

The Chronicles of Comorbidity and Cancer Care

Lucy H. Pickett, BSN, RN, and Janelle Tipton, DNP, RN, AOCN®



Care for patients with cancer is more challenging when they have concurrent, complex comorbidities. Risk assessment tools may help to enhance care assessment and predict poor clinical outcomes for these patients. This article provides information for the nurse caring for patients with cancer who have common comorbidities throughout the care continuum.

AT A GLANCE

- Effective management of chronic comorbidities is paramount for optimal cancer treatment.
- Patients with cancer who are underinsured, uninsured, rural dwellers, or aged older than 65 years are disproportionately affected by their comorbidities.
- Coordination of care between primary care and the oncology care team is essential for managing comorbidities in patients with cancer.

KEYWORDS

chronic disease; comorbidity; oncology; Charlson Comorbidity Index

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The number of cancer survivors in the United States with chronic conditions has increased by 50%–200% since 2010. These conditions include diabetes, hypertension, kidney disease, liver disease, and morbid obesity. Cancer survivors who are aged 18–44 years, male, and non-Hispanic Black have experienced the most significant increase in multiple chronic comorbid conditions over the past 20 years (Jiang et al., 2022). Regardless of the care setting, oncology nurses will encounter cancer survivors from the time of diagnosis throughout the care continuum who require multifaceted care because of existing chronic conditions.

Because of shared risk factors such as smoking, obesity, and physical inactivity, cancer survivors commonly experience chronic diseases (Jiang et al., 2022; Tsai et al., 2023). Despite improved cancer survival rates overall in the United States, patients with cancer who have chronic diseases have worse treatment and survival outcomes compared with those without comorbidities (George et al., 2021; Tsai et al., 2023). The coexistence of chronic diseases and cancer can have a negative impact on diagnosis, prognosis, cancer treatment response, survival, and subsequent health outcomes (George et al., 2021). In addition, chronic conditions may be associated with increased healthcare utilization and medical costs, adverse clinical outcomes, and financial toxicity (Tsai et al., 2023). Multiple comorbid conditions in cancer survivors may contribute to public health burden in the years to come.

Impact on Cancer Care

Interprofessional collaboration for effective care management is critical to providing care to this growing population. Treatment decisions must carefully integrate and prioritize treatment modality choices as well as patient preferences, particularly in older adults (George et al., 2021). When considering treatment based on clinical guidelines, an interprofessional approach and shared decision-making with the patient are required. For example, severe cardiopulmonary disease may affect prognosis and limit surgical and chemotherapy options (Duthie et al., 2017; Zullig et al., 2022). Palliative care is an option for patients when the risks of morbidity and mortality are significant.

Care management can be complicated with multiple providers; therefore, it is essential to have a “quarterback,” such as a medical oncology provider, to lead the healthcare team and provide consistent communication to the patient, caregivers, and other providers on the team. Caring for patients with chronic conditions can be a difficult situation, with multiple demands and little room for error and complications. Oncology nurses throughout