Study Uncovers Healthcare Disparities among Octogenarians and Nonagenarians with Advanced Lung Cancer

Release Date:
Monday, January 8, 2018 9:19 am EST

Terms:
Cancer  All Journals and Research

Dateline City:
Hoboken, NJ

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A new study reveals that, among patients of advanced age with stage III lung cancer, African Americans and individuals who live in lower income areas are more likely to not receive any treatment. Published early online in CANCER, a peer-reviewed journal of the American Cancer Society, the study also found that patients who receive the standard of care treatment for their cancer live longer.

Individuals in their 80s and 90s may not receive standard of care therapy for lung cancer due to their age and concerns about fragility. To gain insights on how octogenarian and nonagenarian patients are treated and how they fare, Richard Cassidy, MD, of the Winship Cancer Institute of Emory University, and his colleagues examined information on U.S. patients aged 80 years and older with stage III non-small cell lung cancer from 2004–2013 who had complete treatment records available in the National Cancer Data Base.

Among 12,641 patients, 7921 (62.7 percent) received no therapy. Black race and living in a lower-educated census-tract were linked with a 23 percent and 20 percent increased likelihood of not receiving care, respectively, while treatment at an academic center was associated with a 20 percent increased likelihood of receiving cancer-directed therapy. Patients who received no treatment or only radiation were more likely to die during the years analyzed than those receiving concurrent chemotherapy and radiation, the standard of care for stage III non-small cell lung cancer.

“Our study is the largest to look at patients 80 years and older with stage III lung cancer. We highlight risks for patients not receiving standard therapy and show that patients who receive standard care live longer,” said Dr. Cassidy. “Our study also highlights healthcare disparities in the oncology community and showcases a need for the oncology community to address. This may provide information to guide outreach programs to engage the elderly community in seeking appropriate therapy for stage III lung cancer.”

Additional Information

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URL Upon Publication: http://doi.wiley.com/10.1002/cncr.31077

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English