on developing non pharmacological approaches for impacting on cancer risk through weight loss and changes in body composition. These outputs from the meeting and further discussions have been published by the British Journal of Cancer as “perspective” papers . They are truly multi-disciplinary in origin drawing together behavioural, clinical, social and medical scientists and make a strong case for why we need to move beyond the epidemiological links between obesity and cancer.



#scpnscience
for research in cancer
prevention and
screening

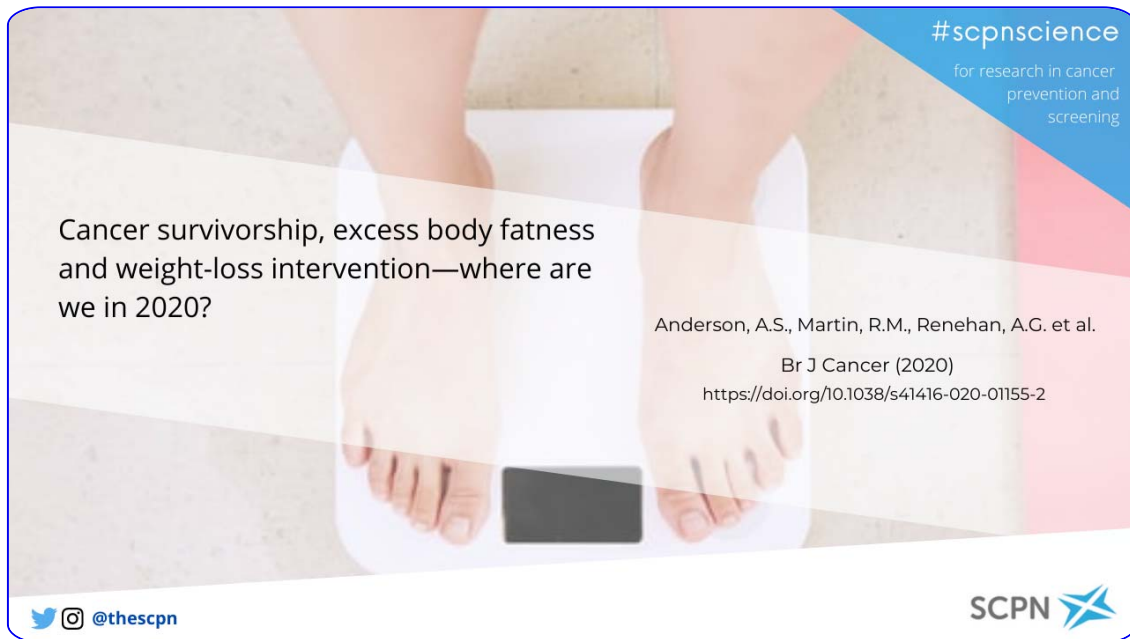
Cancer prevention through weight
control—where are we in 2020?

Anderson, A.S., Renehan, A.G., Saxton, J.M. et al.
Br J Cancer (2020)
<https://doi.org/10.1038/s41416-020-01154-3>

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[https://www.nature.com/articles/s41416-020-01154-3.](https://www.nature.com/articles/s41416-020-01154-3)




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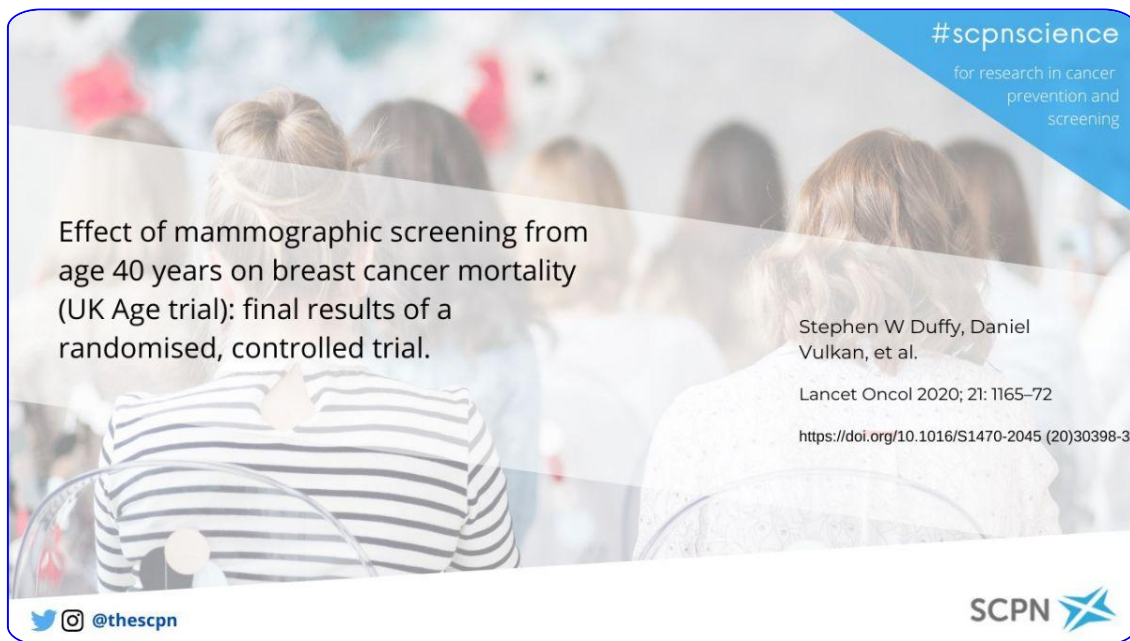
Cancer survivorship, excess body fatness
and weight-loss intervention—where are
we in 2020?

Anderson, A.S., Martin, R.M., Renehan, A.G. et al.
Br J Cancer (2020)
<https://doi.org/10.1038/s41416-020-01155-2>

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[https://www.nature.com/articles/s41416-020-01155-2.](https://www.nature.com/articles/s41416-020-01155-2)






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Effect of mammographic screening from
age 40 years on breast cancer mortality
(UK Age trial): final results of a
randomised, controlled trial.

Stephen W Duffy, Daniel
Vulkan, et al.

Lancet Oncol 2020; 21: 1165–72
[https://doi.org/10.1016/S1470-2045\(20\)30398-3](https://doi.org/10.1016/S1470-2045(20)30398-3)

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[https://www.thelancet.com/journals/lanonc/article/PIIS1470-2045\(20\)30398-3/fulltext](https://www.thelancet.com/journals/lanonc/article/PIIS1470-2045(20)30398-3/fulltext)

The age trial has shown a clinically significant reduction in breast cancer mortality by offering annual screening to women in their 40's. However, the short screening interval means that the widespread introduction of screening younger women would cause a very significant increase in the costs and workload of breast screening programmes. Not only this, but the number of trained staff needed to make this happen in the UK is just not available at the present time. Realistically, the introduction of screening for women under 40 can only happen when single reading with the help of artificial intelligence prompts takes over from the current practice of double reading. Individualised screening, where, at age 40, women have their risk assessed using family history, genetic variance and mammographic density would also help screening to be focused on those at most risk. Both of these changes are currently experimental but early results are promising.

Comments from co-author Professor Andy Evans, University of Dundee.



<https://ijbnpa.biomedcentral.com/articles/10.1186/s12966-020-00997-6>

Evidence suggests that sedentary time is associated with increased risk of endometrial cancer. Hunter and colleagues analysed data from the prospective UK Biobank cohort study. Cox proportional hazards models were used to determine associations between daily recreational screen time and site-specific cancer risk. Statistical modelling was used to substitute sedentary time for physical activity. During a mean follow-up of 7.6 years, 28,992 incident cancers were identified among 470,578 adults. Although the majority of observations were small findings show that daily recreational screen time, particularly TV viewing, was associated with small increased risks of oesophago-gastric and colon cancer. Replacing 1-h/day of TV viewing with 1-h of moderate-intensity physical activity or walking was associated with lower risk of oropharyngeal, lung, breast and colorectal cancers.



<https://www.euro.who.int/en/health-topics/disease-prevention/alcohol-use/publications/2020/alcohol-and-cancer-in-the-who-european-region-an-appeal-for-better-prevention-2020>

Reducing non-communicable disease, including cancer, is one of the main health priorities in Europe, as outlined in the Joint Statement putting prevention at the heart of Europe's Beating Cancer Plan and WHO's European Programme of Work, 2020-2025. Globally alcohol is responsible for 3 million deaths every year. Alcohol consumption plays a causal role in several types of cancer. Awareness of alcohol as a risk factor for cancer is generally low which diminishes wider public support needed for the successful integration of a range of public health policies. This fact sheet provides up-to date information and guidance for those working in this field and it sets out policy options to reduce the alcohol-attributable cancer burden including; increasing excise taxes, enforced bans or comprehensive restrictions on advertising and restrictions on the physical availability of retail alcohol.

Recent/Ongoing SCPN Research

Living Well after Cancer –Supporting Weight Management

International guidelines on cancer survivorship highlight the importance of weight management (WM) as a priority for people living with and beyond cancer, but support is largely omitted from rehabilitation programmes in Scotland. The SCPN team have recently completed a research study, funded by the Scottish Government, to explore the provision of WM services in the

context of cancer survivorship. We conducted 10 focus groups and interviews with people living with and beyond cancer who identified as being overweight or obese. The topic guide explored various themes and was underpinned by the COM-B Model of behaviour. We identified a number of important observations:

- I. Many Participants were interested in receiving lifestyle advice or WM support but did not feel that they had the capability to engage in WM due to reduced self-efficacy and beliefs in their own physical and mental ability to actively engage in WM (often as a result of treatment side-effects).
- II. Participants reported limited or 'non-specific' WM advice from health care providers and a lack of clear sign-posting to WM services. Those who proactively sought help did so through cancer charities.
- III. While many did consider a healthy lifestyle as important and were interested in receiving lifestyle advice or WM support. Treatment side-effects, primarily fatigue, led to a lack of motivation which was a key barrier to active engagement.
- IV. Participants were unclear as to how WM services would be best delivered but agreed that support should be Personalised, and service providers should be both knowledgeable and sensitive to cancer specific issues.

Results suggest that there are significant 'gaps' in the provision of WM support within the health service. While further work is needed the study highlights an urgent need for the alignment of services to ensure that the appropriate help is available to those seeking WM support.

This study was presented at the NCRI Virtual showcase on 2nd November, 2020:-

A qualitative study exploring weight management support for people living with and beyond cancer in Scotland. The patient perspective.

Karen Barnett, Meena Bhagat, Bob Steele and Annie S Anderson.

Upcoming Events



International Agency for Cancer Research (IARC) are hosting a World Cancer Report Webinar Series - Obesity and cancer:-

"Evidence linking obesity and cancer": Dr Edward L. Giovannucci

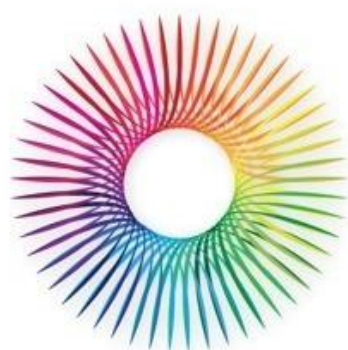
"Interventions - What are the successes? What about the future?": Dr Annie S. Anderson

Questions and Answers

Monday 14 December 202, 16:00 CET.

Live webinar spaces are limited. Register now and join early on the day!

<https://learning.iarc.fr/wcr/obesity-and-lifestyle-webinar/>



UKSBM
UK Society for Behavioural Medicine

16th Annual Scientific Meeting, 13-14th January 2021

In the wake of the COVID-19 pandemic, UKSBM has decided to host a virtual Annual Scientific Meeting (ASM) as we are keen not to miss out on our flagship event.

The ASM will take place over two half days (Wednesday 13 and Thursday 14 January 2021), and will include keynote speakers, parallel sessions, research awards, special interest group meetings, early-career and mid-career researcher sessions, the Society's Annual General Meeting, and chances to network and socialise.

We would like to invite all colleagues interested in the field of behavioural medicine to participate in this two-day meeting. More information can be found on our conference website.

Abstract submission now closed.



Cancer Prevention Course for Health Professionals

e-learning course by WCRF

An online Cancer Prevention course for Health Professionals. Accredited by the Royal Society for Public Health and covers information about lifestyle and cancer prevention. It also counts towards your Continuing Professional Development (CPD). The course is Free of Charge and available online here:- <https://www.wcrf-uk.org/uk/here-help/health-professionals/online-training>

All our upcoming events can be found on our [website](#).

Alternative Advent



It's that time of year again, and so to go hand in hand with our advent blog, here we present The SCPN's 'Alternative Advent'....

Commercial marketing has sold us that the Christmas countdown should include an Advent calendar chocolate before breakfast. In more recent years Advent calendars have become more extravagant with alcohol companies offering their own calendars including 24 miniature spirits for each day of Advent.

Excess body fat is associated with increased risk of 13 cancers and we are seeing significant increases in many of these cancers at younger ages. Action is needed at all levels to help address these trends.

Here at SCPN we produced an alternative Advent, where we can give little gifts to ourselves each day that promote health and happiness. Have a scroll through our ideas for physically active party games, no-booze Christmas drink alternatives and healthy treats that allow us to join in with the spirit of Advent

while taking care of our health.

Take a closer look at each of our #alternativeadvent ideas below and enjoy a healthy lead up to Christmas.

<https://scpnblog.wordpress.com/2020/11/20/advent-a-time-for-looking-forward-to-healthy-happy-days-ahead/>

Interested in our work?

More information on all the work we do at SCPN can be found on our website or follow us on social media



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