# Vocational rehabilitation for women with breast cancer following surgery: pilot RCT

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## Aims

To determine:

- **feasibility** of larger RCT
- **impact** of intervention

## Eligibility

Employed women aged 18-65 with breast cancer treated first with surgery over 12 months

## Recruitment

3 hospitals in Scotland over 12 months

## Intervention

Referral to VR service with case management
Outcome Measures

Primary
Self-reported sick leave days

Secondary
a) Quality of life (FACT-B)
b) Fatigue (FACIT-Fatigue)

Sample (Analysed: n=18)
Age: mean = 50 [SD=5.45]
Stage: 2 (44%) 3 (28%) 1 (17%)
Hours worked/week:
mean = 32.5 [SD=10.02]

Results (Trial Feasibility)

Low eligibility rate (15%)
1,114 assessed, 163 eligible
Age/Retired (67%)
Unemployed (12%)

Low recruitment rate (21%)
23 (of 111 given information)

Low attrition rate (4%)
1 lost to follow-up

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**Results (Intervention Impact)**

**Sick leave**
- 54 fewer days (1.8 months)
  - I=55, C=109, p=0.172

**QoL**
- Higher in intervention group
  - FACT-B TOI: I=66.1, C=62.9;
  - Adj. mean diff. = 3.2, p=0.582

**Fatigue**
- Higher in intervention group
  - FACIT-Fatigue: I=33.7, C=37.8;
  - Adj. mean diff.=-4.1, p=0.450

**Conclusions**
- Recruitment processes require refinement to increase recruitment rate.
- Promising signs that case management intervention reduces duration of sick leave and increases QoL.
- However, definitive RCT is required.

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