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| *Supplementary online table 3. Study characteristics and quality assessment of randomized controlled trials investigating the effects of exercise on self-reported quality of life (QoL) and physical function (PF) in patients with cancer.* |
| First author Year | Country | Cancer type | Number of participants | Mean age | Female (%) | Recruitment/dropout (%) | Control group | Questionnaire | Intervention duration (weeks) | Timing of intervention | Delivery mode | Description ofintervention | Quality Assessment |
|  |  |  | RS | AC | IO | IR | A | C |
| Adamsen2009 101 | Denmark | Mixed | 269 | 47 | 73 | 53/13 | Usual care | QoL: QLQ-C30 global healthPF: QLQ-C30 physical functioning | 6 | During | Supervised | F: 3x per weekI: highType: AE+RETime: 60 min/session | + | + | - | + | - | + |
| Al-Majid 2015 78 | United States | Breast | 14 | 50 | 100 | 46/14 | Usual care | QoL: FACT-B PF: FACT physical well-being  | 9-12 | During | Supervised | F: 2-3x per weekI: moderate/highType: AETime: 20-40 min/session | ? | ? | - | + | + | ? |
| Alibhai2014 38 | Canada | Hematological | 40 | 56 | 55 | 38/10 | Wait-list control | QoL: QLQ-C30 global healthPF: QLQ-C30 physical functioning  | 12 | Post  | Unsupervised | F: 3-5x per weekI: moderateType: AE+RETime: 30 min/session | + | + | + | - | - | + |
| Alibhai,2015 44 | Canada | Hematological | 81 | 57 | 46 | 56/25 | Usual care | QoL: QLQ-C30 global healthPF: QLQ-C30 physical functioning  | 4-6 | During  | supervised | F: 4-5x per weekI: low/moderateType: AE+RETime: 30-60 min/session | + | + | - | - | - | - |
| Arbane2011 47 | United Kingdom | Lung | 53 | 64 | 47 | 79/17 | Usual care | QoL: QLQ-C30 global healthPF: QLQ-C30 physical functioning  | 12 | Post | Unsupervised | F: -I: AE: moderateType: AE+RETime: - | + | + | - | + | ? | ? |
| Arbane2014 89 | United Kingdom | Lung | 131 | 67 | 45 | 83/18 | Usual care | QoL: SF-36 general healthPF: SF-36 physical functioning | 4 | Post | Unsupervised | F: 7x per weekI: moderate/highType: AETime: 30 min/session | + | + | + | + | ? | ? |
| Backman2014 102 | Sweden | Mixed | 77 | 54 | 90 | 48/23 | Usual care | QoL :QLQ-C30 global healthPF: QLQ-C30 physical functioning | 10 | During | Supervised | F: 1x per weekI\*: moderateType: AETime: 60 min/session | ? | ? | - | + | + | ? |
| Bennett2007 103 | New Zealand | Mixed | 56 | 57 | 89 | 75/16 | Usual care | PF: SF-36 PCS | 24 | Post | Unsupervised  | F: most days of the weekI\*: moderateType: AETime: 30 min/session | + | + | + | + | ? | ? |
| Broderick2013 104 | Ireland | Mixed | 43 | 51 | 86 | 81/7 | Usual care | QoL: FACT-G totalPF: FACT physical well-being | 8 | Post  | Supervised | F: 2x per weekI: low/moderateType: AETime: 21-39 min/session | + | + | + | + | - | + |
|  |  |
|  |  |
| *Supplementary online table 3. Continued* |
| First author Year | Country | Cancer type | Number of participants | Mean age | Female (%) | Recruitment/dropout (%) | Control group | Questionnaire | Intervention duration (weeks) | Timing of intervention | Delivery mode | Description ofintervention | Quality Assessment |
|  | RS | AC | IO | IR | A | C |
| Burnham2002 105 | United States | Mixed | 18 | 53 | 83 | Unknown/ unknown | Usual care | QoL: Quality of life index | 10 | Post | Supervised | F: 3x per weekI: low/moderateType: AETime: 14-32 min/session | ? | ? | - | + | + | ? |
| Cadmus2009 67 | United States | Breast | 50 | 54 | 100 | Unknown/10 | Usual care | QoL: FACT-G totalPF: FACT physical well-being  | 26 | During | Unsupervised  | F: 5 x per week I: moderateType: AETime: 30 min/session | + | + | + | + | - | ? |
| Capozzi2016 109 | Canada | Head&Neck | 60 | 56 | 18 | 56/30 | Wait-list control | QoL: FACT-An | 12 | During | Supervised | F: 2x per weekI: moderateType: RETime: -  | + | ? | + | + | - | ? |
| Cormie2015 81 | Australia | Prostate | 63 | 68 | 0 | 86/13 | Usual care | QoL: SF-36 general healthPF: SF-36 physical functioning | 12 | During | Supervised | F: 2x per weekI: moderate/highType: AE+RETime: 60 min/session | + | + | + | + | ? | ? |
| Cornette2016 48 | France | Breast | 44 | - | 100 | 49/32 | Usual care | QoL: QLQ-C30 global health | 27 | During | Unsupervised | F: 3x per week (AE: 2x, RE: 1x)I: low/moderate/high¹Type: AE+RETime: AE: 20-40 min/session | ? | ? | + | + | + | ? |
| Courneya2003a 93 | Canada | Colorectal | 102 | 60 | 42 | 35/9 | Wait-list control | QoL: FACT-G totalPF: FACT physical well-being  | 16 | During/post | Unsupervised  | F: 3-5x per week I\*: moderateType: AETime: 20-30 min/session | + | ? | + | + | - | - |
| Courneya2003b 3 | Canada | Breast | 53 | 59 | 100 | 14/2 | Wait-list control | QoL: FACT-G totalPF: FACT physical well-being  | 15 | Post | Supervised | F: 3x per week I: moderate/highType: AETime: 15-35 min/session | + | + | + | + | + | + |
| Courneya2007(1) 12 | Canada | Breast | 160 | 49 | 100 | 33/9 | Usual care | QoL: FACT-G totalPF: FACT physical well-being  | 17 | During | Supervised | F: 3x per week I: moderate/highType: AETime: 15-45 min/session | + | + | + | + | - | + |
| Courneya2007(2) 12 | Canada | Breast | 164 | 49 | 100 | 33/9 | Usual care | QoL: FACT-G totalPF: FACT physical well-being  | 17 | During | Supervised | F: 3x per weekI: moderate/highType: RETime: 15-45 min/session | + | + | + | + | - | + |
|  |  |
|  |  |
| *Supplementary online table 3. Continued* |
| First author Year | Country | Cancer type | Number of participants | Mean age | Female (%) | Recruitment/dropout (%) | Control group | Questionnaire | Intervention duration (weeks) | Timing of intervention | Delivery mode | Description ofintervention | Quality Assessment |
|  | RS | AC | IO | IR | A | C |
| Courneya2009 49 | Canada | Hematological | 122 | 53 | 41 | 26/4 | Usual care | QoL: FACT-G totalPF: FACT physical well-being  | 12 | During/post | Supervised | F: 3x per week I: moderate/highType: AETime: 15-45 min/session | + | + | + | + | + | - |
| Culos-Reed2010 82 | Canada | Prostate | 100 | 67 | 0 | Unknown/34 | Wait-list control | QoL: FACT-G total | 16 | During | Supervised | F: 1x per weekI\*: AE: moderate, RE: lowType: AE+RETime: 60 min/session | ? | ? | + | + | - | ? |
| Daley2007 68¹ | United Kingdom | Breast | 72 | 51 | 100 | 29/14 | Usual care | QoL: FACT-G totalPF: FACT physical well-being  | 8 | Post | Supervised | F: 3x per weekI: moderate/highType: AETime: 50 min/session | + | + | + | + | - | - |
| Donnelly2011 98 | United Kingdom | Gynaecological | 33 | 53 | 100 | 25/3 | Contact control | QoL: FACT-G total | 12 | During/post | Unsupervised  | F: 5x per week I: moderateType: AE+RETime: 30 min/session | + | + | + | + | - | ? |
| Duijts2012 69 | Netherlands | Breast | 207 | 47 | 100 | 70/15 | Wait-list control | QoL: FACT-ESPF: SF-36 physical functioning  | 12 | Post | Unsupervised  | F: -I: highType: AETime: -V: 2,5-3 h/week | + | + | - | + | - | ? |
| Edvardsen2015 90 | Norway | Lung | 61 | 65 | 54 | 82/15 | Usual care | PF: SF-36 physical functioning | 20 | During/post | Supervised | F: 3x per weekI: highType: AE+RETime: 60 min/session | + | + | + | + | + | ? |
| Ergun2013(1) 31 | Turkey | Breast | 40 | 50 | 100 | Unknown/0 | Usual care | QoL: QLQ-C30 global health | 12 | Post | Supervised | F: 6x per weekI\*: moderateType: AE+RETime: 45 min/session | + | ? | + | + | ? | ? |
| Ergun2013(2) 31 | Turkey | Breast | 40 | 52 | 100 | Unknown/3 | Usual care | QoL: QLQ-C30 global health | 12 | Post | Unsupervised | F: 3x per weekI\*: moderateType: AETime:30 min/session | + | ? | + | + | ? | ? |
|  |  |
| *Supplementary online table 3. Continued* |
| First author Year | Country | Cancer type | Number of participants | Mean age | Female (%) | Recruitment/dropout (%) | Control group | Questionnaire | Intervention duration (weeks) | Timing of intervention | Delivery mode | Description ofintervention | Quality Assessment |
|  | RS | AC | IO | IR | A | C |
| Furzer2016 111 | Australia | Hematological | 44 | 48 | - | 49/14 | Wait-list control | QoL: FACT-G totalPF: SF-36 PCS | 12 | Post | Supervised (initial two sessions and two sessions at week 6) | F: 3x per weekI: low/moderateType: AE+RETime: 30 min/session | + | ? | + | + | + | ? |
| Galvão2010 83 | Australia | Prostate | 57 | 69 | 0 | 85/4 | Usual care | QoL: QLQ-C30 global health PF: SF-36 physical functioning  | 12 | During | Supervised | F: 2x per week I: AE: moderateType: AE+RETime: 60 min/session | + | + | + | + | ? | ? |
| Galvão2014 84 | Australia | Prostate | 100 | 71 | 0 | 54/23 | Usual care with brochure on PA | QoL: SF-36 general healthPF: SF-36 physical functioning  | 26 | Post | Supervised | F: 2x per weekI: AE: moderate/highType: AE+RETime: 60 min/session | + | + | + | + | - | ? |
| Goedendorp2010 39 | Netherlands | Mixed | 158 | 57 | 63 | 39/9 | Usual care | QoL :QLQ-C30 global healthPF: QLQ-C30 physical functioning | 26 | During | Unsupervised  | F: 5x per weekI: -Type: AETime: 60 min/session | + | + | + | - | ? | ? |
| Griffith2009 40 | United States | Mixed | 126 | 60 | 61 | 22/9 | Usual care | QoL: SF-36 general healthPF: SF-36 physical functioning | 13 | During | Unsupervised  | F: 5x per week I: low/moderateType: AETime: 25-35 min/session | ? | ? | + | - | - | - |
| Hayes2013(1) 32 | Australia | Breast | 127 | 52 | 100 | 65/7 | Usual care | QoL: FACT-G totalPF: FACT physical well-being  | 32 | During/post | Unsupervised ² | F: 4x per week I\*: low/moderate/highType: AE+RETime: 20-45 min/session | + | + | + | + | + | - |
| Hayes2013(2) 32 | Australia | Breast | 127 | 53 | 100 | 65/7 | Usual care | QoL: FACT-G totalPF: FACT physical well-being  | 32 | During/post | Unsupervised ³ | F: 4x per week I\*: low/moderate/highType: AE+RETime: 20-45 min/session | + | + | + | + | + | - |
| Henke2014 91 | Germany | Lung | 46 | - | - | 65/35 | Usual care | QoL :QLQ-C30 global healthPF: QLQ-C30 physical functioning | 9-12⁴ | During | Supervised | F: 5x per weekI: moderateType: AE+RETime: - | + | ? | - | + | ? | ? |
|  |   |
|  |  |
| *Supplementary online table 3. Continued* |
| First author Year | Country | Cancer type | Number of participants | Mean age | Female (%) | Recruitment/dropout (%) | Control group | Questionnaire | Intervention duration (weeks) | Timing of intervention | Delivery mode | Description ofintervention | Quality Assessment |
|  | RS | AC | IO | IR | A | C |
| Hornsby2014 79 | United States | Breast | 20 | 48 | 100 | 73/5 | Usual care | QoL: FACT-G totalPF: FACT physical well-being  | 12 | During | Supervised | F: 2x per week I: highType: AETime: 15-45 min/session | + | + | + | + | - | + |
| Irwin2009 70 | United States | Breast | 75 | 56 | 100 | 23/9 | Usual care | QoL: FACT-G totalPF: FACT physical well-being  | 26 | Post | Supervised | F: 3x per week I: moderateType: AETime: 15-30 min/session | + | ? | - | + | - | + |
| Kampshoff2015(1) 4 | Netherlands | Mixed | 182 | 54 | 79 | 37/7 | Wait-list control | QoL :QLQ-C30 global healthPF: QLQ-C30 physical functioning  | 12 | Post | Supervised | F: 2x per weekI: highType: AE+RETime: 60 min/session | + | + | + | + | - | + |
| Kampshoff2015(2) 4 | Netherlands | Mixed | 186 | 54 | 80 | 37/12 | Wait-list control | QoL :QLQ-C30 global healthPF: QLQ-C30 physical functioning  | 12 | Post | Supervised | F: 2x per week I: moderateType: AE+RETime: 60 minutes | + | + | + | + | - | + |
| Knols2011 110 | Switzerland | Hematological | 131 | 46 | 41 | 57/13 | Usual care | QoL :QLQ-C30 global healthPF: QLQ-C30 physical functioning  | 12 | Post | Supervised | F: 2x per weekI: moderateType: AE+RETime: 20 min/session | + | + | - | + | - | ? |
| Korstjens2008 106 | Netherlands | Mixed | 133 | 50 | 85 | 87/5 | Wait-list control | QoL: RAND-36 general healthPF: RAND-36 physical functioning  | 12 | Post | Supervised | F: 2x per week I: AE: moderate/high, RE: low/moderateType: AE+RETime: 120 min/session | + | ? | + | + | + | ? |
| McNeely2004 99 | Canada | Head&Neck | 20 | 61 | 18 | 80/40 | Usual care | QoL: FACT-G totalPF: FACT physical well-being  | 12 | During/post | Supervised | F: 3x per weekI\*: low/moderateType: RETime: 45 min/session | + | ? | - | + | + | ? |
| McNeely2008 100 | Canada | Head&Neck | 52 | 52 | 29 | 33/8 | Attention control | QoL: FACT-G total | 12 | Post | Supervised | F: 2-3x per weekI: low/moderateType: RETime: - | + | + | + | + | + | ? |
|  |  |
|  |  |
|  |  |
| *Supplementary online table 3. Continued* |
| First author Year | Country | Cancer type | Number of participants | Mean age | Female (%) | Recruitment/dropout (%) | Control group | Questionnaire | Intervention duration (weeks) | Timing of intervention | Delivery mode | Description ofintervention | Quality Assessment |
|  | RS | AC | IO | IR | A | C |
| Mehnert2011 41 | Germany | Breast | 63 | 51 | 100 | Unknown/8 | Wait-list control | QoL: SF-36 general healthPF: SF-36 physical functioning | 10 | Post | Supervised | F:2x per week I: moderateType: AETime: 90 min/session | ? | + | + | - | + | ? |
| Milne2008 71 | Canada | Breast | 58 | 55 | 100 | 44/0 | Wait-list control | QoL: FACT-G totalPF: FACT physical well-being  | 12 | Post | Supervised | F: 3x per week I: - Type: AE+RETime: - | + | + | + | + | - | ? |
| Monga2007 85 | United States | Prostate | 21 | 69 | 0 | Unknown/ unknown | Usual care | QoL: FACT-PPF: FACT physical well-being  | 8 | During | Supervised | F: 3x per week I: moderateType: AETime: 45-50 min/session | ? | ? | + | + | ? | ? |
| Murtezani2014 77 | Kosovo | Breast | 62 | 52 | 100 | 30/7 | Usual care | QoL: FACT-G totalPF: FACT physical well-being  | 10 | Post | Supervised | F: 3x per weekI: moderateType: AETime: 15-35 min/session | + | ? | - | + | + | ? |
| Mustian2009 107 | United States | Mixed | 38 | 60 | 71 | Unknown/5 | Usual care | QoL: FACIT | 4 | During | Unsupervised  | F: 7x per weekI: AE: moderate, RE: low/moderateType: AE+RETime: - | + | + | + | + | - | + |
| Mutrie2007 72 | United Kingdom | Breast | 203 | 51 | 100 | 75/14 | Usual care | QoL: FACT-G totalPF: FACT physical well-being  | 12 | During | Supervised | F: 2x per week I: AE: low/moderateType: AE+RETime: 45 min/session | + | + | + | + | ? | ? |
| Nilsen2015 88 | Norway | Prostate | 58 | 66 | 0 | 49/15 | Usual care | QoL :QLQ-C30 global healthPF: QLQ-C30 physical functioning | 16 | During | Supervised | F: 3x per weekI: moderateType: RETime: - | + | + | + | + | + | + |
| Oechsle2014 96 | Germany | Hematological | 48 | 52 | 29 | Unknown/17 | Usual care | QoL :QLQ-C30 global healthPF: QLQ-C30 physical functioning | 3 | During | Supervised | F: 5x per weekI: RE: lowType: AE+RETime: 30-40 min/session | ? | ? | - | + | ? | ? |
| Ohira2006 73 | United States | Breast | 86 | 53 | 100 | 65/8 | Wait-list control | QoL: CARES-SFPF: CARES physical subscale | 26 (of which 13 wk supervised) | Post | Supervised | F: 2x per weekI: - Type: RETime: - | + | ? | + | + | ? | ? |
|  |  |
|  |  |
| *Supplementary online table 3. Continued* |
| First author Year | Country | Cancer type | Number of participants | Mean age | Female (%) | Recruitment/dropout (%) | Control group | Questionnaire | Intervention duration (weeks) | Timing of intervention | Delivery mode | Description ofintervention | Quality Assessment |
|  | RS | AC | IO | IR | A | C |
| Pinto2013 94 | United States | Colorectal | 46 | 57 | 57 | 70/9 | Attention control | QoL: FACT-CPF: FACT physical well-being | 12 | Post | Unsupervised  | F: 2-5x per week I: moderateType: AETime: 10-30 min/session | ? | ? | + | + | ? | ? |
| Porserud2014 45 | Sweden | Bladder | 18 | 72 | - | 36/18 | Usual care | QoL: SF-36 general healthPF: SF-36 physical functioning | 12 | Post | Supervised | F: 2x per weekI: -Type: AE+RETime: 45 min/session | + | + | - | - | - | ? |
| Salhi2015 92 | Belgium | Lung | 48 | - | 25 | Unknown/15 | Usual care | QoL :QLQ-C30 global healthPF: QLQ-C30 physical functioning | 12 | Post | Supervised | F: 3x per weekI: moderateType: AE+RETime: - | + | + | + | + | - | ? |
| Schmidt2015a(1) 37 | Germany | Breast | 46 | 54 | 100 | Unknown/ unknown | Usual care | QoL :QLQ-C30 global healthPF: QLQ-C30 physical functioning | 12 | During | Supervised | F: 2x per weekI: moderateType: AETime: 60 min/session | + | + | - | + | ? | ? |
| Schmidt2015a(2) 37 | Germany | Breast | 47 | 53 | 100 | Unknown/ unknown | Usual care | QoL :QLQ-C30 global healthPF: QLQ-C30 physical functioning | 12 | During | Supervised | F: 2x per weekI: highType: RETime: 60 min/session | + | + | - | + | ? | ? |
| Schmidt2015b 80 | Germany | Breast | 101 | 52 | 100 | Unknown/4 | Attention control | QoL :QLQ-C30 global healthPF: QLQ-C30 physical functioning | 12 | During | Supervised | F: 2x per weekI: moderate/highType: RETime: 60 min/session | + | + | + | + | - | ? |
| Segal2003 86 | Canada | Prostate | 155 | 68 | 0 | 31/13 | Wait-list control | QoL: FACT-P | 12 | During | Supervised | F: 3x per weekI: moderateType: RETime: - | + | + | + | + | - | ? |
| Segal2009(1) 10 | Canada | Prostate | 81 | 65 | 0 | 37/7 | Usual care | QoL: FACT-G total | 24 | During | Supervised | F: 3x per week I: highType: AETime: 15-45 min/session | + | + | + | + | + | + |
| Segal2009(2) 10 | Canada | Prostate | 81 | 65 | 0 | 37/7 | Usual care | QoL: FACT-G total | 24 | During | Supervised | F: 3x per weekI: moderateType: RETime: 15-45 min/session | + | + | + | + | + | + |
|  |  |
|  |  |
|  |  |
| *Supplementary online table 3. Continued* |
| First author Year | Country | Cancer type | Number of participants | Mean age | Female (%) | Recruitment/dropout (%) | Control group | Questionnaire | Intervention duration (weeks) | Timing of intervention | Delivery mode | Description ofintervention | Quality Assessment |
|  | RS | AC | IO | IR | A | C |
| Short2014(1) 36 | Australia | Breast | 220 | 56 | 100 | 31/3 | Usual care | QoL: FACT-G totalPF: FACT physical well-being  | 16 | Post  | Unsupervised  | F: AE: 5x per week, RE 1-3x per week I\*: moderateType: AE+RETime: 30 min/session | + | + | + | + | + | ? |
| Short2014(2) 36 | Australia | Breast | 221 | 55 | 100 | 31/3 | Usual care | QoL: FACT-G totalPF: FACT physical well-being  | 16 | Post | Unsupervised | F: AE: 5x per week, RE 1-3x per weekI\*: moderateType: AE+RETime:30 min/session | + | + | + | + | + | ? |
| Speck2010 46 | United States | Breast | 295 | 57 | 100 | 23/21 | Wait-list control | QoL: SF-36 general healthPF: SF-36 physical functioning  | 52 (of which 13 wk supervised) | Post | Supervised | F: 2x per weekI: -Type: RETime: 90 min/session | + | + | - | + | + | ? |
| Steindorf2014 74 | Germany | Breast | 160 | 55 | 100 | 53/2 | Attention control | QoL :QLQ-C30 global healthPF: QLQ-C30 physical functioning | 12 | During | Supervised | F: 2x per weekI: moderate/highType: RETime: 60 min/session | + | + | + | + | - | ? |
| Tang2010 108 | Taiwan | Mixed | 72 | 51 | 76 | Unknown/19 | Usual care | PF: SF-36 PCS | 8 | During/post | Unsupervised  | F: 3x per week I\*: moderateType: AETime: 30 min/session | + | ? | + | + | - | ? |
| Thorsen200542 | Norway | Mixed | 158 | 39 | 68 | 63/20 | Usual care | QoL :QLQ-C30 global healthPF: QLQ-C30 physical functioning | 14 | Post | Unsupervised  | F: 2x per week I: AE: moderate/highType: AE+RETime: 30 min/session | + | + | + | - | + | - |
| Travier2015 75 | Netherlands | Breast | 204 | 49 | 100 | 54/11 | Usual care | QoL :QLQ-C30 global healthPF: QLQ-C30 physical functioning | 18 | During | Supervised | F: 2x per weekI: moderate/highType: AE+RETime: 60 min/session | + | + | + | + | + | ? |
| Van Vulpen 2016 95 | Netherlands | Colorectal | 33 | 58 | 36 | 50/9 | Usual care | QoL :QLQ-C30 global healthPF: QLQ-C30 physical functioning | 18 | During | Supervised | F: 2x per weekI: moderate/highType: AE+RETime: 60 min/session | + | + | + | + | + | ? |
|  |  |
| *Supplementary online table 3. Continued* |
| First author Year | Country | Cancer type | Number of participants | Mean age | Female (%) | Recruitment/dropout (%) | Control group | Questionnaire | Intervention duration (weeks) | Timing of intervention | Delivery mode | Description ofintervention | Quality Assessment |
|  | RS | AC | IO | IR | A | C |
| van Waart2015(1) 35 | Netherlands | Mixed | 154 | 50 | 100 | 44/12 | Usual care | QoL :QLQ-C30 global healthPF: QLQ-C30 physical functioning | 18-24 | During | Unsupervised  | F: 5x per week I: moderateType: AETime: 30 min/session | + | + | + | + | - | ? |
| van Waart2015(2) 35 | Netherlands | Mixed | 153 | 50 | 99 | 44/10 | Usual care | QoL :QLQ-C30 global healthPF: QLQ-C30 physical functioning | 18-24 | During | Supervised | F: 2x per week I: AE: moderate/high, RE: highType: AE+RETime: 60 min/session | + | + | + | + | - | ? |
| Winters-Stone2012 76 | United States | Breast | 106 | 62 | 100 | 48/37 | Attention control | QoL: SF-36 general healthPF: SF-36 physical functioning  | 52 | Post | Supervised | F: 2x per week I: moderate/highType: RE + impactTime: 60 min/session | + | + | + | + | + | + |
| Winters-Stone 2013 43 | United States | Breast | 71 | 46 | 100 | 55/33 | Attention control | QoL: SF-36 general healthPF: SF-36 physical functioning | 52 | Post  | Supervised | F: 2x per week I: moderateType: RE + impactTime: 60 min/session | ? | + | + | - | - | + |
| Winters-Stone 2015 87 | United States | Prostate | 51 | 70 | 0 | 37/16 | Attention control | QoL :QLQ-C30 global healthPF: QLQ-C30 physical functioning | 52 | During | Supervised | F: 2x per week I: moderateType: RE + impactTime: 60 min/session | ? | ? | + | + | + | + |
| Wiskemann2011 97 | Germany | Hematological | 112 | 48 | 33 | 74/29 | Attention control | QoL :QLQ-C30 global healthPF: QLQ-C30 physical functioning  | 16 | Pre/during/post | Supervised  | F: 5x per weekI: AE: moderate, RE: highType: AE+RETime: 20-40 min/session | + | + | - | + | + | ? |

QoL = quality of life, PF = physical function, QLQ-C30 = European Organisation for Research and Treatment of Cancer (EORTC) QLQ=C30 questionnaire, SF-36 = generic Short Form 36, FACT = Functional Assessment of Cancer Therapy questionnaire, F = frequency, I = intensity, AE = aerobic exercise, RE = resistance exercise, RS = random sequence generation, AC = allocation concealment, IO = incomplete outcome data, IR = incomplete reporting (if IR ‘–‘, data was obtained after personal communication with Principal Investigator) , A = adherence, C = contamination

\*unclear whether prescribed exercise intensity was based on ACSM guidelines, ¹Attention control group excluded from analyses, ²Face-to-face contact, ³Telephone contact, ⁴Three cycles of chemotherapy