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Cancer in Older Adults: The Oncologist's Bread and Butter

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The US population is aging. From the year 2000 to 2030, the US population age 65 and older is anticipated to double in size, in part due to aging of the baby boomer population, as well as rises in life expectancy.¹ These shifts in demographics are going to have significant implications for oncologists since approximately 60% of cancer diagnoses and 70% of cancer mortalities occur in older adults. The number of older adults with cancer and the number of cancer survivors are on the rise; however, there is an anticipated shortage of healthcare professionals to care for these older adults.^{2,3} Oncologists will likely need to take an expanded role in providing primary care and attending to the cancer survivorship issues pertinent to older adults. Although oncologists did not primarily train in geriatrics, the oncologists' daily "bread and butter" will be the care of geriatric patients.

There are several unique factors to consider when caring for older adults. First, the biology of cancer may vary by age and this may influence the treatment choices and outcomes.^{4,5} Secondly, age related declines in physiology may impact an older patient's ability to tolerate therapy. Specific attention to age related declines in renal function, bone marrow reserve, and the predisposition for GI side effects such as diarrhea and dehydration need to be considered.^{6,7} As importantly, is the consideration of factors other than chronological age⁸, such as functional status, comorbid medical conditions, psychological state, and social support which may impact the ability to deliver cancer therapy. Finally, the preferences and goals of treatment⁹ from the perspective older and younger patients may differ and need to be explored on an individual basis.

In this special edition of Seminars in Oncology, we have assembled a panel of experts in cancer and aging who have reviewed the available evidence based literature regarding the treatment of common malignancies in older adults, including lung, breast, prostate, colon, and ovarian cancer. In addition, we will highlight several topics that are especially pertinent to the care of older adults with cancer including: assessing decision making capacity and maximizing communication, cancer therapy and osteoporosis, the cognitive impact of hormonal therapy, and managing fatigue in older adults with cancer. We hope that this special edition will aid the practicing oncologist in their day to day, "bread and butter" management of cancer in older adults.

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