Much of the existing research confirms the assumption that regular physical activity can play a crucial role in nonpharmacological therapy and quality of life management in cancer survivors. The treatment of oncological diseases itself brings about numerous undesirable side effects, such as cardiotoxicity, anxiety, depression, sarcopenia, polyneuropathy, cancer fatigue and sleep disorders. Regular physical activity is associated with significant benefits for health including a lower risk of developing certain types of tumours and elimination of the accompanying undesirable effects of oncological treatment.
A number of epidemiological studies found a correlation between regular physical activity and lower mortality linked to oncological diseases. The minimal amount of the activity needed to gain this benefit has not been established, however, the recommendations of ACSM indicate that at least 150 minutes of moderate physical activity are needed per week. Physical exercise as nonpharmacological treatment is a domain of cancer survivors therapy whose aim is to incorporate targeted controlled exercise programmes into the overall treatment plan of the patients. Exercise programmes can be performed both in the duration of the illness as well as in the period prior to the treatment or in the course of adjuvant antitumour treatment (including chemotherapy) and in survivors. When prescribing physical activity it is necessary to take current health condition of the patient into account including their comorbidities, age or the level of physical fitness. If controlled physical activity is to become an indispensable part of oncological treatment it will be necessary to prove the therapy is safe and cost-effective.