



# FOCUS ON RESEARCH

## **LivingWELL – a feasibility study to assess the impact of a lifestyle intervention in people having an assessment of their family history of colorectal or breast cancer**

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### **Aim**

To assess the feasibility, acceptability and indicative outcomes of a lifestyle intervention (LivingWELL) for overweight people with a family history of breast cancer (BC) or colorectal cancer (CRC) in order to inform the design of a definitive randomised control trial (RCT) for weight management.

### **Project Outline/Methodology**

A RCT of usual care versus a weight management programme (LivingWELL) delivered by lifestyle coaches (via one face to face visit, phone calls and web support) was carried out in NHS Tayside and Grampian. Feasibility assessments included patient recruitment, programme implementation, adherence to the intervention delivery protocol, and retention of patients in the trial. Indicative outcome measures (notably changes in weight, diet, and physical activity measured by accelerometer) were collected at baseline and at 12 week follow-up. At study end, a questionnaire assessed participant satisfaction and qualitative interviews elicited participants and coaches experiences.

**Key Results** Of 600 patients identified through the NHS family history/genetics service, 480 potential participants were approached, of which 196 (41%) expressed an interest in the study and 78 people were included. Face to face implementation of the programme was challenging within the time allotted, telephone communications were good and website usage low (accessed by 33%). Adherence to the intervention delivery protocol was modest (62%). Questionnaires and measurement data were undertaken by >98%. Accelerometer measurements for at least 4 days was achieved by 84% and 54% at baseline and follow up respectively. Retention was high at 12 weeks (76%) and similar in both groups (74% control and 77% intervention). Changes in body weight loss indicated a favourable response

with 36% of the intervention group (vs 0% in control group) achieving 5% weight loss. Favourable increases in moderate physical activity and decreases in dietary fat scores were also reported. Qualitative data showed the programme was well received but further work is needed to refine components, particularly dietary aspects which were appreciated less than the physical activity tasks.

### **Conclusions**

It is feasible to recruit and retain people attending NHS services with a family history of BC or CRC. A weight management intervention focussed on diet and physical activity utilising behavioural change techniques is acceptable to participants and indicative results suggest favourable outcomes consistent with cancer risk reduction.

### **What does this study add to the field?**

These results demonstrate that many overweight people with a family history of breast and colorectal cancer attending NHS genetics clinics do accept invitations for short term lifestyle interventions with favourable results. Long term studies are needed to confirm the impact of this intervention on weight control.

### **Implications for Practice or Policy**

Despite evidence about the importance of lifestyle patterns in people at greater cancer risk, the delivery of weight management counselling is absent within NHS genetics clinics. The current work highlights a feasible opportunity for robust testing of this intervention in routine care.

### **Where to next?**

Future discussions are planned to explore the development of a larger definitive RCT

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