Randomised Controlled Trial of Non-Pharmacological Interventions for Dyspnoea
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Objectives:
Dyspnoea is a common and distressing problem for people with cancer. Despite the potential benefits of non-pharmacological strategies incorporating breathing retraining and psychosocial support for managing dyspnoea, such interventions have proved difficult to implement in routine clinical practice. The primary aim of this study is to evaluate the efficacy of a brief tailored intervention incorporating breathing exercises and targeted psychological support to reduce dyspnoea and improve function in people with cancer.

Methods and Analysis:
The study involves a randomised controlled trial. The intervention is tailored following an assessment of patient needs and delivered over four sessions (one face to face and three by telephone) using a range of evidence-based psychoeducational strategies for developing the patient's self management abilities. A total of 141 patients were randomised to intervention and control groups. To evaluate the impact of the intervention, an interviewer-administered survey was used at three time points: (T1) at the time of recruitment (maximum of 7 days prior to the intervention); (T2) 4 weeks following first intervention session; (T3) 8 weeks following first intervention session. Key outcomes include patients' use of recommended strategies for managing dyspnoea; ratings of the severity, interference and distress associated with dyspnoea; functional status; and anxiety. Each of these endpoints is to be considered separately in analyses.

Findings and Implications:
This intervention translates best practice psycho-educational strategies into a practical tool that requires minimal clinic time. It uses support materials in different forms, so that patients can use these when they need to and when they are relevant to them, rather than in a more structured or formal way. If effective, it has the potential to be used across a range of settings to reduce the effect of this distressing symptom.