National Institute on Aging



Cancer Facts for People Over 50

Cancer strikes people of all ages, but you are more likely to get cancer as you get older, even if no one in your family has had it. The good news is that cancer death rates are going down. No matter what your age, the chances of surviving cancer are better today than ever before.

What Is Cancer?

There are many kinds of cancer but they all begin when cells in a part of the body become abnormal and start making more cells. These extra cells form a mass of tissue called a growth

> or tumor. If the tumor gets bigger, it can hurt nearby tissues and organs. Cancer cells also can break away and spread to other parts of the body.

When cancer is found early, treatment is more likely to work. Early treatment often can shrink or destroy the tumor and stop it from growing and spreading. It may help to get regular checkups and to know the symptoms of cancer.

What Symptoms Should I Watch For?

Cancer can cause many different symptoms. Here are some things to watch for:

- A thickening or lump in the breast or any other part of the body
- A new mole or a change in an existing mole
- A sore that does not heal
- Hoarseness or a cough that does not go away
- Changes in bowel or bladder habits
- Discomfort after eating
- A hard time swallowing
- Weight gain or loss with no known reason
- Unusual bleeding or discharge
- Feeling weak or very tired

Most often, these symptoms are not due to cancer. They may be caused by non-cancerous (benign) tumors or other problems. If you are having any of these symptoms or other changes in your health, you should see a doctor as soon as possible.

Don't wait to feel pain. In its early stages, cancer usually doesn't cause pain.

What Regular Tests Should I Have?

It is important to have regular tests to check for cancer long before you might notice anything wrong. Checking for cancer when you don't have symptoms is called screening. Screening may involve a physical exam, lab tests, or tests to look at internal organs.

Medicare now covers a number of screening tests for cancer. For more information, call the Medicare toll-free help line at 800-633-4227.

Before recommending a screening test, your doctor will ask about your age, past medical problems, family medical problems, general health, and lifestyle. You may want to talk about your concerns or questions with your doctor so that together you can weigh the pros and cons of screening tests.

If you are 50 or older, the following is a list of some screening tests that check for some specific cancers:

Breast Cancer: *Clinical Breast Exam* during a clinical breast exam, a doctor or other health care professional checks the breasts and underarms for lumps or other changes that could be a sign of breast cancer. Although primarily diagnosed in women, breast

cancer can happen to men as well.

Breast Cancer: *Mammogram*—a special x-ray of the breast that often can find cancers too small for a woman or her doctor to feel. A woman's risk of breast cancer goes up as she gets older. The National Cancer Institute (NCI) says that women in their 40s or older should have a screening mammogram every 1 to 2 years.

Cervical Cancer: *Pap Test*—the doctor gently scrapes cells from the cervix (the lower part of the uterus or womb) and vagina. The cells are sent to a lab to see if they are abnormal. The NCI recommends that all women have a Pap test at least once every 3 years. However, if you are age 65 or older, talk with your doctor about whether you still need to get Pap tests.

Cervical cancer is caused by a virus, called the human papilloma virus (HPV), which can stay in the body for many years. **Cervical and Other Cancers**: *Pelvic Exam*—the doctor checks the uterus, vagina, ovaries, and rectum for any changes in shape or size. During a pelvic exam, an instrument called a speculum is used to widen the vagina so that the upper part of the vagina and the cervix can be seen.

Colorectal Cancer: *Fecal Occult Blood Test*—stool samples are put on special cards and sent to a lab. In the lab, they are looked at under a microscope to see if there is occult (hidden) blood, which can be a sign of cancer. Studies show that if you have a fecal occult blood test every 1 or 2 years between the ages of 50 and 80, you can lower your chance of dying from colorectal cancer. Most cases of colorectal cancer are diagnosed in people over age 50.

Colorectal Cancer: *Sigmoidoscopy* the doctor uses a thin, flexible tube with a light to look inside the lower part of the colon and rectum for growths or abnormal areas. Studies show that sigmoidoscopy, done once every 5 years, can save lives.

Colorectal Cancer: *Colonoscopy* although like a sigmoidoscopy, this test looks at the whole colon. Some doctors recommend a colonoscopy every 10 years. **Mouth and Throat Cancers**: *Oral Exams*—are used by doctors and dentists to detect cancer early by looking at the lips, tongue, mouth, and throat to see if there are any abnormal changes.

Prostate Cancer: *Digital Rectal Exam*—the doctor puts a gloved finger into the rectum and feels the prostate through the wall of the rectum. If the doctor feels hard or lumpy areas, they may be a sign of cancer. Prostate cancer is the most common cancer in American men especially men over age 65. Researchers are working to find the best screening test for prostate cancer.

Prostate Cancer: *Prostate Specific Antigen (PSA) Test*—measures the amount of PSA in the blood. If the PSA level is higher than average, it may mean that prostate cancer cells are present. PSA levels also may be high in men who have other prostate problems. Researchers are studying ways to make the PSA test more accurate.

Skin Cancer: *Skin Exams*—are routine exams of the skin that can help find skin cancer early. Skin cancer is the most common form of cancer in the United States.

If a screening test does show a growth or abnormal change, it doesn't always mean that you have cancer. You may need more tests. A biopsy is the only sure way to know whether the problem is cancer. In a biopsy, a small piece of tissue is taken from the abnormal area and looked at under a microscope to check for cancer cells. If tests show you have cancer, you should talk with your doctor and decide how to treat it as soon as possible.

How Is Cancer Treated?

There are a number of cancer treatments. These include surgery, radiation therapy, and chemotherapy (anticancer drugs). Recently, doctors have also been using biological therapy for some cancers. Some biological therapies help the body's own defenses kill cancer cells. Other biological therapies block the chain of events in and around cancer cells so that they die or stop growing.

People with cancer often see different specialists. These may include a medical oncologist (specialist in cancer treatment), a surgeon, a radiation oncologist (specialist in radiation therapy), and others. The doctor may talk with you about using one type of treatment alone or two or more treatments together. Your choice of treatment depends on the type of cancer you have, where it is in the body, and the stage it is at. You and your doctor will also take into account your overall health and any specific health problems you may have.

You may have heard that older people cannot have the same treatments as younger people with cancer. But studies show that treatments used in younger adults are often safe and work just as well in older adults.

Before starting treatment, you may want another doctor to go over the diagnosis and treatment plan. This is called getting a second opinion. Some insurance companies require a second opinion; others may pay for a second opinion if you ask for one.

Some cancer patients take part in studies of new treatments. These studies—called clinical trials—are meant to find out whether new treatments are safe and whether they work or work better than other treatments. If you are a cancer patient and are

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interested in taking part in a clinical trial, talk with your doctor. You can find out about current clinical trials for cancer from the NCI's Cancer Information Service, see the 'For More Information' section.

Can Cancer Be Prevented?

Although your chances of getting cancer go up as you get older, there are things that you can do to prevent it. Experts think that about two-thirds of all cancers may be linked to things we can control, especially use of tobacco and what we eat and drink. Having a lot of contact with some chemicals, metals, or pesticides (weed killers and insect killers) can also make your risk of cancer higher. You can lower your risk of cancer in several ways:

- Do not use tobacco products. Tobacco causes cancer. In fact, smoking tobacco, using smokeless tobacco, and passive smoking (often breathing other people's tobacco smoke) cause a third of all cancer deaths in the United States each year.
- Avoid sunburns. Too much ultraviolet radiation from the sun and from other sources such as sunlamps and tanning

booths—damages your skin and can cause skin cancer.

- *Eat right.* Have at least five servings of fruits and vegetables each day. Also cut down on fatty foods and eat plenty of fiber.
- Keep your weight down. People who are very overweight are more likely to get cancers of the prostate, pancreas, uterus, colon, and ovary. Older women who are overweight are more likely to develop breast cancer.
- Stay active. Studies show that exercise can help lower your chance of getting breast and colon cancer and perhaps other cancers too. The National Institute on Aging has more information on exercise for people age 50 and older, see the "For More Information" section.
- If you drink alcohol, don't have more than one or two drinks a day. Drinking large amounts of alcohol raises the risk of cancers of the mouth, throat, esophagus, and larynx.
 People who smoke cigarettes and drink alcohol have an especially high risk of getting these cancers.
- Follow work and safety rules to avoid dangerous contact with materials that cause cancer.

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For More Information

The Cancer Information Service (CIS), a program of the National Cancer Institute, can provide accurate, upto-date information about cancer. Information specialists can answer your questions in English, Spanish, and on TTY equipment. The number is easy to remember: 800-4-CANCER (800-422-6237, toll-free) or 800-332-8615 (TTY/toll-free).

You can get answers to your questions online through the CIS instant messaging service on NCI's website at *www.cancer.gov*. Click on "LiveHelp online chat".

For more information about health and aging, contact:

National Institute on

Aging Information Center P.O. Box 8057 Gaithersburg, MD 20898-8057 800-222-2225 (toll-free) 800-222-4225 (TTY/toll-free) www.nia.nih.gov

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