Breast cancer in women over 70

Why focus on breast cancer in women over 70?
- Breast cancer is the most common cancer in England and nearly a third of all new cancers in women are breast cancers.
- There are more than 39,000 cases of breast cancer in women each year in England and 13,000 of these are in women aged 70.
- There are around 10,000 deaths from breast cancer in women in the UK each year and around 5600 of these are in women aged 70 and over.
- One in three women in England diagnosed with breast cancer is aged 70 or older.

Who’s at greatest risk of breast cancer?
- Breast cancer risk greatly increases with age.
- Breast cancer is one of the few cancers where rates are higher in more affluent women.
- There are a number of reproductive factors that put women at greater risk: low parity, young age at menarche, older age at first birth, not breast-feeding and late menopause.
- HRT, oral contraceptives, previous breast disease, breast density and family history affect risk.
- Non-reproductive factors that affect risk – being overweight or obese after the menopause and drinking alcohol increase risk. Being physically active decreases risk.

The importance of diagnosing breast cancer early
- Survival rates are lower in older women, although there are signs that this difference is narrowing – around 7 out of 10 women diagnosed with breast cancer aged 70 or older, survive the disease for at least 5 years.
- Data isn’t available for one year survival for over 70s as a whole, but for women in England aged 70-79, one year survival is 93.3%, and for those aged 80-99 it is 86.5%.
- Estimates suggest that nearly 2000 deaths from breast cancer (all ages) could be avoided if survival rates matched the best in Europe.

Breast cancer awareness and delay
- There is evidence that delay between onset of symptoms and the start of treatment influences breast cancer survival.
- There is evidence that older women are more likely to delay presenting to their GP with symptoms of breast cancer.
- Older women have lower awareness of risk factors such as age, and of symptoms, particularly non-lump symptoms.
- Non-lump symptoms are associated with delay by both patients and providers.
- There is evidence that women with fewer educational qualifications have lower awareness of symptoms and risk factors and survival is lower in women in lower socio-economic groups.
- Many women over the age of 70 are not aware that they can still receive breast screening by requesting an appointment once the screening programme stops automatically inviting them.
- There is no evidence that regular breast self-examination reduces mortality and it may even do more harm than good, but there is a role for breast awareness in potentially reducing morbidity.
Symptoms of breast cancer

- Women should see their GP about any breast change - a change in the size, shape or feel of breasts, a new lump or thickening in one breast or armpit, any puckering, dimpling or redness of the skin, changes in the position of the nipple, a rash or nipple discharge, or new pain or discomfort that is only on one side.

Evidence from evaluated campaigns

- The Promoting Early Presentation (PEP) Intervention demonstrated that breast cancer awareness can be increased in older women and is sustained two years later. The PEP intervention was delivered in the form of a scripted 10 minute interaction with a radiographer following a woman’s mammogram. The intervention was also supported by a booklet. At two years’ post intervention 21% of the women in the intervention group were breast cancer aware versus 6% in the usual care group.14,15,16,17

More information?

- For more information about the National Awareness and Early Diagnosis Initiative sign up to the NAEDI newsletter by emailing naedi@cancer.org.uk.
- For more background on the evidence and rationale for early diagnosis, take a look at the NAEDI supplement.
- Find out more about diagnostic testing for breast cancer on Cancer Research UK’s patient information section of the website.
- Read the NICE referral guidelines for suspected cancer.

References


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