

# Promoting Self-Management of Breast Cancer-Related Lymphedema Through the Remotivation Process

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Breast cancer affects 3.8 million women (breastcancer.org, 2021) and breast cancer-related lymphedema (BCRL) is a side effect of cancer treatment that manifests as a chronic swelling of the upper extremity. Current treatment is directed towards symptom management through a self-management program (SMP; Cal & Bahar, 2016) but most women do not adhere to the SMP (Alcorso et al., 2016). Motivation is crucial in the adherence to SMPs (Teo et al., 2015). The Remotivation Process (de las Heras et al., 2003) is an intervention based on the MOHO concept of volition and has not been studied in BCRL. This study attempted to address this through 2 research questions: (1) How does the Remotivation Process change the daily performance of lymphedema management techniques? and (2) How does the Remotivation Process affect the client's manifestation of BCRL? The study was a within-subjects quasi-experimental design with a repeated measure of volition and weekly performance of the SMP as the dependent variable. Convenience sampling was used to recruit females, ages 18 and older, with BCRL and referred to OT between May 2019 and May 2021. Eleven participants completed the 4-week intervention, with 5 having BCRL on the left arm and six on the right arm. Nine participants underwent axillary lymph node dissection and 2 underwent sentinel node biopsy. The Remotivation Process was implemented in the form of one-on-one, weekly discussions with each participant through Zoom for 4 weeks with a follow-up discussion during the 8th week. A set of open-ended guide questions reflecting each stage of the Remotivation Process were used to facilitate the participant's reflection of her experience when performing the SMP, and her perception of BCRL in the context of her daily activities during the week. Field notes were used to record the observations during the discussion, determine the participant's level of motivation during the week, and tailor the discussion according to the description of the participant's volitional stage in the Remotivation Process manual. The study used the Volitional Questionnaire (VQ), frequency count of SMP, and circumferential measurement as outcome measures. Data from the VQ, frequency count of SMP performance, and circumferential measurement were analyzed through non-parametric tests using SPSS. Results show a weekly progression in volition based on the VQ scores. The weekly discussion sessions using the Remotivation Process had a statistically significant effect on Volition,  $X^2(4) = 33.350$ ,  $p = 0.000$ . To answer the first research question, results showed that the mean frequency of SMP performance increased each week. Post hoc analysis showed a statistically significant increase only in the frequency of performance of exercise between week 1 and week 8 ( $Z = 2.555$ ,  $p = 0.011$ ). Spearman's rank-order correlation showed a strong, positive correlation only between volition and exercise performance ( $r_s(11) = 0.907$ ,  $p = 0.000$ ). To answer the second research question, there was a statistically significant decrease in the circumference of the affected arm in the metacarpals ( $Z = 1.960$ ,  $p = 0.050$ ), 8 cm from wrist ( $Z = 2.549$ ,  $p = 0.011$ ), 12 cm from wrist ( $Z = 2.429$ ,  $p = 0.015$ ), 16 cm from wrist ( $Z = 2.499$ ,  $p = 0.012$ ), and 24 cm from wrist ( $Z = 2.352$ ,  $p = 0.019$ ). The participants showed improved volition, an increase in adherence to the SMP, and a decrease in the size of the upper extremity at the end of the study. This is consistent with the literature, which states that women who adhered to SMP reported a decrease in symptoms of BCRL. The study showed that the Remotivation Process can make an impact on the participants' motivation when used as an OT intervention and demonstrate the unique contribution of OT in addressing chronic conditions.

## References

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