Physical Therapy and Other Rehabilitation Therapies for Patients with Cancer and Bone Involvement

A Publication of
The Bone and Cancer Foundation
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This fact sheet includes information about physical therapy and other rehabilitation therapies for patients who have cancer and bone involvement. The goals of therapy and types of therapy are discussed.

1. Q. Is appropriate physical therapy safe for cancer patients with bone involvement?

A: It is always a good idea to discuss any therapy, including physical therapy, with your oncologist or oncology nurse to see if he/she thinks treatment would be useful, as no two cases are the same.

However, several studies show that the benefits of appropriate physical therapy outweigh the slight risk of causing a fracture. Many patients are able to see some improvement in mobility and independence as a result of physical therapy.

2. Q. What are the goals of physical therapies for patients with bone metastasis?

A: The goals of physical therapy for cancer patients with bone involvement are to provide a better quality of life, help manage pain, decrease the possibility of bone fractures, increase mobility, self care ability, and patient safety.

Physical therapy is meant to complement medical or surgical treatments, not to replace those treatments. Physical therapies are often prescribed as part of an overall treatment plan which can involve several different health professionals.

Patients can discuss physical therapy with their doctor to determine how it may fit into their treatment plan.

3. Q. What kinds of physical therapy may be recommended for patients with bone involvement?

A: Physical therapy recommended for patients with bone involvement will vary greatly, depending on which bone or bones are involved, how much pain the patient feels, the stability of the bone or bones involved and the medical or surgical treatments being used.

Working with the doctor, the therapist will design a program considering the patient’s active range of motion before experiencing pain, as well as any restrictions on putting weight on the affected limb(s). The program may include mild exercise and stretching. Many doctors feel that resistive or resistance exercises should be avoided because of the possible risk of fracture. The patient should be informed about both the risks and the benefits of any exercise program.

The therapist may suggest core stabilization exercises and posture training.

The core muscles surround the middle of the body, including the trunk and the pelvis. Core stabilization exercises are designed to strengthen those muscles, which help with balance and stability.
Patients may also work with physical therapists and other health professionals on ways to safely perform every day activities, such as climbing stairs, getting in and out of the shower or bathtub, and performing other daily activities.

Physical therapy may also include pain reduction therapies, such as hot and cold packs, massage and electrical stimulation (TENS), depending on which bone or bones are involved.

The physical therapist may also provide the patient and care giver with information on how the patient can get the most benefit from the treatments, how the treatments will make the patient feel, and what problems may arise during treatment.

4. Q. What devices might patients use during physical therapy?

A: In addition to exercise, patients may be trained in the use of assistive devices, such as canes, walkers or braces to help them retain mobility, care for themselves and maintain independence.

5. Q. What non-medical therapies in addition to physical therapy may be recommended to lessen the bone pain and improve quality of life for patients with bone involvement?

A: Other supportive care may include psychological therapies and strategies, biofeedback, holistic treatments such massage or relaxation, acupuncture, acupressure, hypnosis, music therapy and guided imagery, among others. These therapies should not replace medical or surgical treatments, but may be used in addition to those treatments to help manage pain and help the patient feel better.

6. Q. Which medical professionals may be involved in treatments using physical and other rehabilitation therapies?

A: Some of the medical specialists who may participate in the overall treatment plan include:

- **Oncologists** – doctors who specialize in treating cancer.
- **Radiation oncologists** – doctors who use radiation to treat cancer.
- **Neurologists/Neurosurgeons** – doctors who treat illnesses and injuries related to the brain, spine and nervous system.
- **Orthopedic surgeons** – doctors trained to deal with problems that develop in the bones, joints, and ligaments of the human body.
- **Physical medicine doctors or Physiatrists** – doctors who devise rehabilitation plans to restore maximum physical function lost through injury, illness or disabling conditions.
- **Oncology nurses** – nurses who are experienced in treating cancer patients.
- **Orthopedic nurses** – nurses who work with orthopedic doctors.
- **Physical Therapists** – medical professionals who help individuals who have been injured or physically affected by illness to recover or improve function.
- **Mental health professionals** – psychologists, psychiatrists, social workers and other medical professionals who help patients cope with the stress caused by pain or treatments.

The American Physical Therapy Association has a special interest group of physical therapists who specialize in treating cancer patients. Information and fact sheets are available at [www.oncologypt.org](http://www.oncologypt.org)
The mission of The Bone and Cancer Foundation is to:

- Provide information to cancer patients and family members on the causes and current treatment of cancer that involves the bone;
- Provide information and serve as a resource for physicians, nurses and other health professionals regarding the management of cancer that spreads to the bone.

Website: www.boneandcancerfoundation.org

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