

Comprehensive Geriatric Assessment

A case report on personalizing cancer care of an older adult patient with head and neck cancer

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BACKGROUND: Understanding multidimensional screening and assessment is key to optimizing cancer care in older adults.

OBJECTIVES: This article aims to present comprehensive geriatric assessment (CGA) as an approach to personalizing care for older adults with cancer.

METHODS: A case study of an 89-year-old man with head and neck cancer is presented as a framework to describe the process of CGA and an overview of geriatric oncology screening and assessment.

FINDINGS: CGA enables personalized care by informing decision making about cancer treatment and guiding implementation of enhanced supportive interventions. Screening tools can help identify older adult patients who would benefit from CGA. Oncology nurses can integrate geriatric assessment tools into practice to identify and address age-related concerns, facilitate communication, and contribute to personalization of care.

KEYWORDS

case report; geriatric assessment; older adults; head and neck cancer

DIGITAL OBJECT IDENTIFIER

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BY 2035, 67% OF NEW CANCER CASES IN NORTH AMERICA are expected to occur in older adults (Pilleron et al., 2019), defined as those aged 65 years or older (Hurria et al., 2017; Lundebjerg et al., 2017). Older adults experience physiologic, functional, social, psychological, and existential changes that are only loosely associated with chronological age (World Health Organization, 2015). These changes have important implications for cancer and cancer treatment, not only affecting carcinogenesis, tumor behavior, treatment effectiveness, and the risk for treatment toxicity and complications (White & Cohen, 2006; Zhang et al., 2017), but also shaping the ability to navigate the cancer care system and engage in self-care (Lee et al., 2018; Pieters et al., 2011). As a result of these changes, there is considerable variation among older adults with cancer in terms of health, function, and caregiving needs (Ornstein et al., 2020). Age-related disparities in cancer outcomes (Liu et al., 2018; Mukhtar et al., 2018; Zeng et al., 2015), treatment (Fang et al., 2017; LeMasters et al., 2017; McAleese et al., 2017), clinical research (Hurria et al., 2015; VanderWalde et al., 2017), and symptom management (Walter et al., 2019) suggest that these changes are not adequately addressed in cancer care.

Comprehensive Geriatric Assessment

Comprehensive geriatric assessment (CGA) is recommended by the National Comprehensive Cancer Network (NCCN, 2020b), the American Society of Clinical Oncology (Mohile et al., 2018), and the International Society of Geriatric Oncology (Scotté et al., 2018; Wildiers et al., 2014) to reveal hidden vulnerability and reversible conditions not routinely identified in oncology care, predict survival and adverse events to inform treatment recommendations, and guide supportive interventions that enable treatment tolerance and adherence (Loh et al., 2018; NCCN, 2020b). CGA is a diagnostic and therapeutic process, in which an interprofessional team evaluates an older adult's medical, functional, psychological, and social situation to develop and