

POSTER ABSTRACTS

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Cancer 02

Stage III Colon Cancer in the Elderly: Adjuvant Therapy and Survival

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Background. Recent attention has been given to the use of adjuvant therapy in the elderly. The National Comprehensive Cancer Network and others recommend adjuvant therapy for patients with Stage III colorectal cancer.

Methods. In a retrospective cohort study of 223 patients with primary Stage III colon cancer diagnosed between 1990-2000 at two HMOs (Henry Ford Health System and HealthPartners), we examined the use of adjuvant therapy among older patients.

Results. Of the 223 patients, 82 (37%) were >69 years old. Ten cases were excluded from this analysis due to incomplete information or death in the peri-operative period. Of the remaining 72 patients, there were an equal number of men (n=37, 51%) and women (n=35, 49%). Twenty-two cases (31%) were African-American and 49 (68%) were Caucasian. From medical chart review, 42 (58%) were identified as receiving adjuvant treatment. Of the remaining 30 patients who did not, the reason cited in the chart was co-morbidity (n=14, 47%), refusal (n=11, 37%), or age (n=5, 17%). The 5-year survival rate for those treated was 81%, compared to 31% in the untreated group (log-rank test p-value<0.01). The hazard ratio for comparison of the overall survival between the treated and the untreated groups was 0.32 (95% confidence interval 0.13-0.77). Adjusting for major co-morbidities the hazard ratio was essentially unchanged.

Conclusions. Our observational findings support the hypothesis that Stage III colorectal cancer patients over 69 who receive adjuvant therapy have a survival advantage over those who do not.