

Health Resource Review - Section 2.4

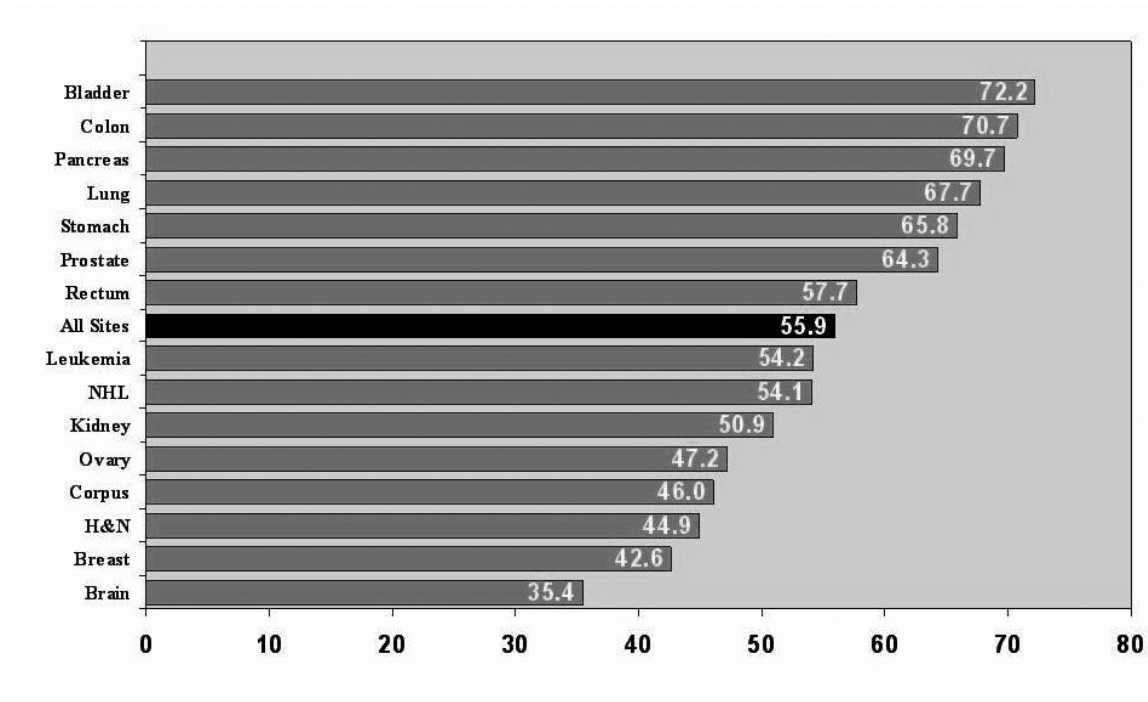
Table I. Median Age of Cancer Patients at Diagnosis, 2000-2003

Cancer site	Men		Women	
	Median Age	Number	Median Age	Number
Breast	67	1,720	61	212,920
Colon	71	49,220	75	57,460
Corpus uteri	--	--	63	41,200
Leukemia	66	20,000	68	15,070
Lung	70	92,700	71	81,770
NHL*	64	30,680	69	28,190
Ovary	--	--	63	20,180
Pancreas	70	17,150	74	16,580
Prostate	68	230,110	--	--
Rectum	66	23,580	70	18,350
Stomach	70	13,400	74	8,880
Bladder	72	44,690	74	16,730
Total		523,350		517,330

* NHL = non-Hodgkin's lymphoma. Source: Adapted by R. Yancik from American Cancer Society (ACS) Facts and Figures, 2006; National Cancer Institute (NCI) SEER program Data, 2000-2003. Presented by R. Yancik, 2007. The U.S. Demographic Imperative: Implications for Oncology Practice, in *Cancer in Elderly People Workshop Proceedings*, Institute of Medicine. National Academies Press: Washington DC.

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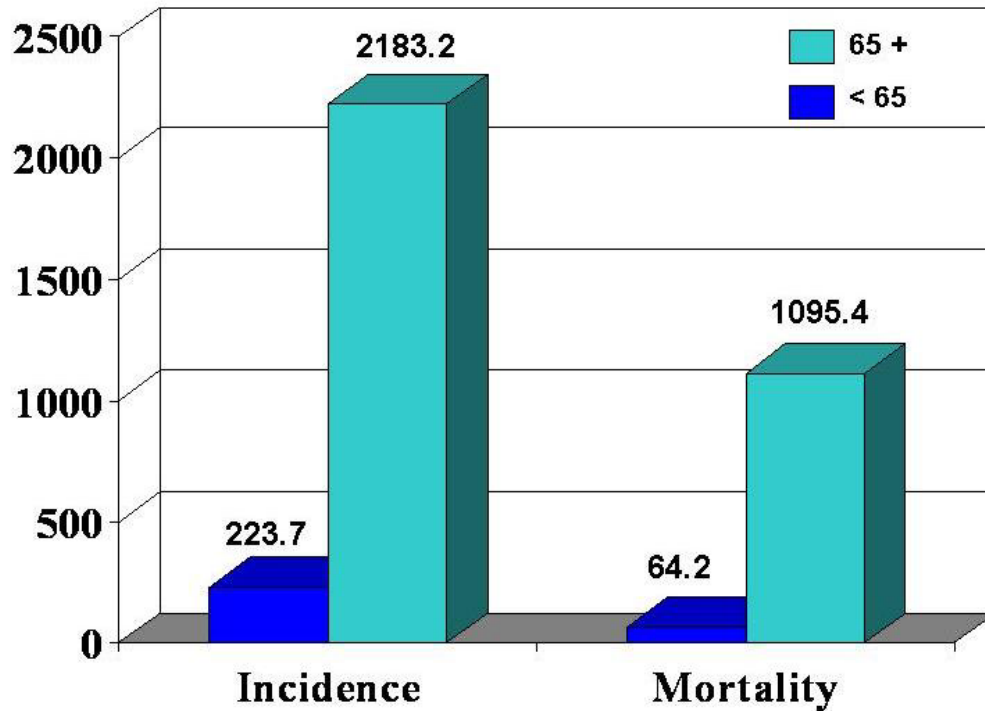
Figure 1. Proportions of tumors in patients 65 and older.



Source: Adapted by Yancik from NCI Seer Program Data, 2000-2003 (Yancik, 2007). The U.S. Demographic Imperative: Implications for Oncology Practice, in *Cancer in Elderly People Workshop Proceedings*, Institute of Medicine. National Academies Press: Washington DC.

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Figure 2. Age-adjusted incidence and death rates, all cancers.



Source: Adapted by Yancik from NCI SEER Program Data 2000-2003. Presented by R. Yancik,(2007). The U.S. Demographic Imperative: Implications for Oncology Practice, in *Cancer in Elderly People Workshop Proceedings*, Institute of Medicine. National Academies Press: Washington DC.

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Table 2. Health-Related Responsibilities Assumed by Informal Caregivers

Role	Function	Examples
Companion	Provide emotional support	Discuss ongoing life challenges, troubleshoot problems, facilitate and participate in leisure activities
Coach	Encourage patient self-care activities	Prompt patient's engagement in health care, encourage lifestyle (diet, exercise) and treatment adherence
Homemaker	Manage household activities	Inventory, purchase food and medications, prepare meals
Scheduler	Arrange medical care	Schedule tests, procedures, and services
Driver	Facilitate transportation	Provide transportation to medical appointments and emergency hospital visits
Patient extender	Facilitate provider understanding	Attend appointments; clarify and expand on patient history, symptoms, concerns; introduce topics to provider
Technical interpreter	Facilitate patient understanding	Clarify providers' explanations, technical terms, record and remember discussions with providers
Decision maker	Make medical decisions	Select among treatment alternatives; decide among settings of care
Coordinator	Coordinate care across providers and settings	Ensure flow of information among providers
Financial manager	Handle financial issues	Resolve issues relating to insurance claims secondary coverage, co-pays, and benefit limits
Health provider	Deliver medical care	Administer medications, operate equipment
Attendant	Provide task assistance	Hands-on personal care task assistance
Monitor	Assess health status	Ensure that changes in health status are noted and properly addressed

Source: (Wolff, 2007, see Institute of Medicine, 2008, p. 252. <http://www.iom.edu/?ID=53452>)

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Table 3. Biopsychosocial Health Needs of Older Cancer Patients and Services Needed

Needs	Health Services for Older Cancer Patients and Their Families
Information and education about illness, treatments, costs, health maintenance, and services available for patients and caregivers.	<ul style="list-style-type: none"> ▪ Provide continuous access to information and education about illness, treatments and their effects, costs, health, psychosocial and financial services. ▪ Provide decision support for patient and family who are considering options for treatment and care arrangements. ▪ Provide access to information about the impact of a cancer diagnosis in the context of pre-existing illnesses or health conditions.
Help in managing illness throughout its different phases.	<ul style="list-style-type: none"> ▪ Care coordination interventions to facilitate more appropriate delivery of services and assist with transitions in care. ▪ Comprehensive disease management and self-care programs. ▪ Interventions vary by type of cancer, phase of illness, time since diagnosis, degree of functional and role impairment, amount of pain, prognosis and available informal supports. ▪ Navigator programs to facilitate access by underserved populations.
Help in coping with emotions accompanying illness and treatment.	<ul style="list-style-type: none"> ▪ Community/peer support programs. ▪ Coaching/supportive counseling for patient and family. ▪ Pharmacological treatment for depression/anxiety coupled with psychotherapy. ▪ Pain and coping skills training for pain and discomfort.
Assistance changing behaviors to minimize impact of disease and manage side effects and late effects of treatments.	<ul style="list-style-type: none"> ▪ Health promotion interventions such as: <ul style="list-style-type: none"> Assessment/monitoring of key health behaviors such as diet, smoking, exercise Medication counseling Patient education on cancer related health risks, risk reduction interventions.
Material and logistical resources such as transportation, home care.	<ul style="list-style-type: none"> ▪ Provision of community and financial resources. ▪ Provide home care information for family caregivers. ▪ Help to provide and manage high tech care in the home.
Help in managing disruptions in work, activities, family life, and social network. Prepare for care transitions due to disease progression.	<ul style="list-style-type: none"> ▪ Ongoing Family/caregiver education and counseling. ▪ Assistance with activities of daily living (ADLs), and instrumental activities/chores (IADLS). ▪ Legal protections and services. ▪ Promote social network development and maintenance over time.
Financial advice and/or assistance. Managing and maintaining health insurance over time.	<ul style="list-style-type: none"> ▪ Assist with financial planning/counseling including management of bill paying. ▪ Insurance (e.g., health, disability) counseling/advocacy. ▪ Eligibility assessment for other benefits (SSI and SSDI). ▪ Supplemental financial grants. ▪ Ongoing assistance with major out of pocket expenses.