

## PROJECT DETAILS

Project Title:

**Enhancing effectiveness and ameliorating side-effects of triple therapy for prostate cancer.**

Project Summary:

**AIMS:** The first aim of this research project is to determine if targeted exercise medicine is effective for ameliorating the side-effects of triple therapy in men with prostate cancer. The second aim is to assess if there is enhancement of triple therapy effectiveness.

**SIGNIFICANCE, OUTCOMES, AND IMPACT:** The side-effects of triple therapy are being increasingly documented and require additional treatments to ameliorate. Exercise medicine has been demonstrated to reduce the side-effects of ADT, ARSI and chemotherapy delivered singularly, however, it is now necessary to determine if similar benefit can be achieved when the patient is receiving all three therapies together. Further, there is strong theoretical rationale for exercise medicine enhancing the effectiveness of triple therapy. If demonstrated to be effective, exercise prescription will be integrated into supportive care of these patients as an adjunct therapy improving quality of life and potentially enhancing survival.

Preferred Applicant Skillset:

We are seeking a PhD candidate with excellent knowledge and skills in exercise science, in particular clinical exercise physiology. The candidate will require strong quantitative research skills and experience with systems for assessing human physical fitness including cardiorespiratory and neuromuscular, as well as body composition. Previous successful publication of their research is an advantage. Capacity to work independently and within a team is required. Familiarity with data analytics and statistical analysis is desired.

Internship opportunity:

Yes – the candidate will be working as an intern with the medical oncologists and urologists who are clinical collaborators on this project. This will involve days spent in the cancer clinics, attending MDT meetings and working with the clinicians and nurses to select and recruit patients for the trial.

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