After attending the SIOG 2017 Advanced Course in Treviso...

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Cancer in the elderly in the United Kingdom

- Patients aged 75+ account for over a third (36%) of cancer cases, with slightly more in males than females. There are more people aged 50-74 than aged 75+ in the population overall, hence the number of cancer cases is higher in 50-74+, but incidence rates are higher in 75+.
- In males aged 75+ in the UK, prostate cancer is the most common cancer, accounting for a quarter (25%) of all cases in 2012-2014. In females aged 75+ in the UK, breast cancer is the most common cancer, accounting for around a fifth (21%) of all cases in 2012-2014.
- More than half (53%) of cancer deaths in the UK are in people aged 75 years and over (2012-2014). Since the early 1970s, mortality rates for all cancers combined have decreased in most of the broad age groups in the UK, but have increased in people aged 75+.
- In elderly people aged 75+ in the UK, lung cancer is the most common cause of cancer, death, accounting for around a fifth (21% and 19% in males and females respectively) of all cancer deaths in 2012-2014.
- Survival is poorer amongst older cancer patients and there is a disparity with other countries.
- Older cancer patients are characterized by later cancer presentation, more comorbidities and frailty. They are also less likely to receive surgery, radiotherapy and systemic therapy.

What concretely has brought to you the SIOG Advanced Course?

- Better insight into the overall management of elderly cancer patients
- Improved knowledge of the main principles of geriatrics
- Increased awareness of the relevance of a close collaboration between oncologists and geriatricians
- Tips to improve the research output in the geriatric oncology field
- Networking opportunities with geriatricians and oncologists from all over the world
- Plenty of inspiration and ideas to set up specific pathways for older cancer patients

What has improved in your Institution since?

- I am discussing a number of research projects and the potential implementation of specific pathways for the management of elderly breast cancer patients
- I recently joined the Age is no barrier to chemotherapy project group aiming at reducing treatment inequalities in England through the analysis of chemotherapy use in different age groups, the understanding of the reasons for such differences in practice, the issue of recommendations for the use of chemotherapy for all eligible patients regardless of their age and their implementation

How do you intend to develop links across worlds of oncology and geriatrics in the future?

- Create collaborations with geriatricians and allied health professionals working in my area
- Seek support from charities and organizations in my country
- Adopt geriatrics principles in my daily practice

Your research plans

- Assess the feasibility and implement the use of screening tools for the management of elderly breast cancer patients in my Institution
- Validate the use of chemotherapy toxicity prediction tools in the routine decision-making for older breast cancer patients
- Evaluate the outcomes of systemic treatment options for advanced HER2-positive breast cancer in a real-world population of elderly patients
- Assess the efficacy and safety profile of CDK4,6 inhibitors in a real-world population of older hormone receptor-positive breast cancer patients
- Get better insight into the use of anticancer systemic therapy for older patients in England