

Transcript Details

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The Impact of Cancer on the Young Adult Patient

Announcer:

Welcome to CME on ReachMD. The following CME activity is provided by TOPEC and the Roswell Park Comprehensive Cancer Center through the generous support of BlueCross BlueShield of Western New York.

Dr. Rokitka:

Hi, my name is Dr. Denise Rokitka. I am the Director of the Pediatric, Adolescent and Young Adult Cancer Survivorship Program here at Roswell Park Comprehensive Cancer Center. Today I'm going to talk about The Impact of Cancer on the Young Adult Patient.

I have nothing to disclose.

Learning objectives in this particular presentation will be to describe the adolescent and young adult cancer population, what makes them unique and why they need special attention, to discuss the more common types of cancer seen among adolescent and young adults, to know what action to take if a malignancy is suspected in your young adult patient.

What is an AYA, or adolescent young adult? The National Cancer Institute designates an adolescent and young adult, aka AYA, with cancer to be anyone diagnosed with cancer between the ages of 15 and 39. This age range varies around the world. The WHO criteria are ages 12 to 24. The United Kingdom uses the ages of 15 to 24. Australia uses the ages of 15 to 29 years. Canada uses the ages of 18 to 39 years of age with a particular initial focus on ages 15 to 24 years. In Europe they use the same age as the US, and in India 15 to 29 years.

The age range has been under consideration given that a person runs through different life events anywhere from 15 to 39. A 15- to 20-year-old may be just completing high school, while a 35-year-old to a 39-year-old may be just having started a family. Therefore, the subgroups may be important for addressing particular issues that are AYA concerns.

There is an estimated 1 million young adult cancer patients throughout the world with an estimated 70,000 that will be diagnosed with cancer between the ages of 15 to 39 in the US. This is 6 times the number of cancers diagnosed in children ages 0 to 14.

In this particular slide, we look at the common types of cancer affecting AYAs. In patients age 15 to 19, you can see that primarily leukemias and lymphomas are the most common types of cancer diagnosed in that age range, and again, this holds somewhat true for those patients age 20 to 24 with a beginning increase of germ cell tumors as well. However, when you look at the older adolescent young adult patient and we look at patients age 25 to 39, we see a significant increase in breast cancer, thyroid cancer, and melanoma of the skin.

In this slide we are looking at a graph of the continuum of a patient age 15 to 40 and their cancer diagnosis. The incidence of cancer in this age group is much higher for breast, which you see a very sharp incline at the age of 25. In particular, young adults diagnosed with breast cancer often have more late-stage breast cancer, often have more aggressive cancers and often have a higher risk of recurrence than the adult breast cancer patient. So overall, this slide is again just depicting the most common types of AYA cancers, including breast, thyroid, melanoma and testicular cancers.

So this graph is looking at the survival rates in AYA patients. We know that patients over the last several decades have had an increase

in cancer incidents. However, we also know that survival rates have increased overall for most populations. However, if you look particularly at the AYA age group, 15 to 40, the increases in survival have not been realized. In fact, there has been little to no improvement in survival in those patients age 20 to 30, again pointing out that this population is a special population and needs special attention. In addition, the most common cause of death in this population is cancer.

The adolescent and young adult age group: So there are many reasons why the survival statistics have not increased for this AYA group. First, we know that AYA patients don't often adhere as well to oral medications in their cancer treatment. One of the reasons for the adolescent young adult gap can be that patients aren't going on a clinical trial and therefore aren't having increases in survival statistics. Clinical trials often offer standard of care therapy along with possible novel therapies that can improve survival. The adolescent and young adult gap: Again, in this study over 50,000 patients were polled to see if they went on a clinical trial, and again, you can see that between the ages of 15 to 40, the numbers were alarmingly less than those of older ages or younger ages.

One of the reasons or concerns with a decrease in survival statistics in AYA patients is a delay in diagnosis. Various reports suggest that AYA patients experience a delay in being diagnosed with their cancers. Often primary care providers believe that their patients are too young for cancer, that this isn't cancer or this can't be cancer because they have never seen such a young patient be diagnosed with breast cancer. Patients themselves often feel that they are too young for cancer and that cancer is only for old people. Lastly, another reason for a delay in diagnosis is that patients often in this age group become uninsured. Patients without insurance often have lack of healthcare follow-up along with poor access to healthcare. Patients without insurance often have their cancer diagnosed in later stages as well.

Primary care providers sometimes miss the signs and symptoms of cancer in their young adult patients. Common symptoms of cancer in young adults can be an unusual lump or swelling in the neck, breast, abdomen, testicle or anywhere else, unexplained tiredness and loss of energy, easy bruising or abnormal bleeding, ongoing pain in a particular part of the body, unexplained fever or illness that doesn't go away, frequent headaches that can be associated with vomiting, sudden eye or visual changes, loss of appetite or unplanned weight loss, a new mole or a spot on the skin or one that changes in size, shape or color.

There are many unique issues to AYA patients. First, education can be of particular concern because often these patients are either just completing their education and just about to enter the workforce or they are figuring out how to complete their education while they are undergoing cancer treatment. Employment can also be another issue, as these AYA patients are often just entering their career path and trying to figure out how to manage their cancer treatment along with potentially unemployment or financial disability. Relationships and intimacy can be particularly concerning to AYA patients. Family planning begins at this age in life, and intimacy can be affected, specifically by cancer treatment. Body image is also a concern for AYA patients as their cancer treatment may affect how they are feeling and how they feel about themselves. Fertility risks are a particular concern to AYA patients. Often they are concerned with whether they can have children, whether those children will be healthy and whether they should have children. Fertility preservation is often extremely important in this AYA age group as well, and they often ask questions about this as well. AYA patients often feel socially isolated, emotionally isolated, and sometimes even isolated from their family and friends. AYA cancer is rare, and therefore, they don't tend to have a lot of support mechanisms.

Announcer:

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