

Patients over 65 have more complications after colorectal cancer surgery

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Most colorectal cancer surgeries are performed on compared with those who are younger," Mehraneh patients older than 65 years, and older patients have worse outcomes than younger patients, although the total number of colon cancer operations has decreased in the past decade.

Gastrointestinal cancers are common in the elderly with peak occurrences in the sixth and seventh decades of life. Colorectal cancer (CRC) is a leading cause of death and surgery remains the curative treatment.

The authors examined the trends and outcomes of colorectal cancer surgery in the elderly in a nationwide sample of inpatients from 2001 through 2010. Patients were divided into age groups: 45 to 64, 65 to 69, 70 to 74, 75 to 79, 80 to 84, and 85 years and older.

Among the more than 1 million patients with colorectal cancer included, 63.8 percent of the operations were performed on patients 65 years and older and 22.6 percent on patients 80 years and older. Patients 80 years and older were 1.7 times more likely to require urgent admission to the hospital than patients younger than 65 years. Compared to patients 45 to 64 years, higher hospital death and complication rates were seen in older patients. Patients 80 years and older also had a \$9,492 higher hospital charge and a longer length of stay at the hospital (2.5 days longer) compared with patients younger than 65 years. The total number of colon cancer surgeries decreased an average of 5.1 percent and 7 percent per year for the entire population and the aging population, respectively. Mortality rates improved in all age groups during the decade studied.

"In this extensive review of national trends of CRS [colorectal cancer resection], we observed that, despite the improvements in mortality and a decrease in the incidence of CRS, older patients continue to have worse risk-adjusted outcomes

D. Jafari, M.D., and colleagues from the University of California, Irvine School of Medicine, Orange wrote in their JAMA Surgery article.

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