

Resilience in Older Adults Diagnosed With Cancer and Receiving Chemotherapy

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BACKGROUND: Resilience is the capacity for physical and emotional recovery from stressful events like cancer diagnosis and treatment.

OBJECTIVES: The objectives of this study were to review existing literature to understand and illustrate ways to assess and manage resilience when providing holistic care to older adults with cancer.

METHODS: A review of the literature was conducted with a focus on assessment, management, and preservation of resilience in older adults with cancer.

FINDINGS: Interventions to support resilience include managing problems that occur in the areas of nutrition, exercise, social support, cognition, functional status, and emotion. Cell cycle arrest using pharmacologic agents may provide a novel proactive approach to protect resilience from deteriorating during chemotherapy to treat cancer. The oncology nurse can assess and manage resilience, which can lead to better treatment outcomes.

KEYWORDS

comprehensive geriatric assessment; geriatric nursing; resilience; cell cycle arrest

DIGITAL OBJECT IDENTIFIER

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THE NATIONAL INSTITUTE ON AGING HAS HIGHLIGHTED the assessment of physical and mental resilience as the most fitting evaluation of physiologic age (Hadley et al., 2017). The emphasis on resilience presents aging as an opportunity for enrichment rather than with the negative connotation of being a burden. For people diagnosed with cancer, the nature of resilience is to focus on what they can do rather than on the limitations or disabilities caused by illness. *Resilience* is a psychobiologic term that refers to a combination of factors in response to the effects of stress or a traumatic event (Jakovljevic & Borovecki, 2018). The notion of physical resilience is a newer concept that can be defined on a cellular level or applied to the whole person (Whitson et al., 2016). Mental and physical resilience are complementary and are interwoven like strands of DNA that cannot always be separated. Although there is no official definition, resilience can be thought of as the resistance to decline and the ability to adapt mentally and physically to recover from a stressor like a cancer diagnosis (George et al., 2023). Resilience is dynamic; involves the physical, emotional, and social domains of well-being; and may be defined differently depending on the person and the situation (Cesari et al., 2022).

Regarding cancer and chemotherapy, resilience protects independence and fosters the physical and emotional stamina to enhance or maintain quality of life (Dias et al., 2019). Aging is different for every person; however, it can be associated with a progressive loss of physical resilience, enhancing the risk of severe or even lethal complications of cancer and cancer treatment (Feliu et al., 2020). When physical resilience is depleted, the functional potential of multiple body systems progressively declines, which can lead to toxicity from the disease or its treatment and the inability to continue with treatment (Balducci & Fossa, 2013).

This article intends to illuminate the notion of physical and mental resilience in older adults receiving chemotherapy to treat cancer. Oncology nurses can better understand the assessment and management of resilience in older adult patients with cancer because 70% of all malignancies in the United States occur in adults aged 65 years or older (National Cancer Institute Surveillance, Epidemiology, and End Results Program, 2022). Resilience is of particular concern in the supportive care oncology management of patients aged 85 years or older who often have complex needs.

Functional Reserve, Intrinsic Capacity, and Resilience

Resilience is the conduit between mental and functional ability to confront disease and aging (Stern et al., 2023), with clinical implications that