

Engaging Older Adults With Cancer and Their Caregivers to Set Research Priorities Through Cancer and Aging Research Discussion Sessions

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PURPOSE: To report on the perspectives of older adults (aged older than 65 years) with cancer and their caregivers who participated in patient-oriented research priority-setting activities called the Cancer and Aging Research Discussion Sessions.

PARTICIPANTS & SETTING: 35 older adults and caregivers participated in three public meetings and follow-up interviews.

METHODOLOGIC APPROACH: Qualitative descriptive.

FINDINGS: There was clear consensus from participants on research priorities related to two key areas: enhanced communication and tailored cancer support for older adults, encompassing the following five research priorities: (a) improved patient-provider communication, (b) technology-based solutions, (c) desire for enhanced patient education strategies addressing multimorbidity and aging-sensitive needs, (d) tangible and accessible survivorship supports, and (e) support for caregivers and caregiver needs.

IMPLICATIONS FOR NURSING: Future research should focus on addressing age-related disparities in cancer care communication and support. By capitalizing on older adults' interest in research engagement, effective solutions can be cocreated to improve cancer experiences for older adults and their caregivers.

KEYWORDS older adults with cancer; caregivers; research priorities; communication; support

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Cancer is common among older adults globally, and the numbers are expected to increase in incidence, ranging from 54% in more developed regions to 144% in less developed regions by 2035 (Pilleron et al., 2019). This increasing incidence matters because older adults with cancer have age-related needs, which, if left unmet, may lead to health disparities, including the deleterious impacts of over- and undertreatment (DuMontier et al., 2020). These unique needs of older adults include demands of multimorbidity (Sarfati et al., 2016), potentially high symptom burden, and susceptibility to treatment toxicities (Nipp et al., 2016). In addition, the physical consequences of cancer, alongside psychosocial consequences, such as emotional distress and memory changes, may be more burdensome for older adults experiencing comorbid conditions, frailty, and functional decline (Pal et al., 2010; Schouten et al., 2019). Transition from treatment to survivorship or post-treatment can be equally challenging given the complex management of existing chronic conditions and potential accumulation of new comorbidities resultant of treatment (Leach et al., 2015; Tolbert et al., 2018).

For older adults, a cancer diagnosis also affects caregivers, and prior research demonstrates the criticality of caregivers in supporting older adults with cancer (Hsu et al., 2014; Kent et al., 2016; Tolbert et al., 2018). Given the prevalence of functional decline among older adults with cancer (Amemiya et al., 2007; Hurria et al., 2019; Kenis et al., 2017), caregivers are a key support for getting patients to and from treatment and supporting symptom management in the intervening period (Hsu et al., 2014;