Active range of motion (AROM) and passive range of motion (PROM) did not show a statistically significant difference from pre to post chemotherapy.

Lower extremity function showed a median score reduction of 26%. Eight participants (47%) had a clinically significant decrease in LEFS questionnaire score from pre to post chemotherapy.

Many participant’s protocols involving vincristine were discontinued, limiting our ability to capture cumulative effect.

We are unable to isolate vincristine from other drugs in the chemotherapy protocols that can affect mobility (Methotrexate, Prednisone).

Lower extremity functional decline could be related to other issues that limit activity, such as peripheral neuropathy, nausea, fevers, edema, etc.

Longitudinal studies with higher numbers of participants would clarify if a dose dependent effect on DF-ROM and LEFS score exists.

Clinically significant changes in lower extremity function were reported by patients on the LEFS.

Based on decrease in LEFS scores seen in this pilot project; PT and OT should be available to adults receiving chemotherapy for ALL.

Further investigation is required to determine optimal timing and type of rehabilitation interventions.

A longitudinal, multi-center study is necessary to further evaluate the hypothesis.