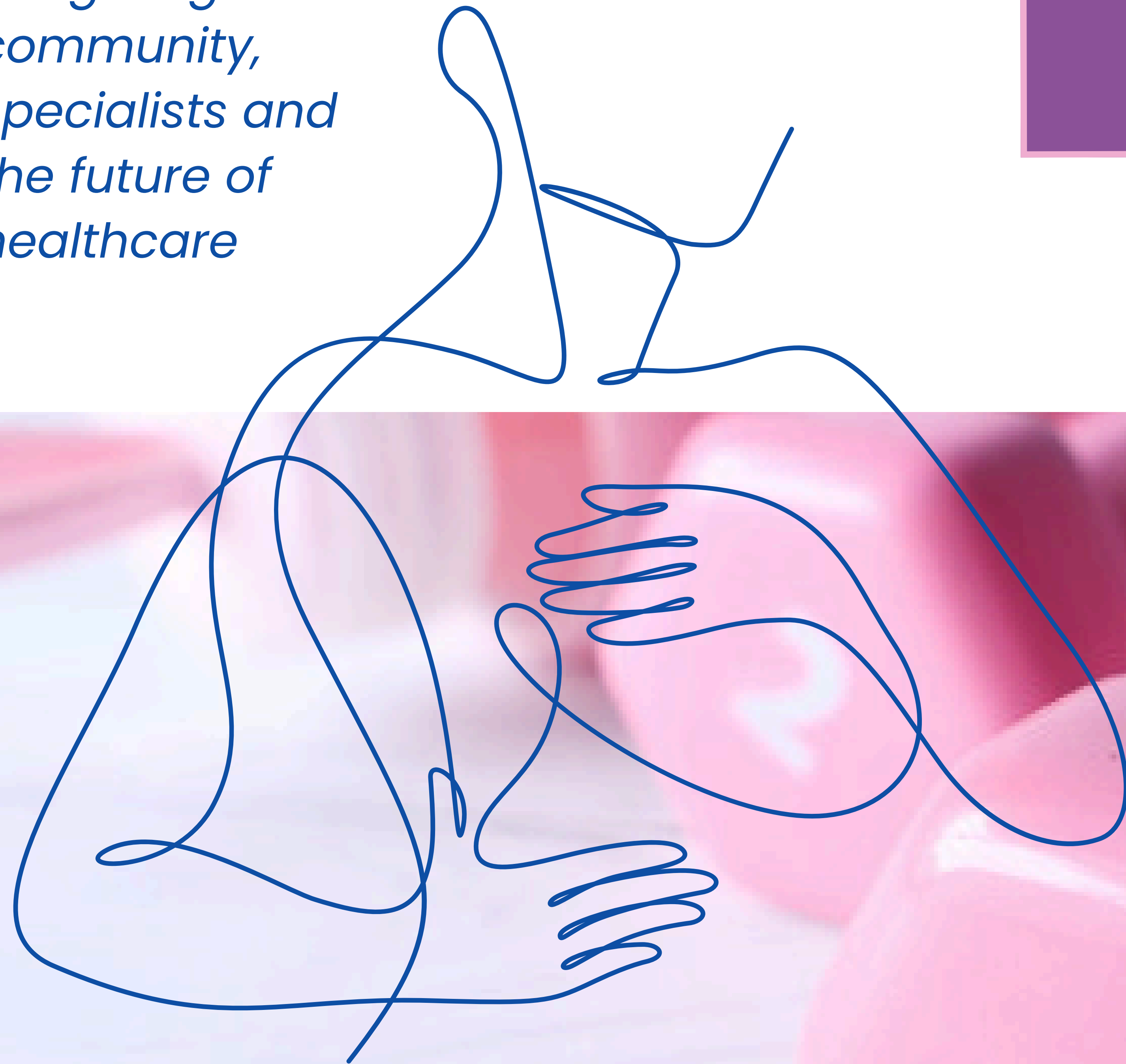


MOVEMENT IN SUPPORT OF BREAST CANCER

The project that brings together community, specialists and the future of healthcare



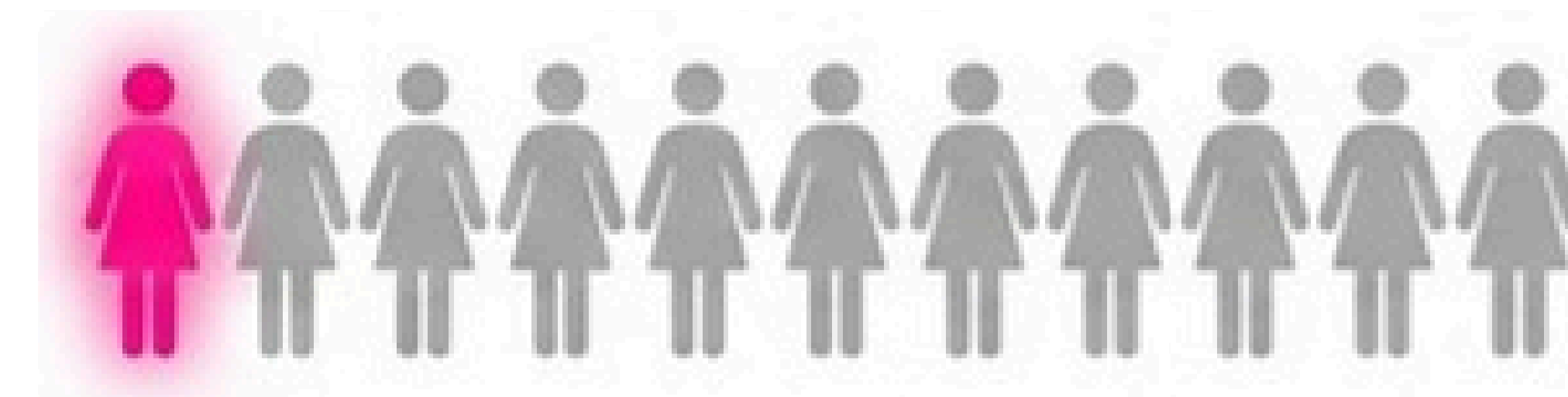
YOUR RECOVERY, STEP BY STEP SAFE MOVEMENT DURING AND AFTER BREAST CANCER TREATMENT

FROM EUROPEAN FRAMEWORK TO PRACTICAL TOOL

Breast cancer remains one of the most significant health challenges.



This guide translates European-level frameworks and evidence into a practical, patient-centered tool.



1 out of 11 women in the EU-27 will develop breast cancer before the age of 74

- **Mortality:** Breast cancer is the leading cause of cancer-related death among women in Europe
- **Early detection:** Many cases are still diagnosed at a late stage, despite **early-stage survival rates exceeding **80%****

BREAST CANCER RISK FACTORS AND SOLUTIONS

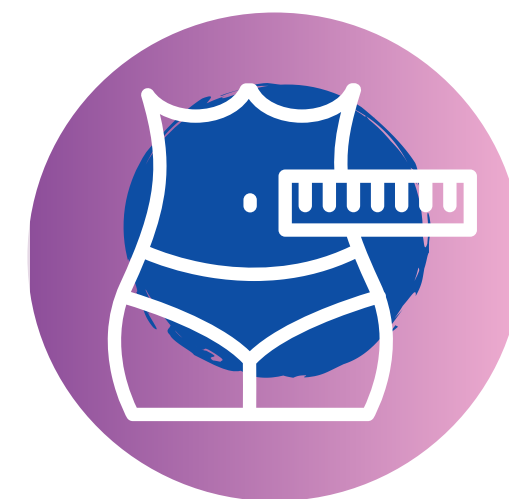
The guide is evidence-based and aligned with European initiatives.

Modifiable risk factors in breast cancer

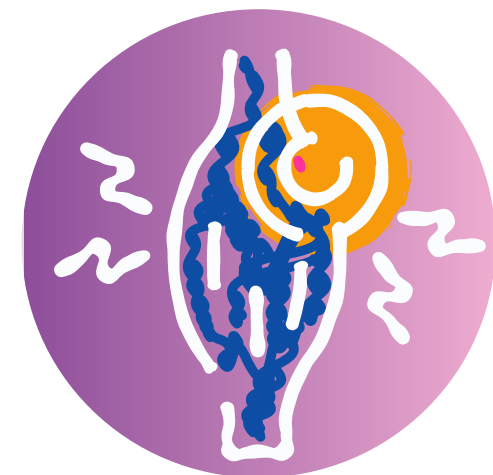
- Overweight and obesity
- Physical inactivity
- Alcohol consumption
- Unbalanced diet
- Chronic stress and insufficient sleep



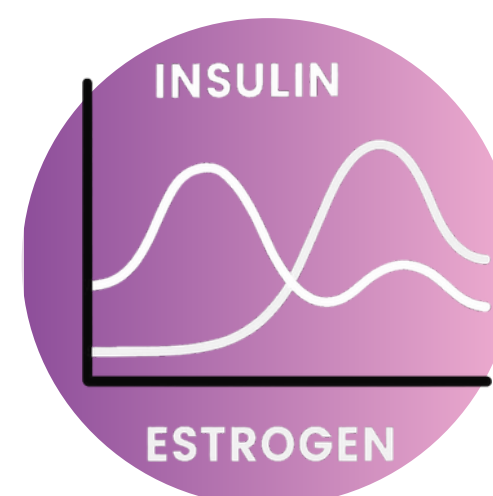
Physical activity: protective mechanisms



Regulation of body weight



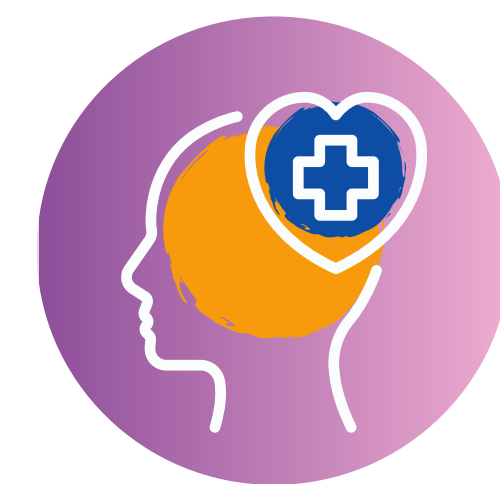
Decrease in systemic inflammation



Reduction of insulin and estrogen levels



Improved immune function



Mental health benefits



Physical activity guidelines

- Developed within European initiatives
- Evidence-based
- Adapted to individual risk and life stages
- Applicable across prevention, treatment, and survivorship



WHY THERE WAS A NEED FOR A PHYSICAL ACTIVITY GUIDE

Physical activity in
breast cancer is
not an **"extra."**
It is a real need.

Accurate information about
physical activity is part of
comprehensive oncology care.

**Without guidance, consequences
may include:**

- Unnecessary avoidance of physical activity
- Functional decline
- Increased anxiety
- Reduced quality of life

THE “RECOVERY, STEP BY STEP” GUIDE IS:

1.

An educational, preventive, and practical guide

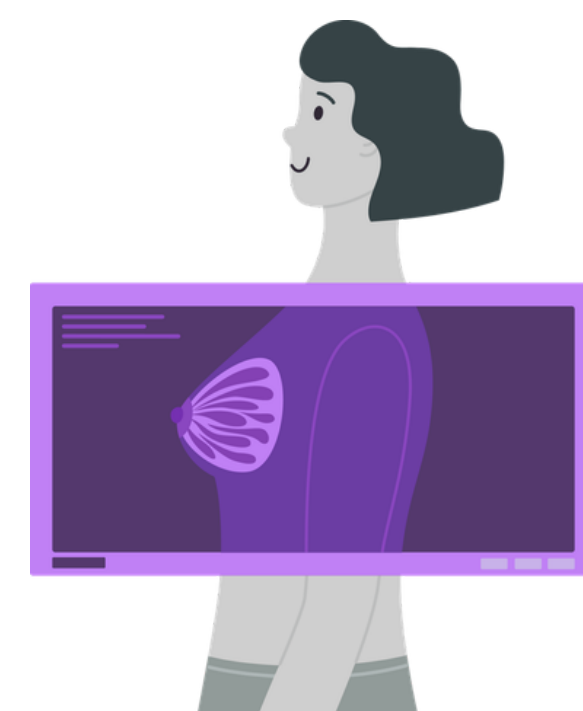
3.

A community-wide awareness tool

2.

A structured framework for safe, adapted exercises:

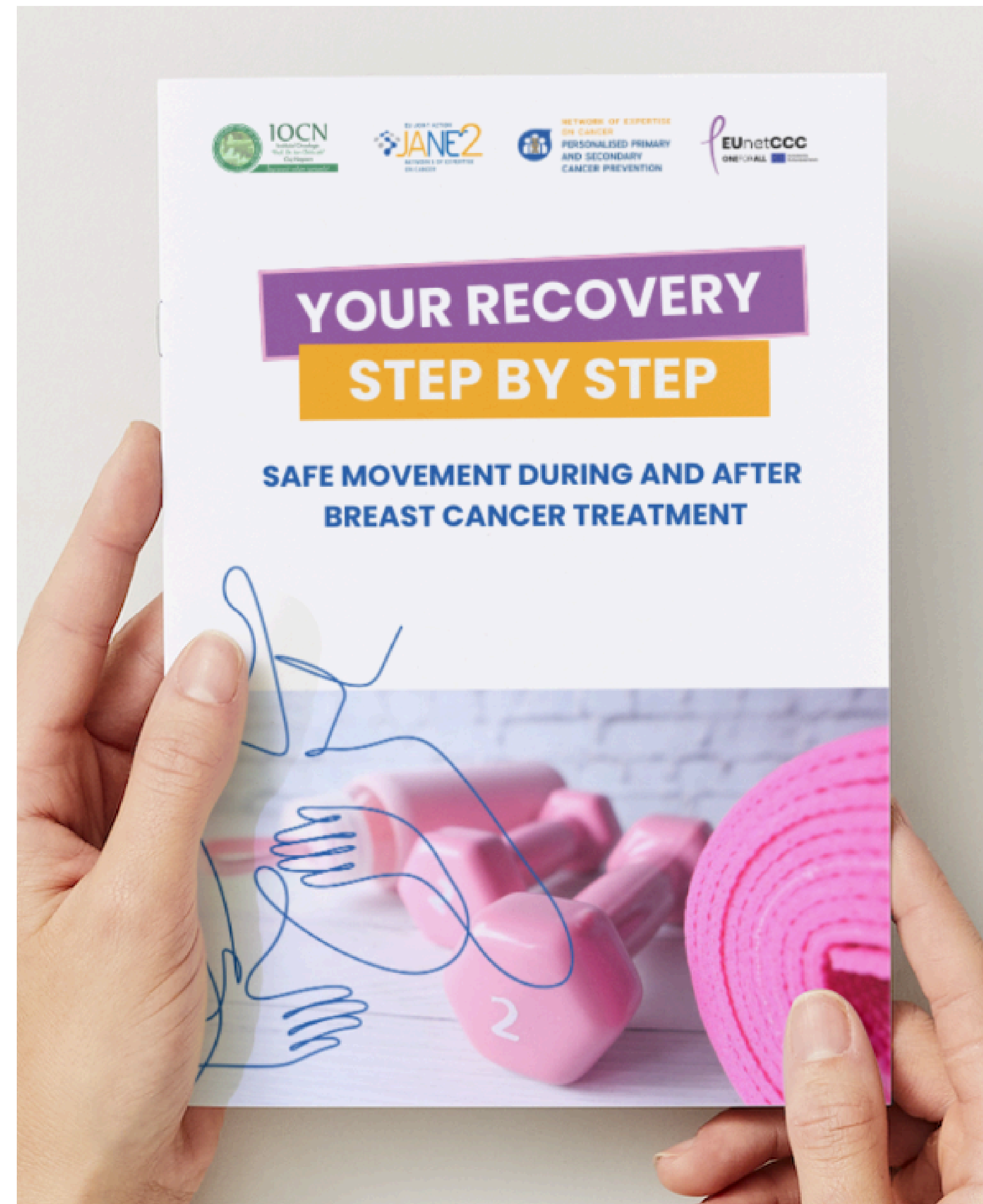
Before treatment



During treatment



Recovery and post-treatment



What it is NOT:

- It does not replace medical treatment
- It does not promise a cure
- It does not guarantee prevention in the absence of a healthy lifestyle

Physical activity is not about performance. It is about daily support.

THE CONCEPTUAL MODEL BEHIND THE GUIDE

The guide is built on **an adaptive operational model.**

This creates a circular system, usable from diagnosis to long-term survivorship.

1.

The oncological continuum

- Pre-treatment
- Active treatment
- Postoperative
- Survivorship

2.

The adaptive exercise cycle

- Evaluation
- Decision
- Guided progression
- Adaptation
- Re-evaluation

THE EVALUATION CARDS

Evaluation is translated into 3 complementary "cards."

They define the appropriate starting level.

Together, they allow a personalised and conscious decision.

CARD 1

What you can check on your own

Tick the movement that most closely matches your current reality.

Mobility: how high does your arm rise?

I can only raise my arm to shoulder level.
 The shoulder is still stiff or guarding. You start with gentle mobilisations, without strength.

I can raise my arm slightly above shoulder level, but with caution.
 You have moderate mobility. Wall exercises are suitable, where you have support and control.

I can raise my arm almost fully, without significant pain.
 Good mobility. You can introduce light strength (resistance bands, 0.5 to 1 kg).

Basic strength: how much power do you have in your legs and trunk?

I can stand up from a chair 10 to 12 times without stopping.
→ You have good basic strength. You can work with light-to-moderate strength.

I find it hard to stand up multiple times.
→ You start with exercises without weights, controlled and assisted (support from a chair).

Energy: how quickly do you get tired?

I can walk for 6 minutes without stopping.
→ You have a good energy level. You can increase the pace, depending on how you feel.

I get tired quickly, I need to stop often
→ You start with short periods of movement (1 to 2 min) + frequent breaks.

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Functional self-assessment

- Mobility
- Basic strength and balance
- Energy level
- Perceived exertion
- Emotional relationship with movement

Medical safety

- Mobility
- Basic strength and balance
- Energy level
- Perceived exertion
- Emotional relationship with movement

CARD 2

What needs to be assessed by a doctor / specialist

Now that you know how your body feels, it's time to complete the assessment with the things that only a doctor or specialist can check. This information shows you how much effort is safe for you today and whether there is anything that needs to be adapted before you begin the exercises.

Important tests for safety

These are not always felt in the body, but they directly influence how much effort your body can tolerate.

Haemoglobine – shows your real energy level
→ If it's too low, your body needs gentle exercises.

Neutrophils – shows how well your immune system is protected
→ If they're low, we avoid crowded spaces and exercises with a risk of scratches/accidents.

Warning signs: fever, chest pain, dizziness, palpitations
→ If these occur, exercises are postponed; your body needs protection.

Why does this matter?
These values help you work safely without overloading your body during treatment.

Post-surgical situations: when you need special adaptation

You still have drains
→ You can only do very gentle mobilisations; strength exercises are postponed.

The scar is red, taut or painful
→ Take a break from shoulder exercises; we resume only after assessment.

You feel pain greater than your 'normal'
→ We adjust the intensity until we find the safe and comfortable zone.

Why does this matter?
The operated area needs protection until the tissues heal.

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CARD 3

What level are you at now?

We combine what you feel, what we have assessed and the doctor's recommendations. This is how we find out how intensely you can work and which types of exercises are the most suitable for you.

Your daily activity level shows how much movement you can tolerate and which types of exercises are appropriate for you. If you move normally around the house, exercises can be light-to-moderate. If you get tired quickly, we move to a gentle level. And if you need support for simple activities, we start with mobilisation and breathing.

1. How do you manage daily activities?

I move normally around the house, without getting tired too quickly.
→ You can work at a light-to-moderate level.

I move around, but I get tired more quickly. I need frequent breaks.
→ Gentle exercises, slow pace, regular breaks.

I get tired even during simple activities, I need support.
→ Gentle mobilisation + breathing, without intense effort.

2. How does your body feel today?

I feel stiff / tense.
→ You need mobility + breathing.

I feel weak / without power in my arms or legs.
→ You need light, adapted strength exercises.

I have joint pain or bone discomfort.
→ You need exercises with controlled impact + balance.

I have good energy and almost full mobility.
→ You can tolerate brisk walking and light-to-moderate strength.

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Functional positioning

- Tolerated daily activity
- Fatigue
- Pain or stiffness
- Current effort capacity

DECISION: CONSCIOUS LEVEL SELECTION

After evaluation, the patient asks:

“What can I safely and sustainably do today?”

The guide does not impose rigid algorithms.

It encourages:

- Understanding
- Reflection
- Personal responsibility
- Safety-based choice

Begin your journey through movement

Before surgery: preparing your body (prehabilitation)

The period before surgery can be full of questions and emotions. But it's also a stage when your body can be supported: a few days or weeks in which you prepare gently for what lies ahead. Even 10 to 15 minutes a day can make a difference in how you recover after the procedure.

- ▣ Deep breathing
- ▣ Gentle mobility for shoulder and thorax
- ▣ Light posture exercises
- ▣ Short walks, as you feel able
- ▣ Gentle scapular activations
- ▣ Relaxation and calm breathing rhythm

This is not a stage of 'performance', but one of gentle preparation: like a warm-up for your body.

After surgery

The first 0 to 2 weeks	2 to 6 weeks after surgery
You are in the phase where your body needs protection. Everything is slower, more delicate and that is perfectly normal.	You begin to feel a little more freedom. Your shoulder gradually allows a greater range of motion.
<ul style="list-style-type: none">▣ Breathing▣ Small mobilisations▣ Movements for ankles, knees, wrists▣ If you have drains, take care not to pull on them	<ul style="list-style-type: none">▣ Increased mobility▣ Exercises with the stick▣ Wall exercises▣ Scapular activations
You don't need to prove anything. You are helping your body heal.	This is the stage where your body gains confidence. You accompany it with patience.

After surgery:

After 6 weeks: you gradually return to yourself

Your body is more stable and you can move almost normally.

- ▣ Light strength (resistance bands / 0.5 to 1 kg)
- ▣ Functional movements
- ▣ Cycling, brisk walking
- ▣ Full mobility

Little by little, you return to your activities.

During chemotherapy

Usually, the first days after infusion are harder: you may feel tired, nauseous or without energy, so movement is reduced to a few minutes. After day 7 to 10, many patients feel a recovery and this is your 'good window': walking, mobility, light strength. There's no perfect day. There's the day when you feel ready and this rhythm is different in every chemotherapy cycle.

- ▣ Days immediately after infusion: breathing + minimal mobility
- ▣ Days 7 to 10: walking + mobility + light strength
- ▣ Good days: breathing, mobility, walking, moderate strength
- ▣ Hard days: breathing, gentle mobility, no pressure

During radiotherapy

Tension may appear in the shoulder or thorax: this is common. Radiotherapy has its own rhythm. It's usually given 5 days a week, for several weeks. Fatigue and skin sensitivity may increase gradually, so it's normal for some days to be harder.

- ▣ Gentle movements daily
- ▣ Minimal mobility if the skin is irritated
- ▣ A few minutes make a difference

Here, gentle consistency is the key.

“FIND YOUR RHYTHM” GUIDED PROGRESSION: HOW EXERCISE EVOLVES SAFELY

Progression is structured across five components.

Progression is regulated by biological tolerance, not by pressure.

1. Intensity

- Light
- Moderate
- Challenging

2 How you feel the intensity of an exercise: the RPE scale (Rate of Perceived Exertion)

This table helps you understand how much your body is 'working' during movement. You can use it to make sure you stay in a safe and comfortable zone. You don't need equipment or measurements: just think about how you feel.

Scale RPE adopted for you	How it feels in the body	What it means for you
1 very light	You breathe normally, you can talk easily.	Standing, moving slowly, very gentle warm-up.
2-3 light	Breathing is calm, you can talk without effort.	Good for days with low energy or demanding periods. Comfortable movements.
4-6 moderate	You breathe faster, but you can talk in short sentences.	Main zone for safe and efficient exercises in most days.
7-8 intense	You breathe hard, it is difficult to carry on a conversation.	It is not necessary during treatment. Avoid in sensitive times.
9-10 very intense / maximum	You breathe very hard, you cannot talk.	Avoid completely during treatment or recovery.

This scale helps you choose exercises based on how you feel, not based on how much you should do. During treatments, your body can change from one day to the next and that's normal.

On most days, it's enough to stay in the 2 to 4 zone and on good days you can reach 5 to 6. If you're breathing hard or can no longer speak, return to a gentler intensity. This is not a competition: it's your care for yourself.

2. Progression pillars

- **Body Position** (lying, sitting, standing)
- **Exercise Level** (warm-up, basic, advanced, cool-down)
- **Dosage** (duration, repetitions, sets, frequency)

3 Progression: the 3 essential pillars

Progression doesn't just mean harder exercises, it means a natural evolution, built on three pillars that work together: body position, exercise level and dosage. When you understand these pillars, it becomes much easier to sense what is allowed, when it's good to advance and when it's healthier to stay at a previous level.

Pillar 1: Body position

The position in which you perform your exercises says a great deal about what your body can safely tolerate. In fact, position is the first step in progression.

- Lying is the gentlest position. You'll use it right after surgery or on days when you feel pain, tension or fear of movement.
- Sitting is the transitional position you have between lying and standing. It's the position you use when you feel the pressure on the torso.
- Standing is the functional position, which you use when mobility begins to improve and you feel confident moving your arms again. Standing with resistance is the advanced level, suitable only when your energy and mobility allow additional effort.

These positions repeat across all treatment stages. They're not rigid rules, but a way of listening to your body and giving it exactly the support it needs each day.

Pillar 2: Exercise level

Regardless of treatment or how you feel on a given day, exercises follow the same structure: warm-up, base, advanced, cool-down.

The structure stays the same, but the content adapts to you.

- The warm-up prepares the body through breathing and thoracic mobility.
- Base exercises regain movement at the shoulder and shoulder blade.
- Advanced exercises introduce strength, stability and functional movements.
- The cool-down calms tension and stabilises breathing.

Think of this progression as a path: you start with small steps, then, when your body shows you it feels safe, you climb the next stairs.

Pillar 3: Dosage

Dosage tells you how much to do, how intensely and how often. It's the way you ensure that the exercises help you, not exhaust you.

- Volume: start with 6 to 10 repetitions, 1 to 2 sets.
- Intensity: the movement should be pain-free or no greater than 3/10.
- Frequency: mobility is worked on daily, strength, 2 to 3 times per week.

Breaks: they're unlimited. Take them whenever your body asks you to.

If one day you get tired more quickly or feel more stiff, that's normal. It doesn't mean you have regressed. Adjust your pace and continue gently.

4 Standardised progression (valid for all stages)

No matter what stage you're in: prehabilitation, post-surgery, chemotherapy, radiotherapy or hormone therapy, progression is built in the same simple steps. Each level is a guide, not an obligation.

Level 1: Lying position

This is where we start when the body needs protection: right after surgery, on days with pain or at times when you feel unsure. Here you do: breathing, gentle mobilisations, tension release.

Level 2: Seated position

When stiffness decreases and you feel more in control, you can move to seated. You have stability and the body has room to relearn simple movements. Here you do: active mobility, scapular activation, light exercises.

Level 3: Standing (with wall support)

When mobility is good, pain is below 3/10 and the scar no longer creates tension in the area, you can work standing. Here you do: wall slides, thoracic mobility, control exercises.

Level 4: Standing with resistance

This is the level where your body is ready for more: you have energy, balance and confidence in movement. Here you do: light strength with resistance bands or small weights, controlled rates.

STANDARD VISUAL MODEL – Exercise progression

(This is the final template, which you will use at every stage)

STAGE: _____
(Prehabilitation / Post-surgery / Chemotherapy / Radiotherapy / Hormone therapy)

- LEVEL 1 – LYING
 - WARM-UP (LYING) EXERCISES 1-2
 - BASE EXERCISES (LYING) EXERCISES 3-4
- LEVEL 2 – SEATED
 - WARM-UP (SEATED) EXERCISES 5-6
 - BASE EXERCISES (SEATED) EXERCISES 7-8
- LEVEL 3 – STANDING WITH RESISTANCE
 - WARM-UP (STANDING WITH RESISTANCE) EXERCISES 9
 - BASE EXERCISES (STANDING WITH RESISTANCE) EXERCISES 10

COOL-DOWN (ANY POSITION) EXERCISES 10

Progression is not a test: it's guidance. On some days you'll move forward, on others you'll return to a gentler level. That's normal. Your body knows what pace it needs: you simply listen to it.

Visual models for exercises at all stages

3. Transition Criteria:

- No increased pain
- Reversible fatigue
- Stable execution
- Confidence in movement

5 When can I move to the next stage?

Domain	What do I check?	Threshold for progression	If I do not reach the threshold...
Shoulder mobility	Active lift of the arm in the front and on the side	+120° without major pain	Stay with gentle exercises, increase the amplitude gradually (+5°/week)
Pain	Pain intensity on a scale 0 to 10 (0= no pain, 10= intense pain) during the movement	+3/10	Reduce intensity and focus on breath and smooth mobility
Scar	Sensitivity, tension, adhesion	Without major tension	Introduce self-massage + movements synchronised with breathing
Fear / fear of movement	Hesitation, rigidity or protection tendency	I can lift the arm without significant fear	Use visually guided exercises, seek + help
Fatigue	How the effort feels (rate of perceived exertion)	RPE + 4 during effort	Decrease volume, split exercises into small sessions
Posture	Shoulder symmetry, back rounding	Neutral posture tolerated for 60 sec	Posture + daily chest exercises

6 Exercises

Warm-up exercises

1. Deep breathing

Position:

- Lying on your back, with your knees bent and your feet on the floor.
- One hand on your abdomen, the other on your chest.
- Shoulders relaxed.

How to perform:

- Breathe in through your nose very slowly, for 3-4 seconds.
- Feel your abdomen rise under your palm, while your chest remains almost still.
- Hold the air for one second, without forcing – just a small natural pause.
- Breathe out through your mouth slowly, for 4-5 seconds.
- Let your shoulders sink into the bed and your thorax relax.
- Continue for 8-10 cycles, at your own pace.
- The movement should be calm, without effort.

ADAPTATION ACROSS TREATMENT PHASES

The **structure** remains constant.

Only the **objective** changes.

Active treatment

- Reduce fatigue
- Preserve muscle mass
- Adapt to variable days

Movements for each stage

Before starting the exercises

Start the exercises only after receiving approval from your surgeon. In the first days, the movements should be slow and gentle.

A slight sensation of stretching is normal, but strong pain is not.

If you are going through a period with several treatments, it is completely normal for your energy to fluctuate more. On those days, always choose the gentlest option. It is enough.

1. Diagnosis → Prehabilitation

From the moment you receive your diagnosis until the start of treatment, it is important to stay as active as possible. Gentle movement helps you prevent stiffness in the shoulders and chest, prepare your body for surgery, and reduce the natural anxiety during this period. Your goal is to enter treatment in the best possible condition, with a mobile shoulder and a chest that moves freely.

Before starting the exercises, notice how you move: how high you can raise your arm, whether pain appears, how you hold your back and shoulders. There is no need for intense effort – the activity should be moderate, divided into short walks and light exercises, so that you feel you are working but can still talk without difficulty. Avoid sudden or very demanding movements and stop if sharp pain or dizziness appears.

Preparing the shoulder for surgery: gentle shoulder raises, front raises, lateral raises, circular shoulder movements.

Recommended exercises

1. Deep breathing with chest opening (warm-up)

Position:

- Standing, with feet shoulder-width apart
- Back straight, shoulders lowered and relaxed.
- Gaze forward.




How to perform:

- Place one hand on the abdomen and the other on the lower part of the ribs.
- Inhale slowly through the nose.
- Let your abdomen rise gently under your palm.
- Feel how the ribcage opens to the sides.
- The shoulders remain relaxed, without rising.
- Exhale slowly through your mouth.
- Let your abdomen lower naturally.
- The shoulders relax and lower without effort.
- Maintain a calm and continuous breathing rhythm.
- Repeat 8-10 slow breaths.

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2. Chemotherapy (neoadjuvant or adjuvant)




Movement helps reduce fatigue, support circulation, maintain muscle mass and prevent loss of mobility in the shoulders and chest. Even a few minutes a day can make a difference in how your body tolerates treatment.

During chemotherapy, avoid intense or prolonged exercises, especially if you experience episodes of dizziness, nausea or increased heart rate. On days with anaemia or severe neutropenia, stop any demanding activity and limit yourself to breathing and gentle mobility. If you have joint pain, numbness or tingling (possible treatment side effects), adapt the exercises so that they are completely pain-free.

Some patients may occasionally experience instability or sudden fatigue on treatment days. If you have such a day, move the exercises to a seated or lying position, your body is simply asking for a more comfortable option.

Very Important! If you have a fever, infection or severe dizziness, do not exercise on that day.


3. Radiotherapy



The goal is to maintain shoulder and chest mobility, to prevent the development of retractions and adhesions in the irradiated area, and to reduce tension in the chest and armpit. At the same time, the exercises help you breathe more easily and reduce the fatigue accumulated between sessions. During this period, avoid aggressive stretches, intense effort and sudden movements that could irritate the irradiated area. The skin may be sensitive, irritated or drier, so any exercise should be performed gently. If you feel burning, stinging or pain in the treated area, stop the exercise. Also, avoid excessive rubbing of the skin or applying pressure directly on the irradiated area.

If intense fatigue occurs, shorten the duration of the exercises, but try to remain active through at least a few gentle movements and breathing.

If intense fatigue occurs, shorten the duration of the exercises, but try to remain active at least through a few light movements and breathing exercises.



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Pre-treatment (prehabilitation)

- Maintain capacity
- Build functional reserve

Postoperative

- Restore mobility
- Prevent stiffness
- Gradual effort reintroduction

5. Surgical intervention

STAGE 3 >6 weeks: Advanced exercises

Now your goal is to regain full shoulder mobility, strengthen the muscles, and gradually return to your usual activities – including light sports. The movement becomes broader, smoother, and more natural.

Even if you feel better, be careful not to push beyond your body's limits. Avoid movements that cause sharp pain, exercises with heavy weights or high impact, and any activity that worsens arm swelling. During this stage you are progressing, but everything should remain comfortable.

Scar massage (after 3 weeks)

(after complete healing of the incisions)

Scar massage reduces tension, itching, and improves your shoulder mobility.

Brief instructions:

- 1 Apply a small amount of lotion on your finger.
- 2 Place 1-2 fingers on the scar.
- 3 Press gently and massage in a zig-zag or circular motion for 10 min, 2-3 times/day




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7. Active lifestyle in the long term



After completing the treatments and recovery stages, it is important to continue being active. Regular movement maintains heart health, protects your bones, reduces stiffness, and can lower the risk of recurrence. Physical activity does not need to be intense to be effective – consistency is what makes the difference.

The goal is to create an active, balanced lifestyle, in which you include both aerobic activities, as well as strength and mobility exercises. Through regular movement, you maintain your energy, you improve muscular and joint function, and support your overall health.

Even if you feel well, avoid increasing the intensity too quickly. Be patient with your body – if sharp pain, arm swelling, or excessive fatigue appear, slow down and gradually return to what it is best to start any new training programme gradually, not suddenly.

Recommended exercises

1. Walking at a moderate pace (10-30 min)

Position:

- In a safe space (in a park or on a treadmill).
- Stable footwear.



How to perform:

- Start with an easy pace for the first 2-3 minutes.
- Each step follows this sequence: heel → sole → toe
- Inhale through the nose, calmly and naturally.
- Exhale slowly through the mouth or nose.
- You can use a simple rhythm: inhale for 2-3 steps, exhale for 3-4 steps.
- Continue walking at a comfortable pace, where you can talk without panting.
- Total duration: 10-30 minutes, continuous or divided into 10-minute segments.
- At the end, reduce the pace for 2 minutes for cool-down.

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Survivorship

- Reconditioning
- Endurance
- Long-term prevention

WHAT THE EXERCISE SECTIONS LOOK LIKE

Each exercise section includes:

- Clear step-by-step instructions
- Safe positioning options
- Adaptation levels
- Intensity awareness guidance
- Clear stop criteria

Exercises are:

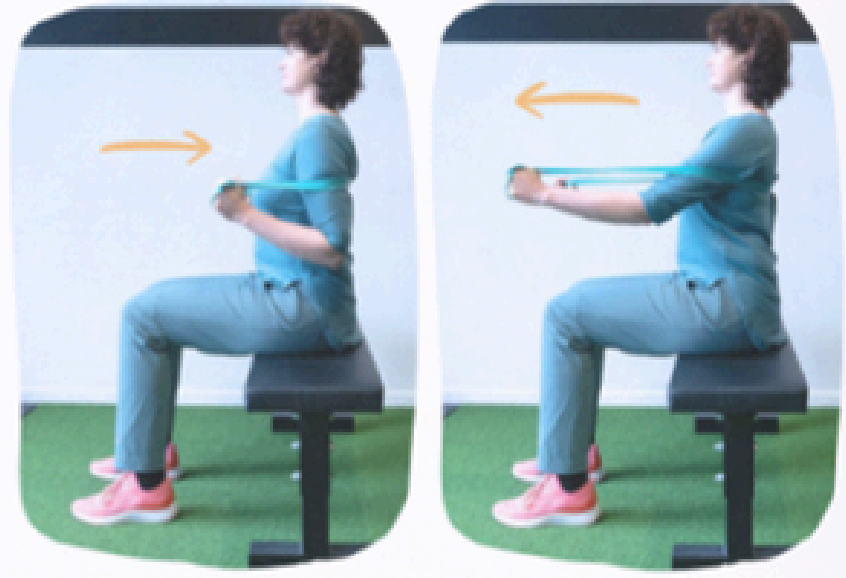
- ✓ Adapted by oncological stage
- ✓ Adapted by body position
- ✓ Structured by objective (mobility, strength, endurance, relaxation)
- ✓ Educational – they teach movement patterns, not memorization

Advanced exercises

2. Pushing arms forward with resistance band

Position:

- Seated on a stable chair.
- The resistance band is secured behind you (at the backrest) or held with both hands.
- Elbows are slightly bent, close to the trunk.



How to perform:

- Breathe in calmly in the starting position.
- On the exhale, slowly push the band forward, extending the arms.
- The movement starts from the shoulders and elbows.
- Keep the shoulders down, without lifting them towards the ears.
- Extend only to the limit of comfort, without pain.
- Hold the position for 1 second, breathing normally.
- Inhale and slowly return to the starting position, controlling the movement.
- Repeat 8–10 times, in a calm and steady rhythm.


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Advanced exercises

3. Shoulder shrugs with band under feet

Position:

- Standing, the band is secured under your feet.
- The ends are held in your hands
- Arms alongside the body.



How to perform:

- Inhale calmly in the starting position, with shoulders relaxed.
- On the exhale, gently raise the shoulders towards the ears, pulling gently on the band.
- The movement is small and controlled.
- Do not tense the neck and do not lift the chin.
- Arms remain relaxed.
- Hold the position for 1 second.
- Inhale and slowly lower the shoulders, moving them away from the ears.
- Focus on fully relaxing the shoulders as you lower them.
- Repeat 8–10 times, slowly and in a controlled manner.


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1. Shoulder mobilisations

1.3 Bending the arms towards the shoulders

Position:

- Seated or standing, with your back straight.
- Arms raised to shoulder level, slightly bent.
- Shoulders relaxed and lowered.



How to perform:

- Breathe in calmly in the starting position.
- On the exhale, bring the fingertips towards the shoulders.
- Bend the elbows slowly and in a controlled manner.
- The arms remain at shoulder level.
- Avoid raising the shoulders towards the ears.
- Hold the position for approximately 1 second, breathing normally.
- Inhale and slowly return to the starting position.
- Repeat a few movements, at a slow pace


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2. Lower body movement

1.4 Pulling the elbows backward

Position:

- Seated on a stable chair, with your back straight.
- Feet flat on the floor.
- Elbows bent, arms in front at chest level.
- Shoulders relaxed and lowered.
- Gaze forward.



How to perform:

- Breathe in calmly in the starting position.
- On the exhale, gently bring the elbows backward.
- Imagine that you are drawing the shoulder blades together.
- The movement is small and controlled.
- Hold the position for approximately 1 second, breathing normally.
- Inhale and slowly return the arms to the front, to the starting position.
- Repeat a few movements, at a slow pace

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Advanced exercises

6. Calf raises

Position:

- Standing
- Next to a wall for balance.



How to perform:

- Breathe in calmly in the starting position.
- On the exhale, slowly raise the heels off the floor, rising onto the balls of the feet.
- Keep the weight evenly distributed on both feet.
- Avoid leaning forward or backward.
- The raise is small and controlled.
- Hold the position for 1 second.
- Inhale and slowly lower the heels back to the floor, controlling the movement.
- Repeat 10–12 times, in a slow rhythm.

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Cool-down exercises

1. Lying trunk rotations

Position:

- Lying on your back, knees bent, feet on the floor, arms alongside the body.



How to perform:

- Breathe in calmly in the starting position.
- On the exhale, let both knees gently drop to one side.
- The movement is small and slow.
- Do not actively push the knees – let them drop in a controlled way.
- Go only to the limit of comfort.
- Hold the position for 2–3 seconds, breathing normally.
- Inhale and slowly return to the centre.
- On the next exhale, let the knees drop to the opposite side.
- Repeat 6–10 cycles, slowly and fluidly, synchronised with your breathing.

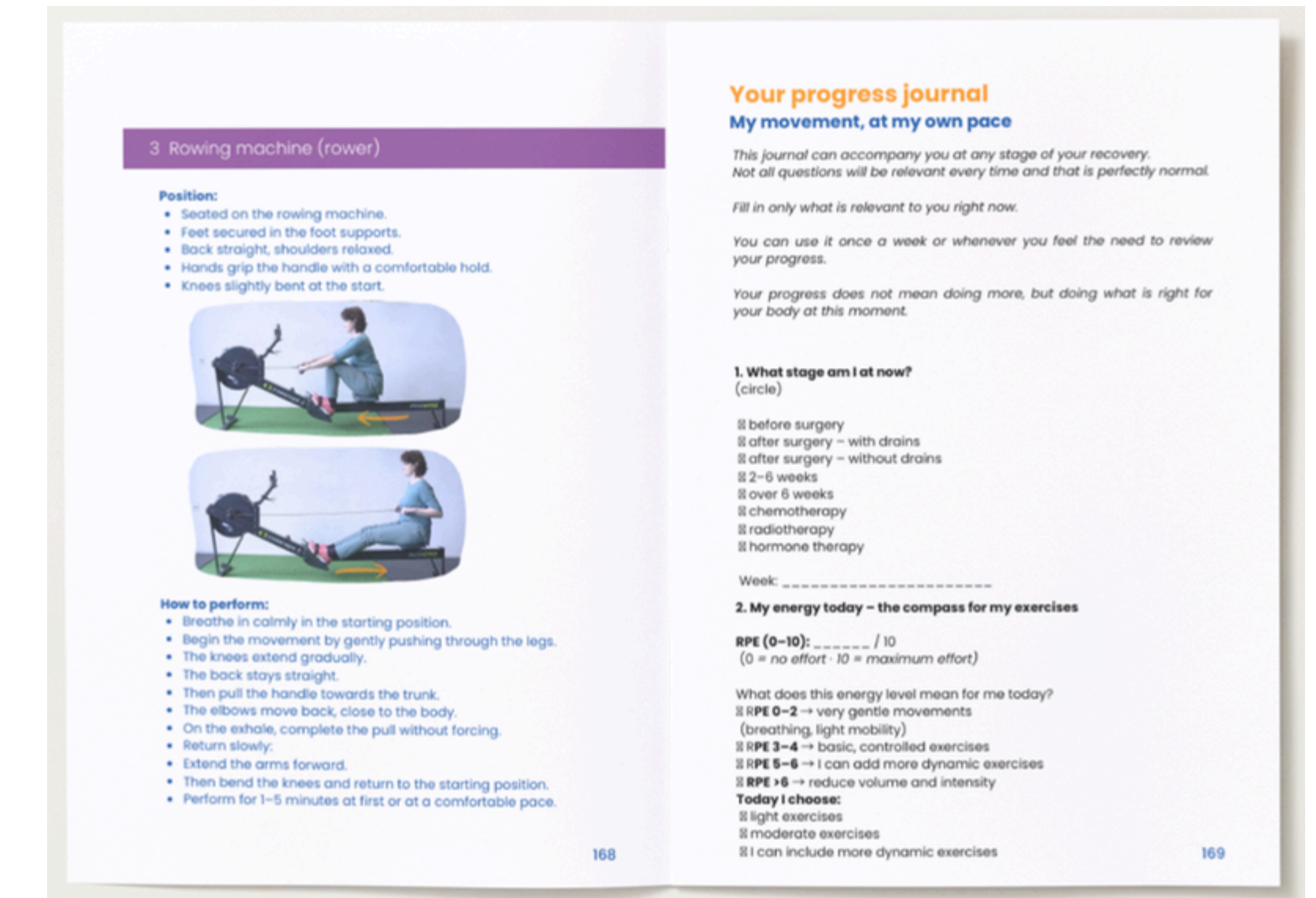
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FOR WHOM IS THIS GUIDE USEFUL?

The goal is clarity, safety, and confidence.

The guide is designed for:

- The general public interested in prevention
- Individuals at increased risk of breast cancer
- Caregivers and support groups
- Patients diagnosed with breast cancer



It is useful as:

- A patient empowerment tool
- A structured reference between consultations
- A safe framework for NGOs and community initiatives
- A complementary tool for healthcare professionals

LANGUAGE AND DESIGN OF THE GUIDE

The goal is clarity, safety, and confidence.

The guide uses:

- Direct, patient-centered language
- Short, clear instructions
- Minimal medical jargon
- Repetitive, predictable structure
- Emphasis on safety and tolerance
- Encouragement of self-monitoring

WHAT THE GUIDE PROVIDES

- Evidence-based information
- Tailored recommendations
- Strong safety emphasis
- Continuity across life stages
- Applicability in prevention settings

Impact

- Shared intervention addressing oncological, cardiovascular, and metabolic risk
- Educational tool for patients and caregivers
- Support resource for healthcare professionals
- Supports long-term adherence
- Complementary to cancer treatment

A BRIDGE BETWEEN SYSTEM, COMMUNITY AND PATIENT

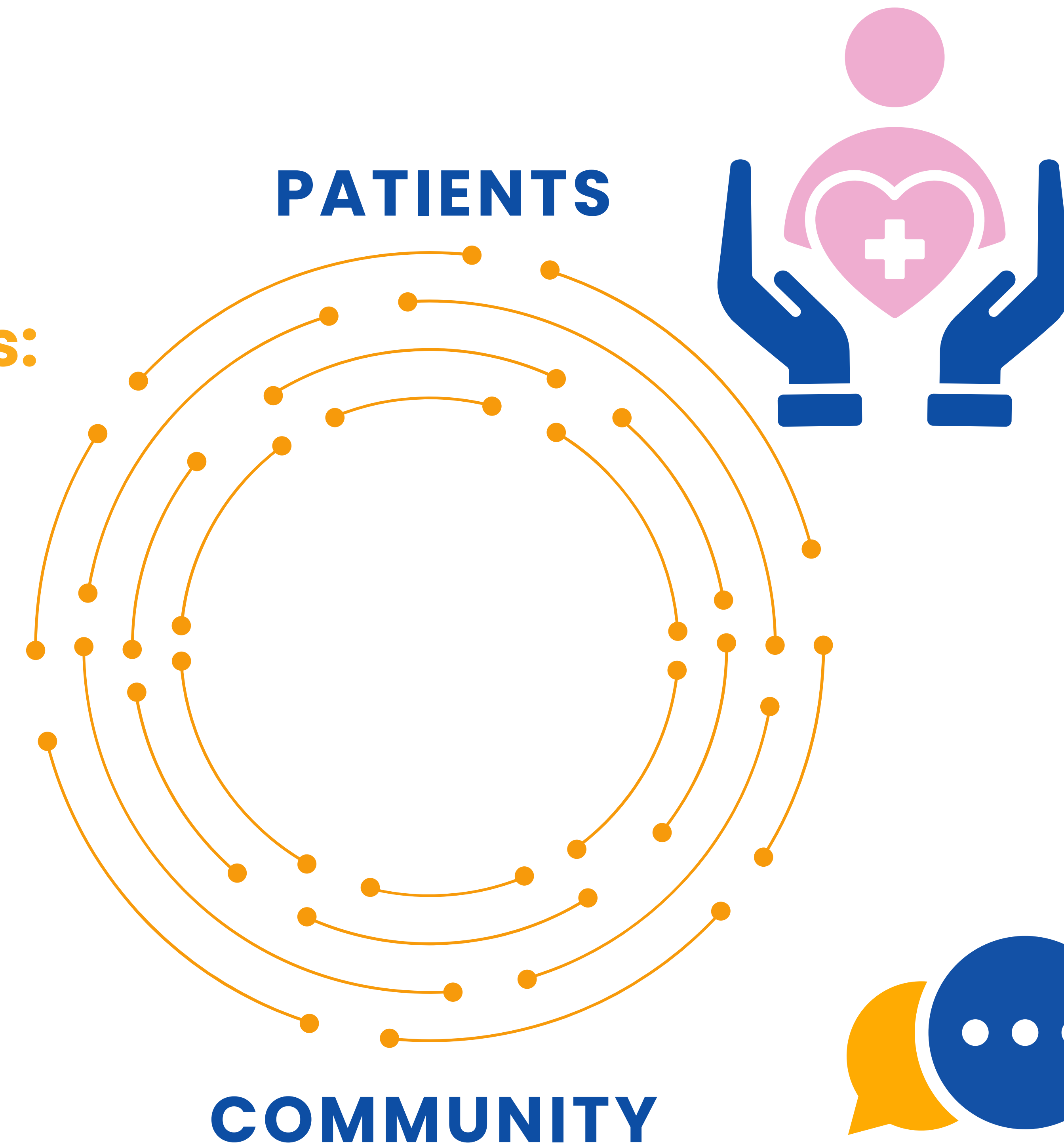
The guide connects:

The guide offers:

- Continuity between consultations
- A standardized exercise framework
- Shared language across stakeholders
- Empowerment within safe limits



MEDICAL SYSTEM



**It does not replace specialists.
It strengthens partnership.**



**MOVEMENT IS NOT
PERFORMANCE.
MOVEMENT IS DAILY SUPPORT.**

“Recovery, Step by Step” transforms:

Recommendation → Structure

Fear → Confidence

Fragmented information → Guided autonomy

One step.

One movement.

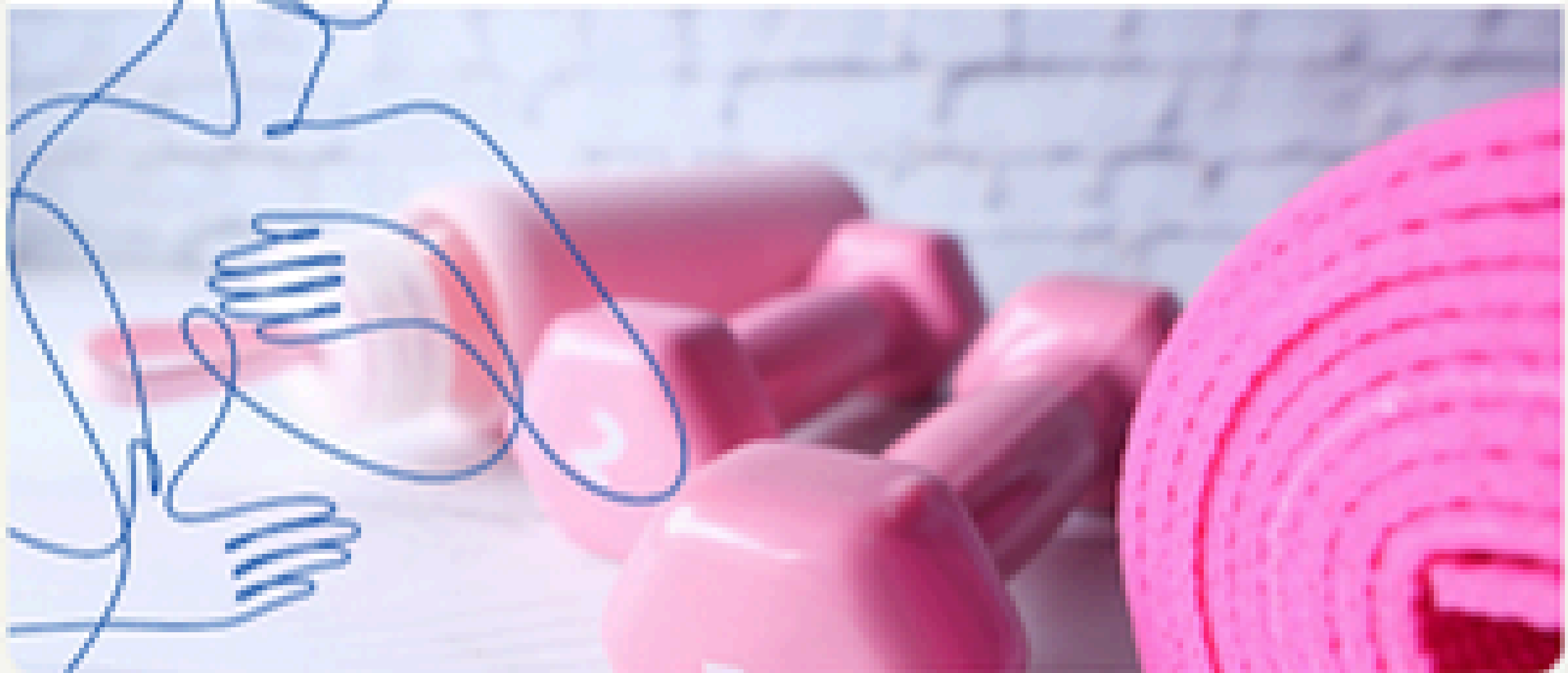
One day at a time.



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YOUR RECOVERY STEP BY STEP

SAFE MOVEMENT DURING AND AFTER
BREAST CANCER TREATMENT



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