## PRIMARY CARE 10 TOP TIPS

## Older people and cancer

This edition: July 2016
Next planned review: July 2018

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- Explore patient's values and beliefs and communicate to secondary care team. This can be invaluable in planning the best care.
- Many older people provide care for grandchildren, partners or spouse.
  Use carer networks to provide support.
- Make use of community teams and ask your CCG to provide a Directory of Services e.g. Memory Clinic, Occupational therapy etc.
- Chemotherapy causes bone loss. Hormone therapies for men (prostate) and women (breast) can cause accelerated osteoporosis. Investigate and treat.
- Communicate current medications and long term conditions (particularly diabetes) to the secondary care team and review polypharmacy regularly. Rationalising medication can be very helpful and be aware that some chemotherapies can affect diabetes control.
- A cancer diagnosis may be stigmatising to some patients. Are there befriending or advocacy services to help? Be prepared to challenge generational perceptions about cancer encourage conversations that make patients aware of improved treatment outcomes.

- Diagnosis of cancer in older patients is more frequently made as an emergency. Consider early referral for suspected cancer. Early diagnosis will reduce treatment burden and give better results.
- Ask specifically about Continence, Hearing, Sight, Cognition and Function. Recognise and refer. Hearing Loss affects 70% of the over 70s and may affect understanding of information given.
- Falls are an important prognostic indicator and a 'flag' for frailty. Ensure prescription medications are not contributing to falls. As per the frailty guidelines, consider referral to OT to reduce trip hazards and to falls clinic for assessment.
- If patients lack capacity as defined in the mental capacity act discuss with family members. Establish if there is a Lasting Power of Attorney for Health and Welfare.

