Texas Breast Center: Treating Breast Cancer In Older Adults

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Texas Breast Center, based in Waxahachie, TX, recently published an article on treating breast cancer in older adults. The article explores the types of breast cancer that are more likely to develop in older women and the advancement of treatment options that have made the prognosis for these women much more favorable. Dr. Valerie Gorman of Texas Breast Center also discusses how age affects treatment options for breast cancer and what the most effective form of treatment for older women is. In addition, the article answers frequently asked questions about breast cancer treatment for the senior population.

As people age, several forms of breast cancer become more likely to develop, the article explains. Improvements in diagnosis and highly customized treatment regiments make recovery much more likely for older women, fortunately, and many go on to lead long and healthy lives. By examining a patient?s health and taking into account their personal preferences, breast cancer specialists can come up with highly effective treatment programs. These plans are known to be highly effective and many women report positive outcomes.

?Invasive ductal carcinoma, also known as IDC, and invasive lobular carcinoma, also known as ILC, are the

two types of breast cancers in women most frequently diagnosed in this age group,? says the article. ?Although they develop in different breast tissues, these tumors are treated similarly. Hormone receptor positive tumors make up the majority of invasive malignancies in this age range. Breast cancers in elderly patients that are hormone-positive tend to grow slowly, which is hopeful news for patients and can mean a good prognosis and successful breast cancer management.?

A patient?s age can impact treatment decisions in a number of ways ? but there is no reason to put off breast cancer treatment in older patients if they are otherwise healthy. However, the options that are available to a patient at this stage will become more complicated if they are ill. Conditions like dementia and Parkinson?s disease, for example, make treatment more difficult, but oncologists can still provide treatment in these circumstances.

The article emphasizes the importance of taking a patient?s functional age into account when making decisions regarding breast cancer treatment. A patient?s functional age affects their physical limits, comorbidities and social support. Those who are older but possess the functional age of a much younger patient should be presented with all the options that are normally available to younger patients, including surgery (if this is a viable mode of treatment). Even treatments like chemotherapy, trastuzumab and radiotherapy can be provided to women with breast cancer who are older than 65 if they are otherwise in good health and have a life expectancy exceeding the next five years.

One of the most commonly asked questions regarding breast cancer in older patients has to do with the treatment that is most effective for older women. The article says, ?Doctors consider the features of the tumor when determining which treatment plan could be appropriate for a certain patient. This can help distinguish between tumors that may respond to other forms of treatment and those that are likely to respond to hormone-blocking therapy alone. Mapping the genome of cancer cells through genomic breast cancer testing (also known as Oncotype tests) can help determine whether or not they will respond to hormone-blocking therapy, chemotherapy or both. While Oncotype tests are not recommended for all patients, some with invasive tumors larger than 0.5 cm and estrogen-positive, the tests can reveal whether a particular breast cancer recurrence is likely following treatment.?

Another commonly asked question the article addresses is whether or not older adults with breast cancer need chemotherapy. ?Although a chemotherapy regimen can be difficult, chemotherapy can be an effective strategy to shrink a tumor,? the article says. ?However, chemotherapy may not always be required, depending on the patient?s particular circumstances. The information obtained from the Oncotype genetic profile of cancer can help determine whether chemotherapy will be helpful in postmenopausal patients with invasive cancer whose tumor is larger than 1 centimeter and hormone receptor positive. Adjuvant chemotherapy may be associated with improved survival outcomes in elderly patients with breast cancer.?

Everyone can learn more about breast cancer treatment for older adults by reading Texas Breast Center?s article. The clinic also encourages patients to reach out directly via phone, email or social media if they are in need of a consultation.

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