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Singing for Lung Health as add-on to usual care within a follow-up programme after curative intended surgical resection procedure for non-small cell lung cancer – a randomised controlled study investigating effect and impact.

Lung cancer is now the most frequent cause of cancer in Denmark (around 5,000 new cases per year). Patients with lung cancer are often marked by low quality of life, high symptom burden, and many patients are socially and existentially vulnerable. However, there is a lack of targeted training offers that meet their challenges and needs.

Lung choirs have become increasingly popular and are perceived as a positive social activity with health-promoting benefits, e.g. in relation to quality of life, breathing control and management of shortness of breath. Studies indicate that lung patients achieve a physical training effect from singing training and improve breathing control, and shortness of breath, and experience less anxiety and depressive symptoms. Participants experience being in a community with like-minded people doing something fun and meaningful. Singing together may help to break the loneliness, isolation and hopelessness that many people with lung diseases - including people with lung cancer - struggle with.

We aim to focus on singing training as activity for lung cancer patients, which has not previously been investigated. The project builds on results from Sing-a-Lung 1.0, in which we investigated effect of singing training for people with COPD in a large RCT with 11 Danish municipalities and 270 patients. In the current project, we will use the best-practice approach, Singing for Lung Health, also applied in Sing-a-Lung 1.0.

We will compare singing training as add-on to the standard follow-up programme with the standard follow-up programme alone. We expect that singing training is a relevant activity and superior to the standard programme alone in improving both physiological and psychosocial parameters, as well as reducing the total burden of symptoms.

The project takes place between Q3 2023 and Q4 2025 in a collaboration between the respiratory departments and research units at Lillebælt Hospital, Vejle, Odense University Hospital and Zealand University Hospital, Næstved.

In total, we will facilitate 10 teams with 10 participants each, 3 teams in Vejle, 3 teams in Odense and 4 teams in Næstved, i.e. a total trial cohort of 100 participants, and with assessments at baseline and again after 16 weeks. The groups randomised for singing training receive 10 weeks of singing training consisting of 2 sessions of 1 ½ hours each. week.

The assessments consist both of objective measurements of walking distance (primary endpoint), lung function, muscle strength, and of subjective measurements of quality of life, symptom burden, as well as anxiety and depressive symptoms. Furthermore, we will conduct a qualitative study focusing on the experience and meaning of singing.