

Enhanced Care for Older People

Learning Session Number 32

**Managing cancer symptoms with older people living with and without frailty**

*Dr Dan Jones*

GP Eden Unit, Penrith hospital. Academic GP, University of Leeds. Team

Doctor, Patterdale Mountain Rescue Team

North Cumbria Integrated Care NHS FT



**EnCOP**

Enhanced Care for Older People

EnCOP Lead: Lynne Shaw

Tuesday 19<sup>th</sup> November 2024

1.30 – 3pm

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## Housekeeping

- Please ensure microphones are muted and during presentation cameras are turned off.
- The event will be recorded and shared.
- The webinar recording and presentation will be circulated and uploaded on to the website following the event.
- If you have any questions during the session then please use the chat facility. We will attempt to address questions, if we can't then we will follow up after the event.
- Please also use the chat facility to inform us of any technical issues as this will be monitored closely throughout by one of the EnCOP team.
- Occasionally you may have difficulty seeing or hearing video clips that are played, this will usually be due to your own device or software settings and not something we can influence during the webinar session. Please be assured all content will be shared following the event so you will have an opportunity to view afterwards.
- If you need to take a break at any time throughout the session please feel free to do so.



# Session Aim & Linked Competencies

**Aim: To increase awareness and understanding the experience of older people with cancer symptoms and appropriate management**

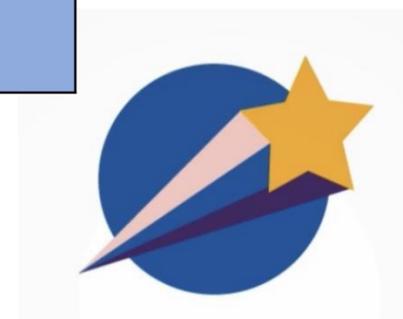
**Linked EnCOP Domains:**

**Domain A: Values, Attitudes and Ethical Practice**

**Domain B: Evidence Based Care : Supporting learning, leadership and improving care for older people**

**Domain C1: Partnership working and communication with older people, families and others**

**Domain D4 : Ageing Well : Promoting and supporting holistic physical health and wellbeing with older people**





# FRAILTY AND CANCER DIAGNOSIS IN PRIMARY CARE

Dr Dan Jones  
GP Eden Unit, Penrith  
Academic Clinical Lecturer

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02



## Handforth et al.

# WHAT DO WE KNOW ABOUT FRAILTY AND CANCER DIAGNOSIS?

Review > [Ann Oncol.](#) 2015 Jun;26(6):1091-1101. doi: 10.1093/annonc/mdu540.  
Epub 2014 Nov 17.

### The prevalence and outcomes of frailty in older cancer patients: a systematic review

C Handforth <sup>1</sup>, A Clegg <sup>2</sup>, C Young <sup>3</sup>, S Simpkins <sup>2</sup>, M T Seymour <sup>3</sup>, P J Selby <sup>3</sup>, J Young <sup>2</sup>

Affiliations + expand

PMID: 25403592 DOI: [10.1093/annonc/mdu540](#)

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SHARE

Over half of cancer patients in this study were frail

These patients were:

Almost twice as likely to die of any cause

Almost three times as likely to die after operative treatment for cancer

More than three times more likely to have post operative complications

Nearly five times more likely to have complications from chemotherapy or  
radiotherapy

# THE CHALLENGE FOR MY FOUR YEAR LECTURESHIP WAS TO INVESTIGATE:



**How**

How do older frail patients get diagnosed with cancer?

**When**

Are there delays to cancer diagnosis in older frail people?

**If**

Do older frail patients want investigations for cancer?

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## MY BACKGROUND

# Penrith Hospital's Eden ward £1.2m revamp to improve patient 'dignity'

8 August 2022

Share  Save 



BBC

Staff said ensuite facilities will give patients more dignity and privacy





Editorials

# Investigating cancer symptoms in older people: what are the issues and where is the evidence?

Daniel Jones, Erica di Martino, Nathaniel L Hatton, Claire Surr, Niek de Wit and Richard D Neal

British Journal of General Practice 2020; 70 (696): 321-322. **DOI:** <https://doi.org/10.3399/bjgp20X710789>

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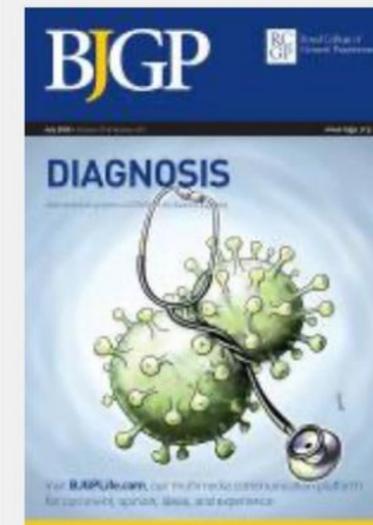
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## INTRODUCTION

Some may argue that when an older person (65 years and older) presents to primary care with symptoms that may represent cancer, they should not be investigated differently from younger patients (less than 65 years). We think that cancer risk management in older people requires a more personalised approach. Recently, there has been a significant increase in knowledge regarding the management of possible cancer symptoms in primary care.<sup>1</sup> However, this knowledge is not age related, and research on the specific diagnostic management of symptomatic older people is scarce, despite older age being associated with greater likelihood of developing cancer. This editorial will explore the issues that are specific to the management of older people with a potential cancer diagnosis, identifying gaps in our knowledge base, and highlighting the need for more research to underpin good practice.

## In this issue



British Journal of General Practice

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July 2020

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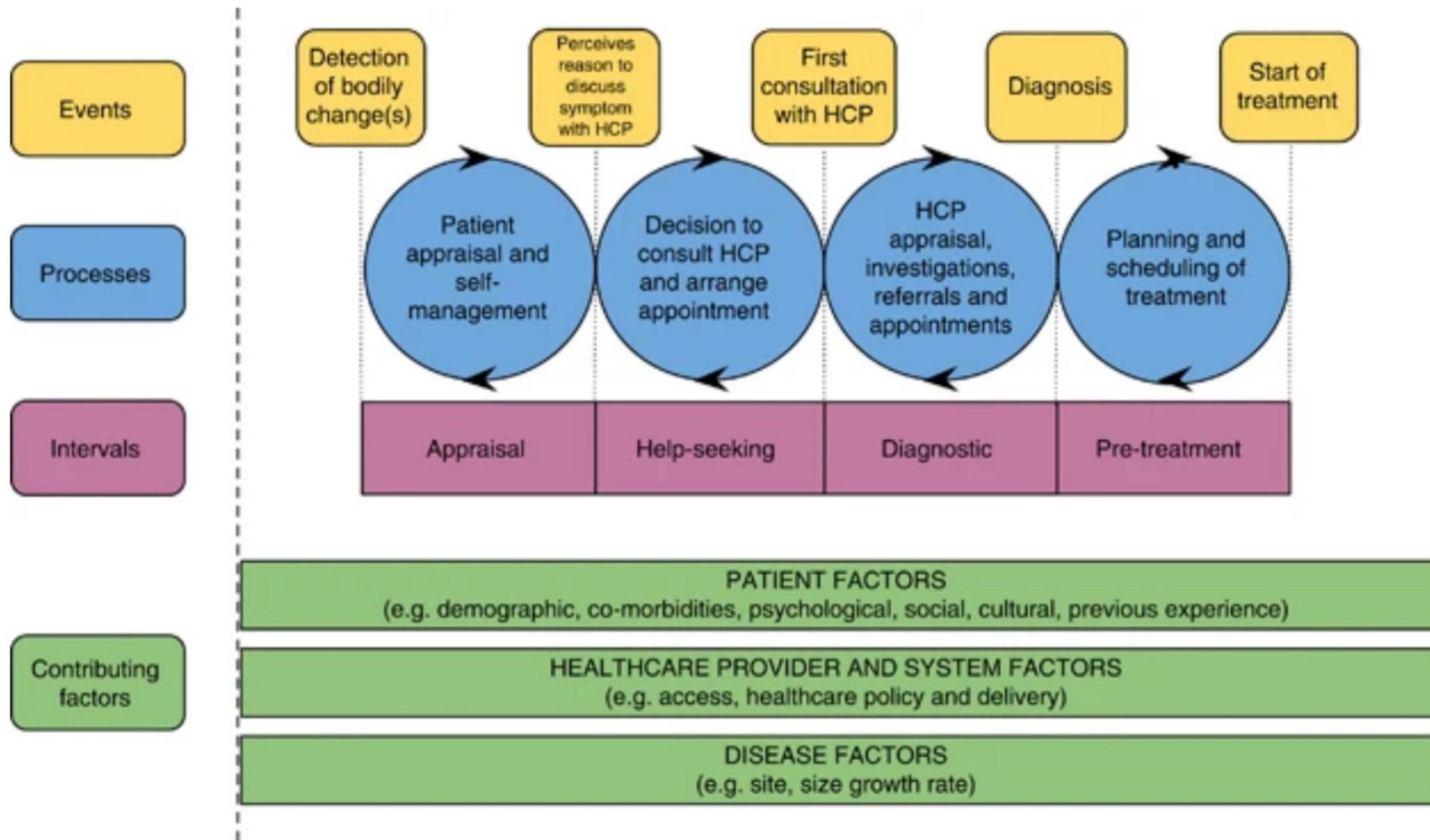
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**HOW**

**TO!**



**SLATE**



Research

## Factors influencing symptom appraisal and help-seeking of older adults with possible cancer: a mixed-methods systematic review

Daniel Jones, Erica Di Martino, Stephen H Bradley, Blessing Essang, Scott Hemphill, Judy M Wright, Cristina Renzi, Claire Surr, Andrew Clegg and Richard Neal

British Journal of General Practice 2022; 72 (723): e702-e712. DOI: <https://doi.org/10.3399/BJGP.2021.0655>

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### Abstract

**Background** The cancer burden falls predominantly on older ( $\geq 65$  years) adults. Prompt presentation to primary care with cancer symptoms could result in earlier diagnosis. However, patient symptom appraisal and help-seeking decisions involving cancer symptoms are complex and may be further complicated in older adults.

**Aim** To explore the effect of older age on patients' appraisal of possible cancer symptoms and their decision to seek help for these symptoms.

**Design and setting** Mixed-methods systematic review.

### In this issue



British Journal of General Practice  
Vol. 72, Issue 723  
October 2022

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Research

## Factors affecting the decision to investigate older adults with potential cancer symptoms: a systematic review

Daniel Jones, Erica Di Martino, Stephen H Bradley, Blessing Essang, Scott Hemphill, Judy M Wright, Cristina Renzi, Claire Surr, Andrew Clegg, Niek De Wit and Richard Neal

British Journal of General Practice 2022; 72 (714): e1-e10. DOI: <https://doi.org/10.3399/BJGP.2021.0257>

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### Abstract

**Background** Older age and frailty increase the risk of morbidity and mortality from cancer surgery and intolerance of chemotherapy and radiotherapy. The effect of old age on diagnostic intervals is unknown; however, older adults need a balanced approach to the diagnosis and management of cancer symptoms, considering the benefits of early diagnosis, patient preferences, and the likely prognosis of a cancer.

**Aim** To examine the association between older age and diagnostic processes for cancer, and the specific factors that affect diagnosis.

**Design and setting** A systematic literature review.

### In this issue



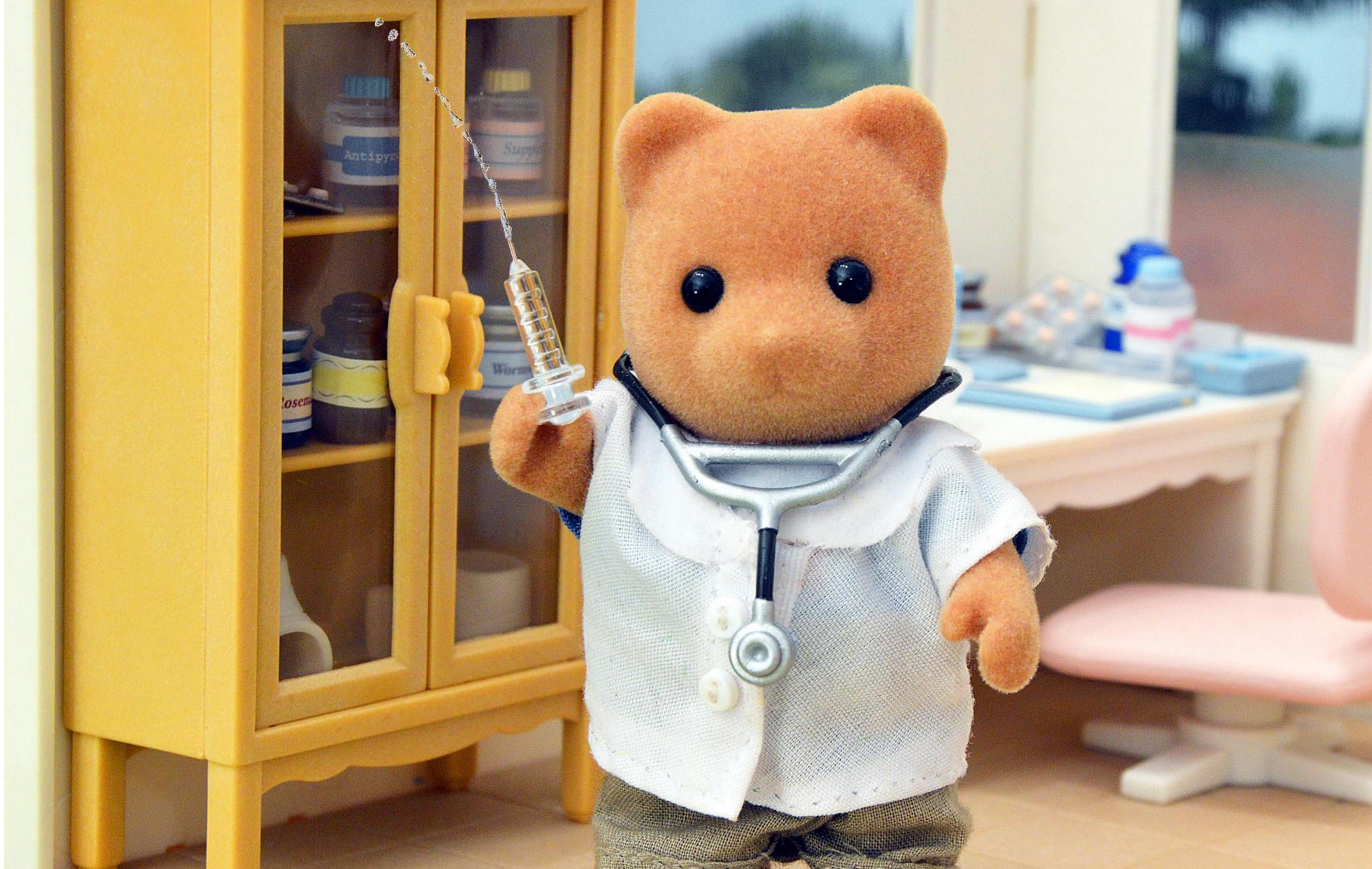
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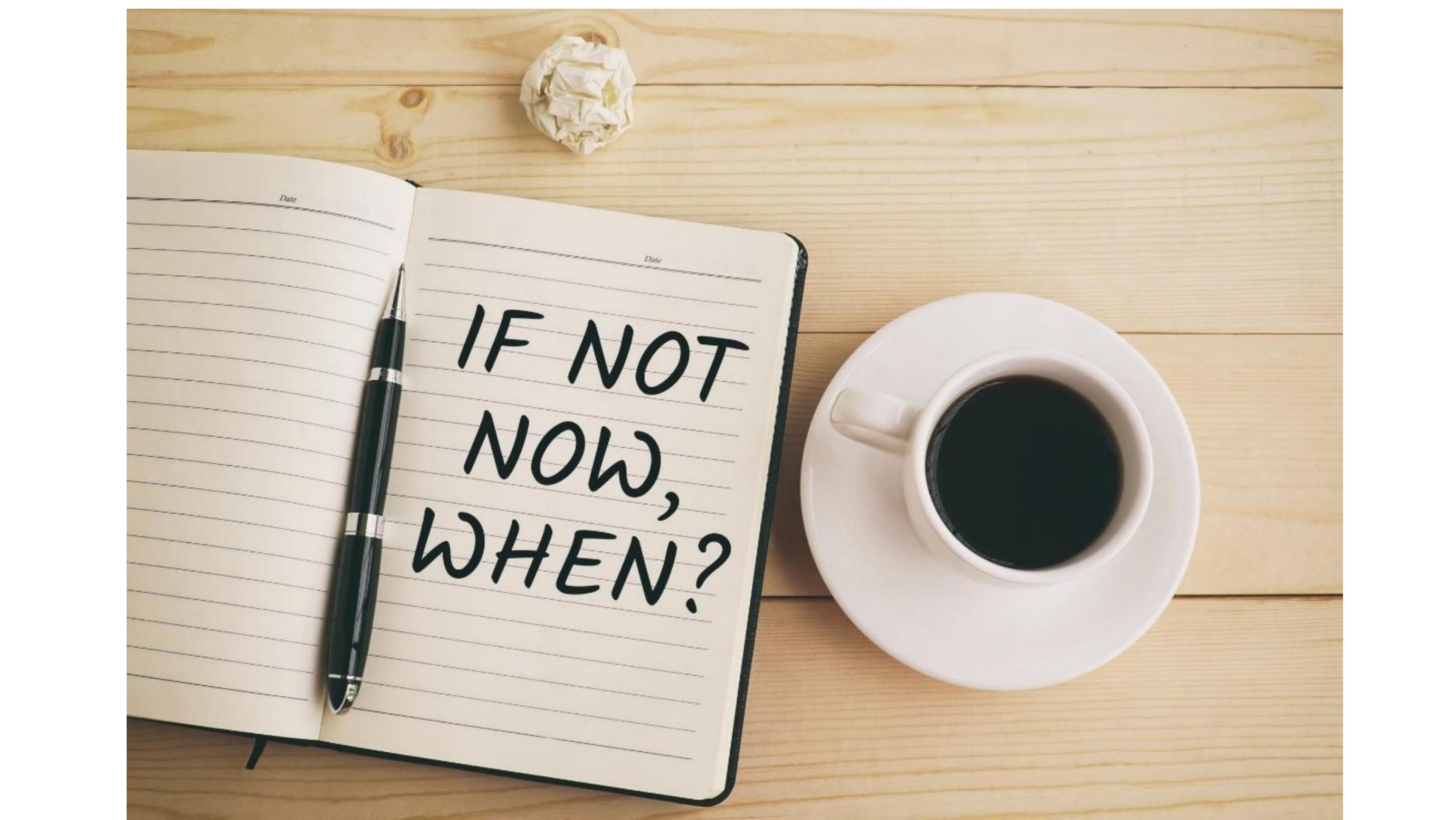
Vol. 72, Issue 714

January 2022

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A top-down view of a wooden desk. In the center-left, an open notebook with lined pages is open. The right page has the text "IF NOT NOW, WHEN?" written in large, bold, black, hand-drawn letters. A black pen with silver accents lies on the left page. To the right of the notebook is a white ceramic cup filled with dark coffee, sitting on a matching white saucer. Above the notebook, a small, crumpled ball of white paper sits on the desk. The desk surface is made of light-colored wood with visible grain and knots.

IF NOT  
NOW,  
WHEN?



Open Access Article

# The Effect of Older Age and Frailty on the Time to Diagnosis of Cancer: A Connected Bradford Electronic Health Records Study

by Charlotte Summerfield <sup>1,\*</sup>, Lesley Smith <sup>2</sup>, Oliver Todd <sup>3,4</sup>, Cristina Renzi <sup>5,6</sup>, Georgios Lyratzopoulos <sup>5</sup>, Richard D. Neal <sup>7</sup> and Daniel Jones <sup>1</sup>

- <sup>1</sup> Academic Unit of Primary Care, University of Leeds, Leeds LS2 9JT, UK
  - <sup>2</sup> Clinical and Population Science Department, School of Medicine, University of Leeds, Leeds LS2 9JT, UK
  - <sup>3</sup> Academic Unit for Ageing and Stroke Research, University of Leeds, Leeds LS2 9JT, UK
  - <sup>4</sup> Bradford Institute for Health Research, Bradford Teaching Hospitals NHS Trust, Bradford BD9 6RJ, UK
  - <sup>5</sup> Epidemiology of Cancer Healthcare Outcomes (ECHO) Research Group, Research Department of Behavioural Science and Health, University College London, London WC1E 6BT, UK
  - <sup>6</sup> Faculty of Medicine, University Vita-Salute San Raffaele, Milan, Via Olgettina 58, 20132 Milan, Italy
  - <sup>7</sup> Department of Health and Community Sciences, Faculty of Health and Life Sciences, University of Exeter, Exeter EX4 4PY, UK
- \* Author to whom correspondence should be addressed.

*Cancers* **2022**, *14*(22), 5666; <https://doi.org/10.3390/cancers14225666>

Submission received: 25 October 2022 / Revised: 12 November 2022 / Accepted: 16 November 2022 / Published: 18 November 2022

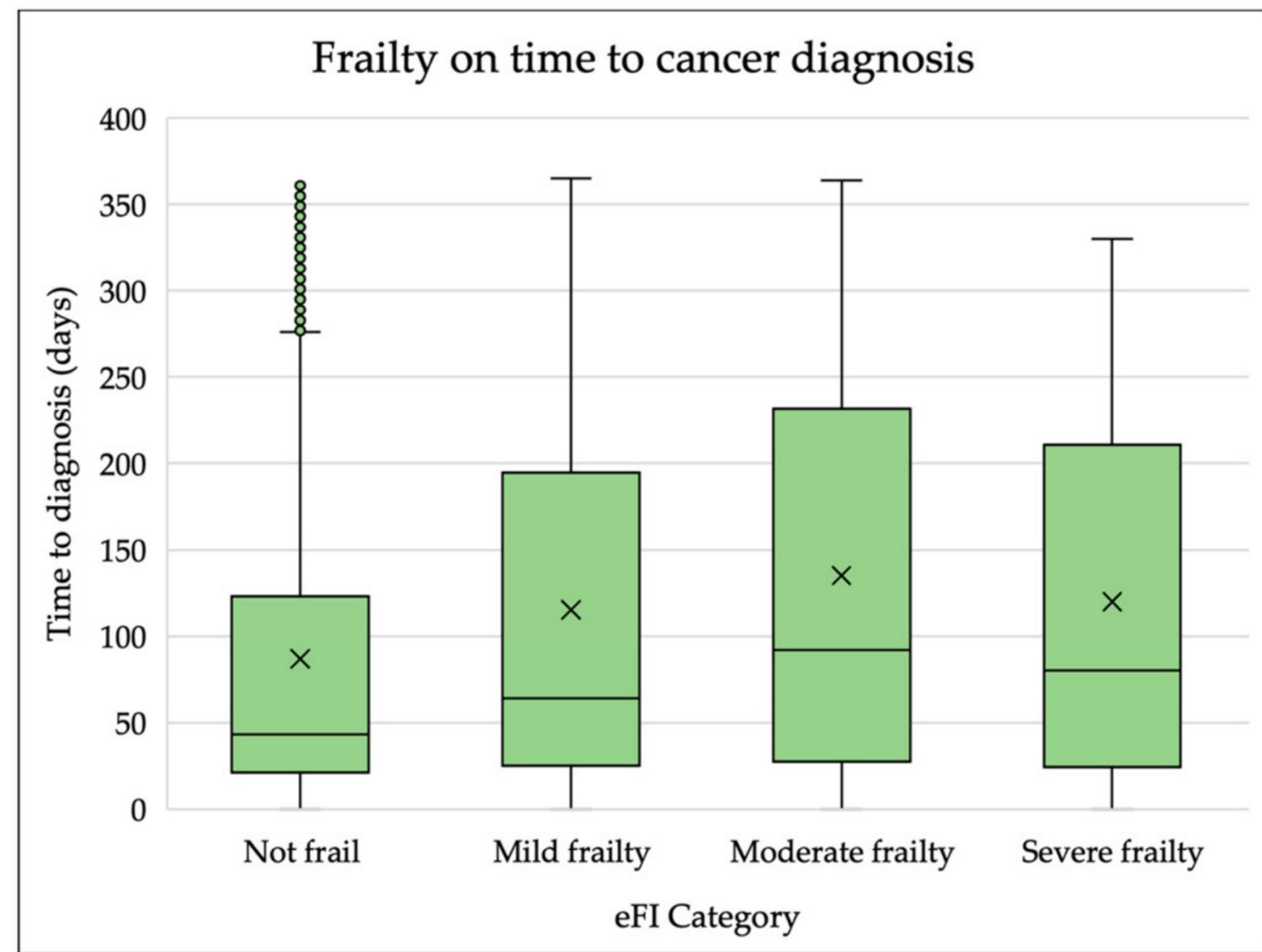
(This article belongs to the Special Issue **Cancer Detection in Primary Care**)

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## Simple Summary

Over 60% of cancer diagnoses in the United Kingdom (UK) are in patients aged 65 and over. It can be more complicated to identify and diagnose cancer in older people due to frailty. Frailty means that people are more vulnerable and often take longer to recover from health problems. Delays in diagnosis and treatment of cancer can lead to poorer patient outcomes. Using a database of patients from the Bradford district, we identified a group of patients who presented to their GP with signs suggestive of cancer, and who went on to be diagnosed with cancer, and calculated their degree of frailty using the electronic frailty index (eFI). We found that 1 in 5 of these patients were identified as frail and that frailty was associated with a significantly longer time to cancer diagnosis. We recommend further research takes place to explore reasons behind this delay in diagnosis.

Figure 2. Box plots of time to cancer diagnosis by level of frailty. X represents the mean value.





Research

## Patients' views on the decision to investigate cancer symptoms in older adults: a qualitative interview study in primary care

Daniel Jones, Omer M Ali, Stephanie Honey, Claire Surr, Suzanne Scott, Niek De Wit and Richard D Neal

British Journal of General Practice 2023; 73 (733): e597-e604. DOI: <https://doi.org/10.3399/BJGP.2022.0622>

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### Abstract

**Background** Cancer is predominantly a disease of older adults. To date there has been little research on the experiences of older adults or their views on the diagnostic pathway.

**Aim** To gain an improved understanding of the views and experiences of older adults on all aspects of cancer investigation.

**Design and setting** This was a qualitative study using semi-structured interviews with patients aged  $\geq 70$  years. Patients were recruited from primary care in West Yorkshire, UK.

**Method** Data were analysed using a thematic framework analysis.

**Results** The themes identified in participants' accounts included the patients' process of decision making, the value of having a diagnosis, the patients' experience of cancer investigations, and the impact of the COVID-19 pandemic on the diagnostic pathway. Older adults in this study indicated a clear preference for having clarity on the cause of symptoms and the diagnosis, even in the face of unpleasant investigations. Patients suggested they wanted to be involved in the decision

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Now  
what?



**THANK  
YOU**

Thanks



Ideas for Learning  
Consolidation & Competency  
Conclusion

**Consolidating Learning:**

**Reflection on the session & considering application to practice & what this means 'your people'**

- Think about this session in relation to your own role
- How much of this was revision?
- What have you learned today ?
- How will this help you in your role ?
- Think about your EnCOP self–assessment; consider which performance indicators this session may relate to and how this can be used as part of your own development / competency achievement.



A: Values, Attitudes and Ethical Practice

B: Evidence Based Care : Supporting learning, leadership and improving care for older people

C1: Partnership working and communication with older people, families and others

Domain D4: Ageing Well : Promoting and supporting holistic physical health and wellbeing with older people



**Enhanced Care for Older People**  
**Learning Session Number 33**  
**Older People Ageing Well and Housing**

Mary Fairfield , Public Health Practitioner , South Tyneside Council  
Dr Philip Hodgson , Assistant Professor , Northumbria University



Thursday 19<sup>th</sup> December 2024 1.30pm – 3pm

**EnCOP**

Enhanced Care for Older People

Feedback about today's session and any future sessions you may like to see included  
in our webinar series....

All feedback welcomed; You may want to consider the following –

Was it easy to book onto the session?

Did you find the session went well in this online format ?

Was the content of the session relevant to your area of practice / job role?

Did you enjoy the session?

Thinking about future webinar's, which topics linked to older person's care would you be most interested in?

Please put any suggestions in the chat.

Please comment in the chat today or feel free to email us: [ghnt.encop@nhs.net](mailto:ghnt.encop@nhs.net)

