

Each year, approx. 10,500 new cases of cancer are diagnosed in the age group 75 years and older. The number of new cancer cases among the elderly is expected to increase by 76% to approx. 18,000 in the period up until 2030. This is mostly due to the expected 60% increase in the number of elderly people during the same period. The increase in the number of new cancer cases will place great demands on the capacity and expertise of hospitals, particularly because elderly patients often have other medical conditions in addition to cancer.

### Background

Several effective new drugs have become available for the treatment of cancer in the past ten or fifteen years. There is no upper age limit for treatment with these drugs, but the risk of serious side effects increases with age and may limit their use. Patients will often tolerate radiotherapy better than pharmacological treatment and surgery.

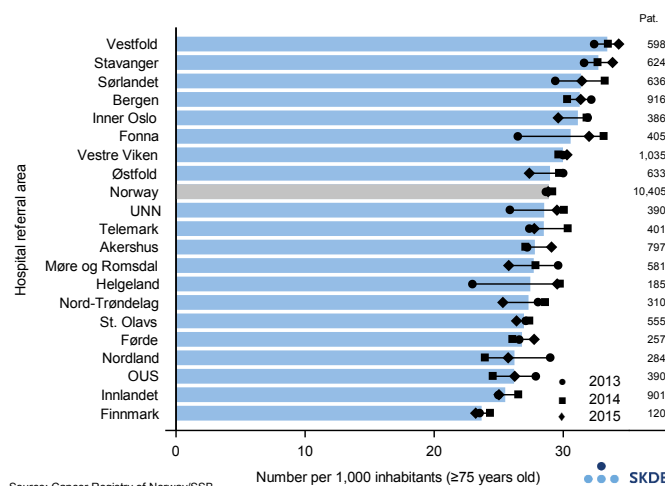
Elderly cancer patients are under-represented in clinical studies. Decisions and treatment choices are often based on the results for younger and healthier patients. Elderly patients' suitability for treatment must therefore largely be individually assessed on the basis of their biological age and general state of health - and as shared decision-making with the patient.

### Results

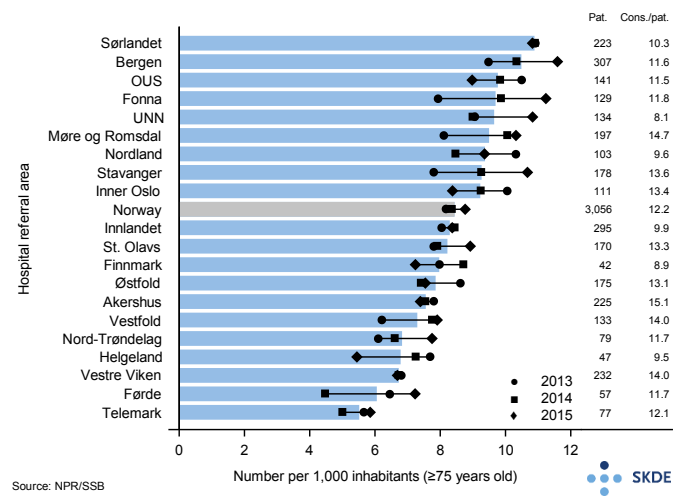
Each year, 40% more new cancer cases are diagnosed among the elderly in Vestfold hospital referral area than in the Finnmark area.

Each year, 3,250 elderly patients receive pharmacological cancer treatment, while 3,050 undergo radiotherapy. For both forms of treatment, there was a trend towards more elderly patients being treated during the period.

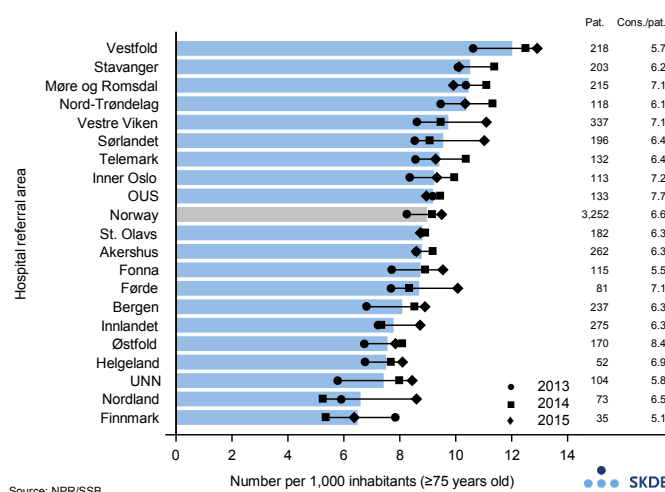
Residents of Vestfold hospital referral area have pharmacological cancer treatment twice as often as residents of Finnmark. Residents of Sørlandet hospital referral area undergo radiotherapy twice as often as residents in the Telemark area.



Source: Cancer Registry of Norway/SSB. New cancer cases in Norway per 1,000 population, 75 years and older, adjusted for gender and age. Av. number of new cases per year.



Source: NPR/SSB. Radiotherapy, number of patients per 1,000 population, adjusted for gender and age. Av. number of patients and appointments per patient per year.



Source: NPR/SSB. Pharmacological cancer treatment, number of patients per 1,000 population, adjusted for gender and age. Av. number of patients and appointments per patient per year.

### Comments

There is a certain degree of correlation between the use of pharmacological cancer treatment and the incidence of new cases in the hospital referral areas. Differences in morbidity, combined with random variation, can therefore explain part of the variation in pharmacological cancer treatment, but not the whole observed variation. It is probable that assessments of the risk/benefit to the patient differ between hospital referral areas. If the individual assessment of patients is inadequate, fear of undesirable incidents in frail patients could result in more robust patients also missing out on treatment.

There is no correlation between radiotherapy use and cancer incidence. The nine hospital referral areas with the lowest radiotherapy rates do not have a radiotherapy centre, and proximity to a radiotherapy centre therefore appears to have a bearing on whether or not elderly patients receive radiotherapy.