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# Management disparity in elderly female with breast cancer following mastectomy: a cross-sectional study

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**Objective:** This study aimed to evaluate the oncologic approach of elderly women ( $\geq 70$  years old) diagnosed with stage I–III breast cancer who undergoing mastectomy and compare with younger patients. **Methodology:** In this single-center study, we included a total of 930 female patients with early breast cancer who were undergoing mastectomy from January 2018 to December 2022 at Aristides Maltez Hospital. For this analysis, patients were divided in two groups (group 1:  $\geq 70$  years and group 2:  $< 70$  years). We performed review of medical records and collected clinical and sociodemographic characteristics, in addition to data of surgery, systemic treatments and pathological reports. This study was approved by the Research Ethics Committee of Institute of Health Sciences at the Federal University of Bahia, with CAAE number 57203622.0.0000.5662. **Results:** Notably, 96 patients (10.3%) were 70 years old or older. Between the two groups, there was no statistically significant difference in demographics features or clinical stage, but group 1 had slightly more clinically node-positive (56.7% vs. 41.4%;  $p=0.038$ ). Group 1 was submitted to more up-front surgery, even in more advanced stages, more axillary dissection (86.5% vs. 73%;  $p=0.006$ ), but, in contrast, received less neoadjuvant chemotherapy (33.3% vs. 50.4%;  $p<0.01$ ). Immediate breast reconstruction was performed less frequently in elderly patients (1% vs. 23.9%;  $p<0.01$ ). Furthermore, elderly women received less adjuvant anthracyclines-based chemotherapy (52.5% vs. 76.7%;  $p<0.01$ ) and more adjuvant chemotherapy with non-anthracyclines-based protocols (30% vs. 5.5%;  $p<0.01$ ). **Conclusion:** In this study, we found management disparities between elderly and younger females with breast cancer. Elderly patients were undergoing to more axillary node dissection and less immediate breast reconstruction. Furthermore, 70 years old or older women received less neoadjuvant chemotherapy and anthracycline-based adjuvant therapy, even though there were no significant differences in clinical stage and elderly had higher incidence of positive axillary lymph node.

**Keywords:** breast cancer; elderly; mastectomy; neoadjuvant therapy; chemotherapy.