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LETTER

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Challenges in the diagnosis of breast cancer in the elderly

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Full Text

Sir,

We read the article "Outcome of surgically treated octogenarians with breast cancer." The authors assesed the surgical outcomes of breast cancer in the elderly population and found sufficient survivals. They also commented in the article that age, life expectancy, competing causes of death, comorbidities, functional autonomy, and personal choice were the factors for oncogeriatric patients not receiving standard treatment. [1] We would like to remind that elderly women or men have problems in the diagnosis of breast cancer. Since there are no breast cancer screening programs for women over 75 years of age and for males, they usually present with an advanced stage cancer. Moreover, many elderly men are not aware of the possibility of developing breast cancer.

We had a 90-year-old male patient presented with a 5 cm ulcerated tumor that was gradually developed in 4 years in his right breast. He was living alone and had not realized the risk of having breast cancer until his son saw him while he was changing his clothes. His son brought him to the hospital and the diagnostic procedures revealed a stage IIIb locally advanced invasive ductal carcinoma. One study reported that more than 50% of people who were over 85 years of age had dementia; however, our patient had sufficient mental capacity. [2]

Furthermore, many physicians or health care workers do not routinely evaluate asypmtomatic elderly patients for breast cancer, even if the patient is seen by a family practioner or a general surgeon.

Therefore, we suggest that physicians, health care workers, and people who are at risk and who take care of the elderly must be informed of male and elderly breast cancer as a social responsibility. Yearly clinical breast examinations and monthly breast self-examinations are critical for early diagnosis.

References

1 Tan L, Bate J, McNamara K, Carmichael AR. Outcome of surgically treated octogenarians with breast cancer. J Postgrad Med 2014;60:248-53.

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