

Focus on treatment costs, value: Less radiation for elderly women with early breast cancer

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In a healthcare climate where the costs of treatment are increasingly weighed against potential benefit, a Yale study has found that radiation oncologists are using fewer or less-aggressive radiation procedures on elderly women with early-stage breast cancer. The findings are scheduled to be presented at the 56th annual conference of the American Society for Radiation Oncology in San Francisco. (Abstract 131: Evaluating National Practice in Radiotherapy for Elderly Women: Response to a Randomized Trial and Cost Effectiveness on a National Scale.)

The study, using a national database of more than 100,000 women treated during the last decade, found that today nationally [radiation oncologists](#) are less likely to use radiotherapy in women older than 70 with early-stage estrogen-receptor-positive breast cancer and that when they do, treatment is appropriately less-intensive. This follows a [randomized trial](#) demonstrating low rates of recurrence in women who don't receive radiotherapy after lumpectomy, provided they take endocrine therapy. This confirms radiation oncologists are responding to a growing impetus to keep medical practices current and cost-effective, said first author Charles Rutter, M.D., a [radiation oncology](#) resident in Yale's School of Medicine.

"In light of the current environment surrounding the cost of healthcare—with an intense focus on costs—only treatments with

meaningful benefit should be delivered," Rutter said. "In the past, radiation oncology, in particular, has been criticized for its expensive interventions. It is reassuring that radiation oncologists are successfully balancing patients' needs with the cost of providing health care."

Provided by Yale University

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