Age as prognostic factor in the patients with colorectal cancer

KEYWORDS: Colorectal Neoplasms; Age factors; Prognosis; Treatment Outcome

Malignant diseases of the large bowel are among the most frequent cancers in both sexes. In addition to local, regional and distant extension of the disease, age more important ones, there are plenty of other indicators of the biological aggressiveness of the tumor and the patient's vitality that can influence to the further course and overall survival. Entire treatment, particularly surgical, is often strenuous, so it can be applied only to the persons with preserved health condition which can be compromised with comitant diseases as an unavoidable companions of aging. We tried to explore age-dependent differences in the initial status, therapy and the further course of the disease at the 60 patients with colorectal cancer who were first-time treated at the Clinic of oncology in Kruševac from 1994 to 1997. They were divided in three categories of age (aged 50 years, aged 51 through 65 years, and older then 65 years). The limited disease was most frequently (69.54-56%) found in the middle-aged persons; the majority (23%) of unresectable cancers was diagnosed in the oldest, and metastatic (46%) in the youngest patients. Primary tumor was completely eliminated in the half of the oldest and more than three fourths (78%-83%) of other patients. It means that resection was applied in case the every second younger patient with metastatic disease, but not on any patient older then 65 years in the same group. This conspicuous difference is probably consequence of the poor general condition and expect ed outcome in case of the majority of oldest patients. Adjuvant or systemic chemotherapy as a postoperative treatment was applied only to the (40%) patients younger then 65. In the group of curatively operated, relapse was most frequently (70%-55%) observed in the oldest (perhaps under-treated) patients. This fact has a repercussion to the differences in overall survival, that is 9 (22:31) months shorter for oldest group respectively to others. In disease-free period (23:25 months) and the duration of disease after relapse (14:12 months) there were no bigger differences.

Breast cancer characteristics and treatment in women aged over 70 years

KEYWORDS: Breast Neoplasms + therapy; Aged

Although breast cancer incidence increase with age quantitative data are lacking on treatment practice and tumor characteristics in the elderly. Our aim was to determinate the local and systemic treatment for early breast cancer in women 70 years and older. From 1999 to 2001, the medical records of women aged 70 years and older diagnosed with non-metastatic breast cancer were retrospectively reviewed at the Clinical Center of Montenegro, Clinic for Oncology. A total of 625 medical records were reviewed, 104 patients older than 70 years and complete records were analyzed. Study population age ranged from 70 to 87 years, median age of 73.53 years. Of the 72 patient records with complete staging data 18% have T1N0, 41.6% T2N0, 29.1% T3 or T4 and 13.88 % N1 status. Histologic diagnosis included 75.4% ductal carcinoma, 13.7% lobular carcinoma, 5.4% tubular carcinoma and the remaining are combination of histological features. The majority of nuclear gradus is grade I (51.4%), histological gradus II is most frequent (55.2%) in this group of patients. The breast preservation procedures were performed in 52.65% patients, and the whole group received postoperative radiotherapy. Chemotherapy as adjuvant was given to 17.3% patients (5% in literature) endocrine treatment to 78%, and combination of these two therapeutic modalities was given to 13.4% of patients. A significant proportion of breast cancer patients, aged 70 years and older, did not receive standard local and systemic treatment. This is related to comorbidity, functional status and some problems in support.