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Gastrointestinal cancer in older patients.

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More than two thirds of gastrointestinal cancers occur in persons 65 years of age or older. The symptoms and presentation in these older individuals appear similar to those of persons of younger age. Although treatments for these cancers have been developed primarily in younger patients, greater expertise over time has permitted similarly safe and efficacious therapy to be extended to older age groups. The majority of gastrointestinal cancers are located in the colon and rectum. Preventative strategies for colorectal cancer are quickly evolving, with the beneficial effect of long-term use of aspirin and estrogen having their greatest impact in the elderly population. The increased acceptance of colonoscopy for screening patients for colorectal cancer will be of greatest benefit in older individuals, who have a higher incidence of proximal neoplasms than younger individuals. Adjuvant therapy for both colon and rectal cancer is underutilized in elderly patients, despite such life-saving treatments resulting in similar survival prolongation, as well as toxicity profiles, as in their younger counterparts. There is a paucity of information concerning the treatment of elderly patients with other gastrointestinal malignancies.