

The Alberta Moving Beyond Breast Cancer (AMBER) Cohort Study: Recruitment, Assessment, and Description of the First 1402 Participants

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BACKGROUND

The Alberta Moving Beyond Breast Cancer (AMBER) study is a novel cohort study collecting data on physical activity (PA), sedentary behavior, health-related fitness (HRF), and biologic mechanisms in breast cancer survivors. The aim is to understand the role of physical activity and health-related fitness in breast cancer survivorship.

OBJECTIVES

The purpose is to describe the baseline participant characteristics, assessment completion and retention rates of the first 1402 participants recruited into the AMBER Study.

METHODS

Participants

- Newly diagnosed stage I (≥T1c) to IIIc female breast cancer survivors, <80 years, not pregnant, with baseline assessments within 90 days of surgery
- Breast cancer cases identified through Alberta Cancer Research Biobank (Calgary) and Cross Cancer Institute (Edmonton)

Data Collection*

- (1) Administration of questionnaires and activity monitors (ActigraphGT3X[®] and activPAL[®])
- (2) Completion of health-related fitness testing (cardiorespiratory fitness, upper/lower body strength/endurance, flexibility)
- (3) Anthropometrics/DXA scans (body fat)
- (4) Lymphedema/upper body function
- (5) Blood samples collected pre/post-surgery (pre-surgery preferred)



*All measurements collected at baseline, 1 and 3 years post-diagnosis. At 5 years post-diagnosis, only questionnaires completed.

Medical chart abstraction for staging, treatments, co-morbidities, new cancers, recurrences/progression data at 10 years post-diagnosis.

RESULTS

Baseline characteristics	Calgary (n=794)	Edmonton (n=608)	Total (n=1402)
Age at diagnosis (n=1402)	55.5 ± 11.3	54.2 ± 10.3	54.9 ± 10.9
Marital status (n=1394)			
Married/common law	570 (72.0%)	460 (76.0%)	1030 (73.9%)
Not married	222 (28.0%)	142 (24.0%)	364 (26.1%)
Education (n=1361)			
≤High school	164 (21.5%)	138 (23.1%)	302 (22.2%)
≥University	599 (78.5%)	460 (76.9%)	1059 (77.8%)
Menopausal status (n=1323)			
Premenopausal	292 (38.9%)	230 (40.2%)	522 (39.5%)
Postmenopausal	459 (61.1%)	342 (59.8%)	801 (60.5%)
Weight, kg (n=1402)	73.9 ± 15.5	74.1 ± 16.1	74.0 ± 15.8
Body mass index, kg/m² (n=1402)	27.6 ± 5.5	27.6 ± 5.8	27.6 ± 5.6
Normal weight (< 25 kg/m ²)	292 (36.8%)	233 (38.3%)	525 (37.5%)
Overweight (25-30kg/m ²)	273 (34.4%)	209 (34.4%)	482 (34.4%)
Obese (>30 kg/m ²)	229 (28.8%)	166 (27.3%)	395 (28.2%)
First degree family history of breast cancer (n=1368)			
≥ one first degree relative	535 (68.9%)	443 (75.0%)	978 (71.5%)
No first degree relatives	242 (31.2%)	148 (25.0%)	390 (28.5%)

Table 1. Baseline descriptive characteristics of the first 1402 participants in the AMBER study, Alberta, 2012 - December 31, 2018. Values are means ± SD or n (%) within each study site and overall.

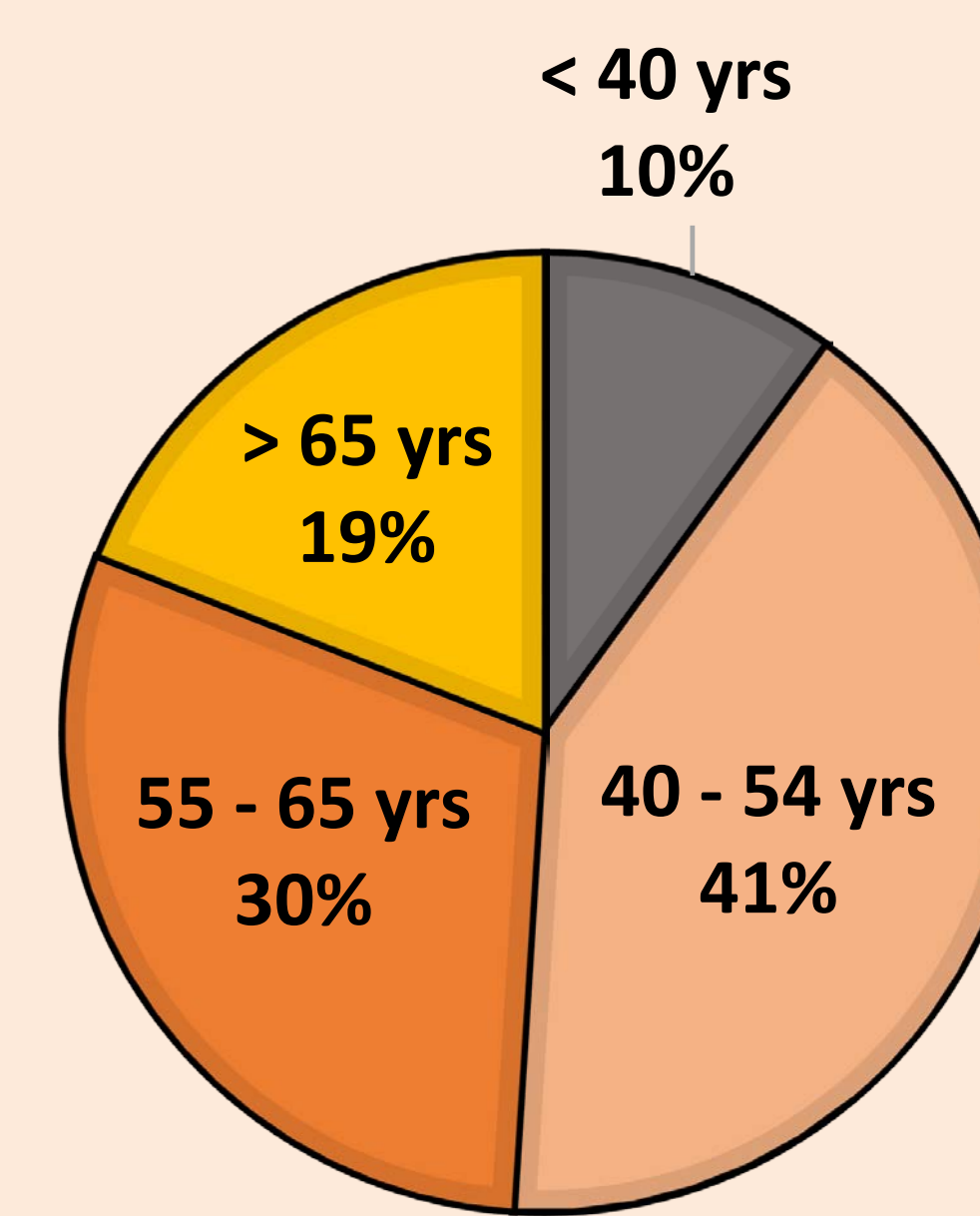


Figure 3. Age at diagnosis (n=1402)

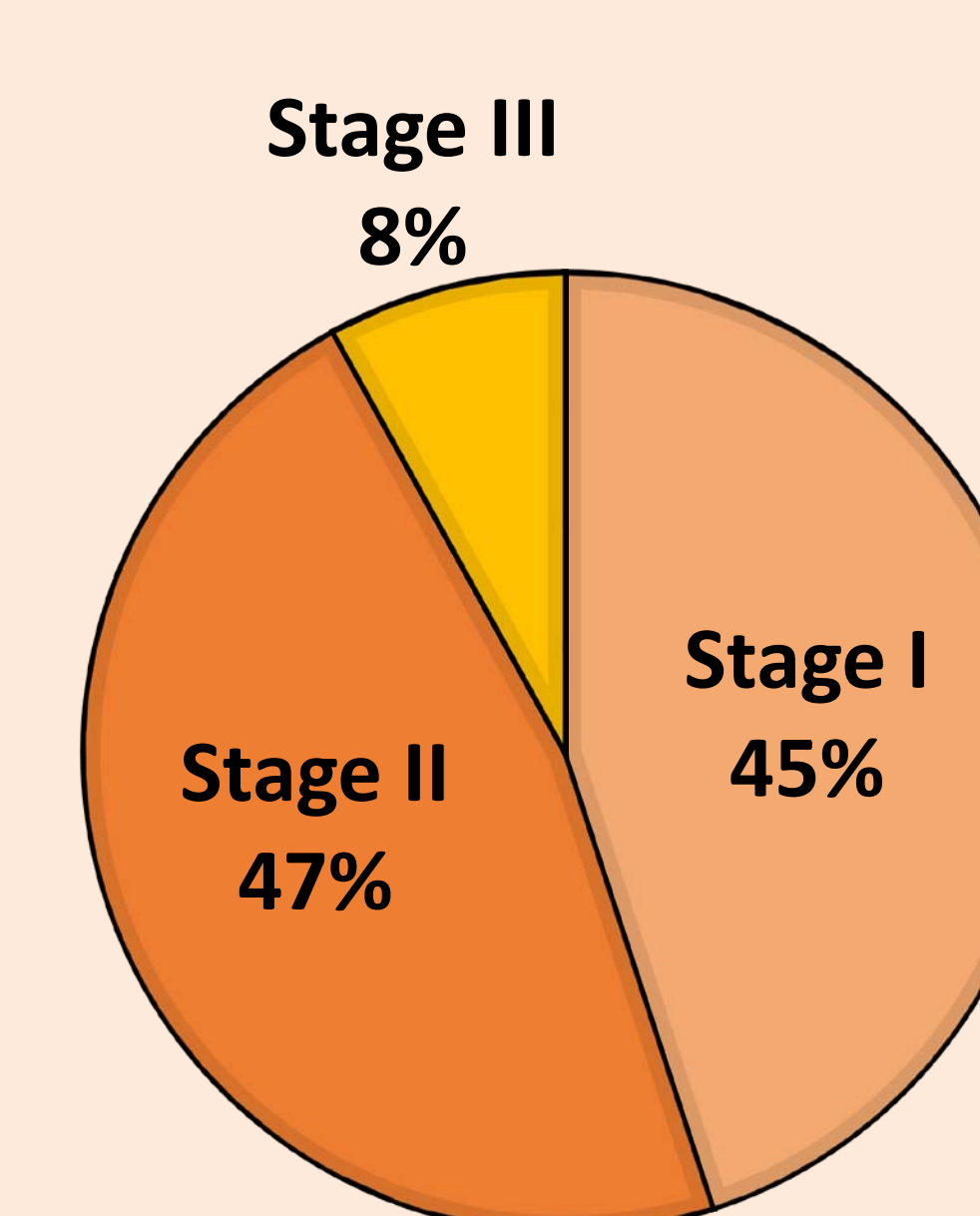


Figure 4. Stage at diagnosis (n=1402)

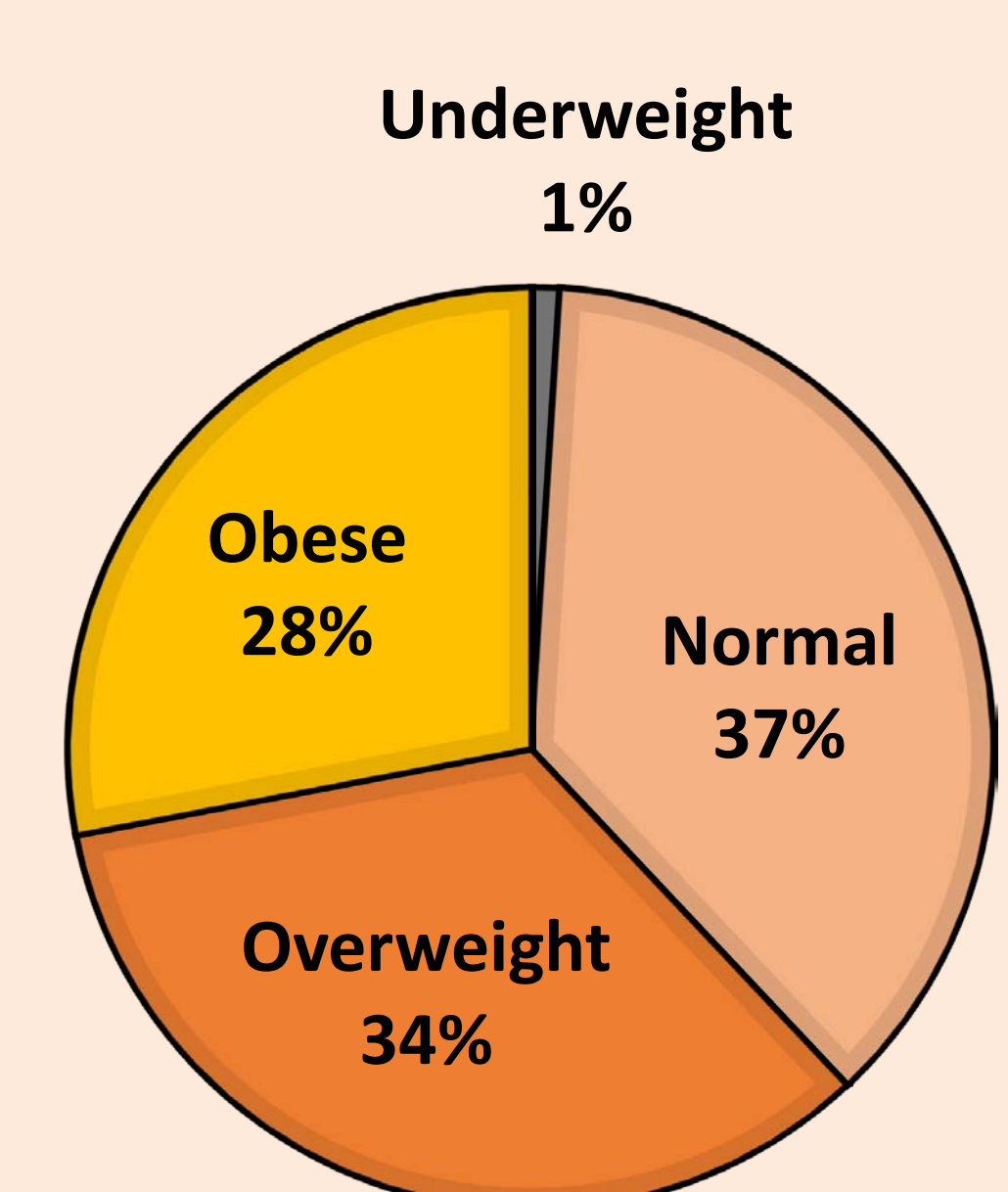


Figure 5. BMI Classification at diagnosis (n=1402)

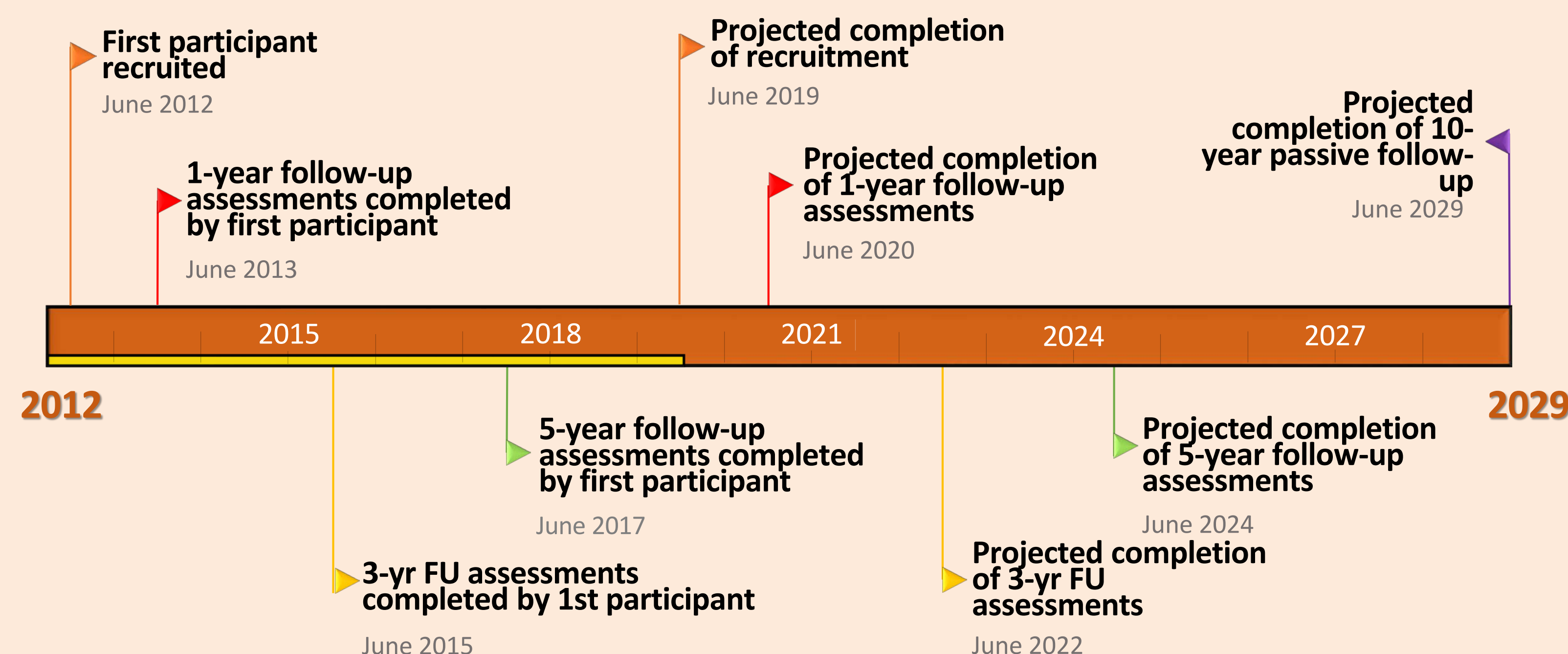


Figure 1. AMBER study projected timeline.

Health-Related Fitness Variables	Total	Calgary	Edmonton
Grip Strength, kg (n=1349)	54.8 ± 12.1	56.3 ± 12.7	53.0 ± 10.9
Weak ^a	46 (3.4%)	22 (2.9%)	24 (4.1%)
Normal ^a	958 (71.0%)	499 (65.7%)	459 (77.9%)
Strong ^a	345 (25.6%)	239 (31.5%)	106 (18.0%)
Sit and Reach^b, cm (n=1326)	27.4 ± 9.9	26.6 ± 10.2	28.4 ± 9.6
Poor (< - 8.0 cm)	2 (0.15%)	2 (0.27%)	-
Fair (-7.9 cm – 0.0 cm)	1 (0.08%)	1 (0.14%)	-
Average (0.1 – 10.0 cm)	48 (3.62%)	32 (4.32%)	16 (2.7%)
Good (10.1 – 20.0 cm)	276 (20.8%)	169 (22.8%)	107 (18.3%)
Excellent (20.1 – 30.0 cm)	454 (34.2%)	251 (33.9%)	203 (34.6%)
Super (>30.1 cm)	545 (41.1%)	285 (38.5%)	260 (44.4%)
Cardiorespiratory Fitness (ml/kg/min)^c (n=1056)	26.5 ± 6.0	26.2 ± 6.1	26.9 ± 5.8
Below Average ^d	595 (56.3%)	334 (58.6%)	261 (53.7%)
Average ^d	208 (19.7%)	113 (19.8%)	95 (19.6%)
Above Average ^d	253 (24.0%)	123 (21.6%)	130 (26.8%)

Table 2. Health Related Fitness (HRF) data of the first 1402 participants in the AMBER study, Alberta, 2012 – December 31, 2018.

Completion rates for all health-related fitness measures at baseline are ≥ 87%, with the exception of upper body strength measurements (83%) because of functional limitations among some participants. Completion rates for blood collections, lymphedema and questionnaires are 99%, 100% and 94% respectively. Additionally, 1,052, 562 and 193 participants have completed one, three and five year follow-ups, which represent retention rates of 88%, 78% and 75% respectively.

CONCLUSION

The AMBER Cohort Study is nearing completion of baseline recruitment and will soon be able to investigate many research questions regarding the associations between physical activity, sedentary behaviour, health-related fitness and breast cancer outcomes.

ACKNOWLEDGEMENTS

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RESULTS

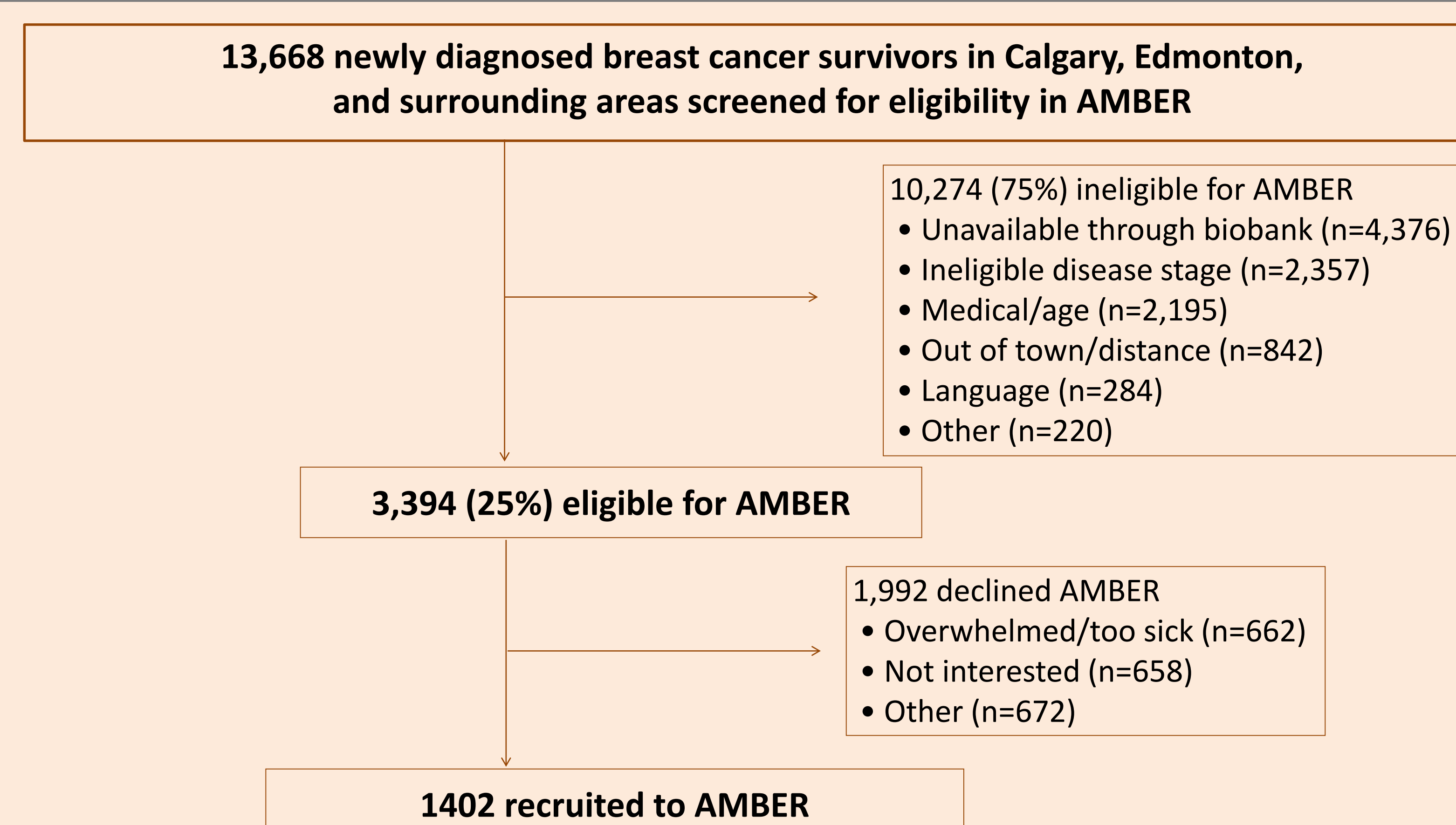


Figure 2. Recruitment of the first 1402 in the AMBER study, Alberta, 2012-December 31, 2018.

