CANCER PREHABILITATION AS PART OF THE CANCER CARE CONTINUUM

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Cancer prehabilitation is a proactive, multidisciplinary intervention delivered between cancer diagnosis and the onset of treatment, aiming to optimize physical and psychological resilience. This concept is gaining recognition as a critical element of the cancer care continuum, complementing acute treatment and survivorship strategies. By focusing on early risk modification, prehabilitation helps patients better tolerate treatment, recover faster, and experience improved quality of life. Core components of cancer prehabilitation include structured exercise programs, nutritional support, psychological counseling, and behavior modification, such as smoking cessation. These interventions target common vulnerabilities among cancer patients, including fatigue, deconditioning, and anxiety. Studies demonstrate that prehabilitation improves functional capacity, reduces postoperative complications, and enhances psychological well-being. In randomized controlled trials, multimodal prehabilitation has been associated with a 20-40% increase in pre-treatment physical performance.

Moreover, it decreases the rate of treatment delays and lowers hospital readmissions, making it both clinically effective and cost-efficient. In breast and colorectal cancer populations, home-based and hybrid delivery models have shown strong patient engagement and high adherence. Despite its proven benefits, cancer prehabilitation is still not widely implemented, particularly across Mediterranean health systems. Barriers include limited interdisciplinary infrastructure, lack of standardized protocols, and variable funding models. However, recent pilot programs in Italy, Spain, and Croatia suggest that integrating prehabilitation into existing rehabilitation services is both feasible and scalable. Physical medicine and rehabilitation (PM&R) specialists are well-positioned to lead cancer prehabilitation initiatives.

Their expertise in functional assessment, therapeutic exercise, and team-based care aligns naturally with the demands of early intervention in oncology. Involvement of PM&R professionals ensures that interventions are tailored, evidence-based, and responsive to individual patient needs. This presentation will discuss the clinical rationale, current evidence, and practical implementation strategies for cancer prehabilitation, with an emphasis on models adaptable to Mediterranean healthcare systems. It will also explore how PM&R can play a leadership role in shaping early cancer care and survivorship planning. In conclusion, cancer prehabilitation represents a strategic shift toward proactive, personalized care that bridges diagnosis and treatment. By embedding it into standard care pathways, healthcare systems can improve outcomes, reduce costs, and empower patients at the very start of their cancer journey.

Keywords: Neoplasm, Physical Therapy, Multidisciplinary Team

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