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OLDER ADULTS' USE OF CANCER-RELATED INTERNET INFORMATION: CONCLUSIONS AND FUTURE DIRECTIONS FROM A QUALITATIVE STUDY

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Introduction: 2 in 5 Canadians will be diagnosed with cancer in their lifetimes, and the majority of those diagnosed will be over age 50. Whereas, all individuals with cancer face physical and psychosocial distress related to their illness, older adults may also face alterations in cognition, functional status, and age-related bias, particularly related to technology use. Across all ages, people with cancer increasingly use *Cancer- Related Internet Information* (CRII) to manage their patient experience. Despite widespread biases regarding the technological capabilities of older adults, recent studies suggest older adults are becoming avid users of CRII to manage their physical and psychosocial concerns when diagnosed with cancer.

Objectives: The purpose of this presentation is to offer insights into older adult use of CRII, the role it plays in interactions with the healthcare system, and how healthcare professionals view older adults, and their use of CRII.

Methods: We used an interpretive descriptive methodology to conduct an in-depth exploration of the perspectives of both older adults (n=17) and healthcare professionals (n=21) regarding older adults' use of CRII. We conducted interviews (n=40) and focus groups (n=3), and analyzed the data using thematic analysis.

Results: Patients and healthcare providers felt CRII was a beneficial resource to address gaps in information, and to supplement information from their healthcare professionals. Regarding older adults, healthcare professionals felt they were less likely to use CRII, or to want to seek information from the internet, and felt that most users of CRII were young and often female. Conversely, older adults described unique strategies to seek, find, and validate CRII, in spite of their technological unfamiliarity. Older adults also described mobilizing the support of family and friends to find accurate, and reliable information.

Conclusion: The perceptions shared by healthcare professionals about older adults' CRII use and capabilities, conflicted with patient accounts. These are important findings for practice, pointing to the need for greater awareness of older adults CRII use and how to integrate this awareness into patient-healthcare professional encounters. Future research is needed to explore interventions to support CRII use amongst older adults, due to their unique information needs and preferences, the high likelihood of comorbidities, and the interplay with family and caregiver support.

Disclosure of Interest: None Declared

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