



Breast Cancer in Adults: Diagnosis, Treatment, and Management

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Description

Breast cancer is one of the most common cancers in women worldwide, and its incidence increases with age. Geriatric patients, who are defined as those aged 65 and above, have unique characteristics that require special consideration in the diagnosis and treatment of breast cancer.

Firstly, geriatric patients may have multiple coexisting medical conditions, such as heart disease, diabetes, or osteoporosis, that can affect their ability to tolerate cancer treatment. Additionally, age-related changes in organ function, such as decreased liver and kidney function, can affect the metabolism and elimination of chemotherapy drugs, leading to potential toxicity. Therefore, a comprehensive assessment of the patient's overall health status is critical in determining the most appropriate treatment plan for geriatric breast cancer patients.

Secondly, geriatric patients may have a lower life expectancy and different treatment goals than younger patients. While younger patients may prioritize the highest chance of a cure or prolonged survival, geriatric patients may prioritize quality of life, symptom control, and maintaining functional independence. Therefore, the treatment plan should be tailored to the individual patient's goals and preferences.

Lastly, geriatric patients may face unique social and psychological challenges, such as isolation, depression, and cognitive impairment.

These factors may impact their ability to participate in decision-making, adhere to treatment, and manage side effects. As such, a multidisciplinary approach involving geriatricians, oncologists, and other specialists may be necessary to optimize the care of geriatric breast cancer patients.

Methods of breast cancer treatment

Surgery: Surgery is often the primary treatment for breast cancer, especially in the early stages. The most common surgeries include a lumpectomy (removal of the tumor and some surrounding tissue) and a mastectomy (removal of the entire breast). In some cases, a lymph node biopsy may also be performed.

Radiation therapy: Radiation therapy is often used after surgery to destroy any remaining cancer cells. It involves using high-energy radiation to kill cancer cells.

Chemotherapy: Chemotherapy involves the use of powerful drugs to destroy cancer cells. It can be administered intravenously or orally.

Hormone therapy: Hormone therapy is used to block the effects of estrogen and progesterone, which can fuel the growth of some types of breast cancer. Hormone therapy can be given in the form of a pill or injection.

Targeted therapy: Targeted therapy drugs are designed to attack specific proteins in cancer cells, which can help slow or stop the growth of cancer cells.

Palliative care: In some cases, when the cancer has advanced, treatment may focus on palliative care to relieve symptoms and improve quality of life. This may include pain management and other supportive care measures.

Conclusion

Breast cancer in geriatric patients requires a comprehensive approach that takes into account their unique characteristics, including comorbidities, life expectancy, treatment goals, and social and psychological factors. With careful consideration, geriatric patients with breast cancer can receive appropriate and effective treatment that maximizes their quality of life. It's important to note that each patient's situation is unique, and treatment plans may differ based on individual needs and circumstances. It's essential to work closely with a healthcare provider to determine the best course of treatment for a particular case.