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INTRODUCTION

Cancer side effects can have a long-term impact on well-being.^{1,5} Addressing these effects is complicated by shortages in healthcare funding and limited available services.^{3,4,5} Health coaching provides a holistic approach to enhancing well-being beyond primary oncology care.^{3,4,5} Availability of digital health options has expanded, particularly after COVID-19, increasing access to necessary services.^{3,6}

METHODS

Referrals to the Cancer Coach by Osara Health™ program via insurers, employers and hospital clinics. Health coaches administered the PROMIS-10.^{7,8} via phone before the first and after the final coaching call. PROMIS-10 scores were recalculated to present Global Physical Health (GPH) and Global Mental Health (GMH) scores.^{7,8} Wilcoxon signed-rank tests to compare pre- and post-program scores; effect size calculations using Cohen's classification; T-tests determined correlations between the number of calls and app usage with changes in GPH and GMH scores.

CONCLUSIONS



Participants with various cancer diagnoses showed significant positive and meaningful changes in physical and mental health after participating in the program.



Participants with head and neck cancers appeared to benefit the most from the program.



This approach promotes self-management and facilitates survivorship care.

CANCER COACH BY OSARA HEALTH™



6-12 week program combining telehealth coaching (three phone calls) and a mobile app to support cancer patients.



Coaches use **motivational interviewing, goal setting, and behaviour change strategies to support and empower people** to improve their overall health.^{2,4,5}



Previous research found that **participants are 73% more likely to return to work and 16.5 weeks faster** than non participants.⁶



Addresses **symptom tracking, nutrition, sleep, exercise, psychosocial well-being, and return to work.**^{1,2}

How does the **Cancer Coach by Osara Health™** impact the mental and physical health of people with cancer, as measured by patient-reported outcomes?

Which programmatic aspects of the **Cancer Coach by Osara Health™** contribute to improvements in mental and physical health?



RESULTS

PARTICIPANTS

89 participants

Mean age **52.86** years

70% female

Cancer Diagnosis Type:
Breast = 38.3%; Blood = 15.7%;
Bowel = 9%; Head & Neck = 9%;
Prostate = 5.6%



GPH scores *increased* from a mean of **11.64 to 13.44** ($p < .001$, $r = 0.37$)

GMH scores *increased* from a mean of ($p < .001$, $r = 0.34$). **12.37 to 14.15**

The largest changes were: everyday physical activities ($p < .001$, $r = 0.31$); fatigue ($p < .001$, $r = 0.29$); emotional well-being ($p < .001$, $r = 0.26$).

Head and neck cancers showed significantly higher GPH and GMH scores.

GPH AND GMH T-SCORES

GMH T-score increased by 4.58 points, moving the overall score from the "good" to "very good" category ($p < .001$).^{7,8}

T-score changes GPH = 4.43 points and GMH = 4.58 points are considered a minimally important change for people with cancer (2-6 points).⁹

Table 1: GPH and GMH T-scores

		PRE	POST		PRE	POST	
Global Physical Health	Mean T-score	42	47.09	Global Mental Health	Mean T-score	44.47	49.052
	Standard Deviation	± 6.745	± 6.655		Standard Deviation	± 8.233	± 7.4992
	Category	Good	Good		Category	Good	Very Good
	Change (points)	4.43			Change (points)	4.58	
	P value	0.001			P value	0.001	

Table 1: Global Physical Health and Global Mental Health T-scores

COACHING PHONE CALLS, GPH AND GMH SCORES

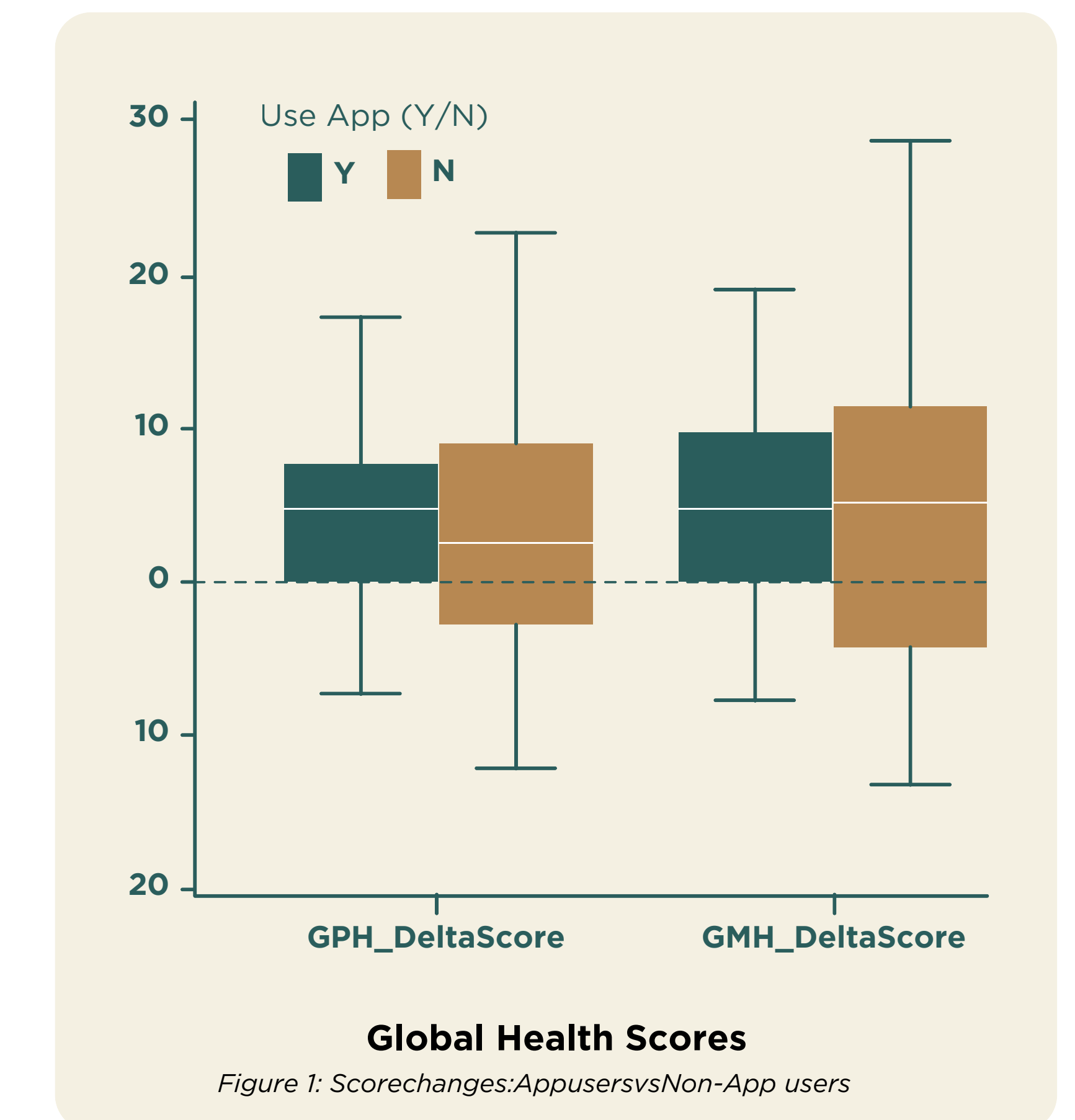
Slight improvements in GPH and GMH scores with an increased number of calls.

No significant difference between call frequency and median GPH ($p < .693$) and GMH ($p < .744$) score changes.

APP USAGE, GPH AND GMH SCORES

Both app users (62%) and non-users (38%) showed overall positive improvements in their GPH and GMH scores

App users had a slightly higher median GPH score change (4.45 ± 7.01) than non-app users (4.40 ± 8.54)



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