

Elderly with advanced CRC often get costly, unnecessary tx

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(HealthDay)—Expensive medications are being given far more often to

elderly patients with metastatic colorectal cancer, but they offer almost no benefit, according to a study published online Feb. 19 in *Medical Care*.

Cathy Bradley, Ph.D., associate director for population science research at the University of Colorado Cancer Center in Aurora, and colleagues analyzed data on 16,117 Medicare [patients](#) with metastatic colon [cancer](#) and 4,008 patients with advanced rectal cancer. The researchers discovered that among patients aged 75 and over, the percentage receiving three or more drugs to treat the disease rose from 2 percent to 53 percent over a 10-year period. These agents included new drugs such as oxaliplatin (Eloxatin), cetuximab (Erbix), and panitumumab (Vectibix), as well as bevacizumab (Avastin).

For patients aged 65 to 74 who took these newer therapies, overall survival increased by about eight months. But those over 75 who took these medications improved their median survival rate by only one month. Treatment costs for colon cancer patients taking these anticancer drugs in the first year following diagnosis increased 32 percent over the study period. These same costs rose by 20 percent for rectal cancer patients.

Bradley told *HealthDay* that newer therapies not only cost more than older ones but they're tied to worse side effects. "Common toxicities associated with newer therapies include diarrhea, dehydration, bowel wall injury, hemorrhage, wound-healing complications, and gastrointestinal tract perforation," Bradley said. "The main concern is that these toxicities will be incurred without any survival benefit, potentially worsening the patient's health status. These toxicities would seem to have a negative impact on quality of life."

More information: [Full Text \(subscription or payment may be required\)](#)

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