

Elderly breast cancer patients less likely to get surgery

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(PhysOrg.com) -- University of Manchester researchers, working with colleagues in York, Leeds and Hull, looked at the records of more than 23,000 women with breast cancer diagnosed in the West Midlands, Yorkshire and North East of England between 1997 and 2005 to investigate whether women aged over 70 in the UK are less likely to have surgery because of other illnesses.

They found that, overall, surgery rates dropped off with age and women who had other illnesses were less likely to have surgery. But even after taking other illnesses into account the chances of having surgery still fell with age – more than 85 per cent of women aged 65 to 70 had surgery, but this fell to 70 per cent in those over 70, and to just 50 per cent of the over 80s. Older patients were also less likely to have surgery if they were from a deprived area.

Dr. Katrina Lavelle, lead study author from the University of Manchester's School of Nursing, Midwifery and Social Work, said: "Previous research has shown that older women are less likely to have surgery for breast cancer compared with younger patients. Surgery to remove breast tumours is one of the most effective ways to treat this cancer so it's important to get a better understanding of what lies behind these differences.

"This research suggests that the presence of other illnesses, which we know increases with age, does not fully explain the difference in treatment between older and younger patients. The good news is that

over the time period we looked at, the numbers of women over 65 having surgery did rise from 68 per cent to 75 per cent.

“Our ongoing research, funded by the [Breast Cancer](#) Campaign and the National Institute for Health Research, is investigating the extent to which the lack of [surgery](#) amongst older [women](#) is due to things like overall frailty or patient choice. We are also developing statistical techniques to help to decide which treatment is likely to be the most appropriate based on patient choice, health and acceptable risk, rather than age.”

Steven Oliver, study author from the Northern and Yorkshire Cancer Registry and Information Service (NYCRIS), said: “This study illustrates the important role the UK’s cancer registry system plays in improving cancer care. By recording the patterns of treatment received by all patients with cancer we have a vital resource that can form the basis for research to understand why care varies.”

The team’s findings were presented at the National Cancer Intelligence Network (NCIN) conference in London today (Thursday).

Provided by University of Manchester

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