

Never too old for treatment

IF YOU are aged 75 or over and get diagnosed with lung, stomach or kidney cancer in the UK, your chances of surviving five years are lower than in Eastern Europe. Cancer survival rates in younger age groups in the UK are also more than disappointing.

For many types of cancer the gap between us and the rest of Europe gets worse as age increases. So what's going on?

With the right treatment and the right care, people diagnosed at an older age can live many years, as new figures from Macmillan and the National Cancer Intelligence Network show. More than 130,000 people alive today in the UK have survived at least 10 years despite being diagnosed with cancer at 65 or over – more than the population of Exeter.

More than 8,000 people have lived for a decade or more after being diagnosed at 80 or older. This is fantastic and a tribute to great work within the NHS but these figures should be higher.

At Macmillan we believe too many older people with cancer are being assessed for treatment based on age, not general fitness. A UK survey of oncologists found four in five would prescribe chemotherapy for a high-risk breast cancer patient aged 68 but only half would recommend the same treatment for an otherwise identical patient aged 73.

We must remember that each of us is an individual. One 70-year-old might be very frail with multiple health problems; another might have another 20 years of good health ahead of them.

Take Gerald Shenton, 78, from Staffordshire. Diagnosed with

kidney cancer in 2000, he says he was treated as a terminal case from the start. He is still very much here at 91.

It is true that older patients are more likely to have other serious health conditions which can make them too ill to cope with aggressive cancer treatment but no more so than in other countries. Most people who get cancer are older but cancer does not discriminate. Anyone can get it, at any age.

A person needing treatment is someone's sister, someone's son, someone's mother or grandfather; who would deny them the chance of a longer life or a better quality of life?

Health professionals need to carry out a thorough assessment in each case and make decisions about treatment (with the patient's input) that are based on the patient's general health, not their date of birth. It is understandable that some cancer doctors and surgeons might feel obliged to err on the side of

caution when recommending treatment, as too much treatment is just as undesirable as too little. Only a thorough examination of the facts will help to guide them to the right decision for the patient.

Sometimes it is not a clinical concern which prevents treatment. It is hard to turn up for treatment if you yourself care for a husband or wife who is also ill and cannot be left alone.

As well as proper assessments, the NHS must also establish better links with the wider community, such as the voluntary sector, social services and teams specialising in dementia, falls and continence. This will help to address these other medical, social, emotional or financial issues that may be preventing an older patient taking up treatment or that would impact on their quality of life either during or after treatment.

Some may suggest the limited resources of the NHS would be best spent on younger patients who have a better chance of survival. We believe every cancer

patient should have access to the most appropriate treatment regardless of their age. There is evidence to show older people can often tolerate and benefit from the same treatments as younger patients so there is no reason why they should not receive treatment if they are deemed fit enough.

AS OUR new figures show, 130,000 people are living proof that with the right assessment and care older people with cancer can live for a long time and even be cured. Remember that 80-year-olds have been funding the NHS through taxes for more than 60 years; the least they deserve is fair treatment when they need care.

As our population continues to age, this issue is only going to get more urgent. Six out of 10 new cases are in those aged 65 and over. By 2040, nearly a quarter of people aged 65 and over will be living with the disease. We simply cannot afford to bury our heads in the sand about this.

The barriers to older people getting treatment must be tackled now. Nobody should simply be written off as being too old for cancer treatment.

**'Cancer survival rates in the UK
are worse than in Eastern Europe'**

Sunday Express 26.11.14