

PRESS RELEASE

For immediate release

Luxembourg, 24 April 2025

Older Adults Overlooked in Cancer Guidelines Across Europe

A new study led by LIH researcher Dr India Pinker highlights the critical gaps for older adults in national cancer care guidelines across 31 European jurisdictions.

A scoping review of 187 cancer care guidelines across Europe reveals a widespread underrepresentation of older adults in national cancer guidelines. The findings call for urgent action to improve guidance and support for geriatric oncology amid ageing populations.

A comprehensive study, led by Dr India Pinker, a postdoctoral researcher at the Luxembourg Institute of Health (LIH), within the Ageing, Cancer and Disparities (ACADI) Research Unit of the Department of Precision Health (DoPH) under the supervision of Dr Sophie Pilleron has uncovered significant gaps in how older adults are represented in national cancer care guidelines across Europe. The work, conducted in collaboration with the International Society of Geriatric Oncology (SIOG), underscores a pressing need to strengthen support for ageing populations in cancer guidelines.

The scoping review assessed 187 guideline reports from 31 European jurisdictions, covering five of the most common cancers—breast, prostate, colorectal, lung, and urinary bladder. Despite the growing cancer burden among older adults, the study found that specific guidance for this demographic group remains underdeveloped, inconsistent, and highly dependent on geographic and disease-specific factors.

"Older adults make up the majority of cancer patients, yet many of the policies meant to guide their care are not equipped for this," said Dr India Pinker. "Our study shows that we lack dedicated, evidence-based recommendations for older adults, which poses a risk that the needs of this complex and heterogeneous group will go unmet."

Key findings indicate that countries such as France, Germany, and Sweden are making strides with age-specific recommendations, while others—particularly in Eastern Europe—lag due to constraints hindering the update or creation of national guidelines. Focusing on national findings for the five cancers examined, at the time of analysis, Luxembourg had issued <u>national treatment guidelines</u> for two – namely <u>colorectal</u> and <u>lung cancer</u> – which included specific recommendations for older adults within the colorectal cancer care guidelines. These recommendations acknowledged the limited available evidence, while emphasising the importance of considering individual health and functional status when planning treatment. Indeed, many existing guidelines fall short of addressing the complexities of geriatric oncology, often due to a lack of clinical trial data involving older patients. The review points to several root causes behind these shortcomings: limited inclusion of older adults in randomised clinical trials, slower adoption of new treatments in less affluent countries, and a lack of communication between oncologists and geriatric specialists to guide cancer care. These challenges, combined with ageing populations, highlight a growing public health concern that European cancer strategies must urgently address.

The LIH-led research also advocates for broader adoption of tools like the Comprehensive Geriatric Assessment together with personalised interventions to tailor treatment decisions, which should not



be based on chronological age only. Additionally, it recommends strengthening collaboration between oncologists and geriatricians to develop inclusive, actionable guidelines at both national and international levels.

With its clear evidence and broad European scope, this study provides a critical roadmap for future policy enhancements. As Dr Pinker notes, "Cancer care must evolve to reflect the realities of our ageing societies. We hope this work highlights the importance of generating and using evidence and geriatric expertise in shaping national cancer care guidelines. These measures will help to reduce agerelated disparities in cancer outcomes and ensure care is able to effectively respond to demographic realities."

The full paper was published in the *ESMO Open* Journal under the full title "<u>Representation of</u> geriatric oncology in cancer care guidelines in Europe: a scoping review by the International Society of Geriatric Oncology (SIOG)".

Funding and collaborations

This work was supported by the Luxembourg National Research Fund (FNR) in the framework of the FNR ATTRACT Fellowship ReDiCO granted to Dr Sophie Pilleron (Project n°16731054).

About the Luxembourg Institute of Health (LIH)

The Luxembourg Institute of Health (LIH) is a public biomedical research organisation focused on precision health and invested in becoming a leading reference in Europe for the translation of scientific excellence into meaningful benefits for patients.

The LIH places the patient at the heart of all its activities, driven by a collective obligation towards society to use knowledge and technology arising from research on patient derived data to have a direct impact on people's health. Its dedicated teams of multidisciplinary researchers strive for excellence, generating relevant knowledge linked to immune related diseases and cancer.

The institute embraces collaborations, disruptive technology and process innovation as unique opportunities to improve the application of diagnostics and therapeutics with the long-term goal of preventing disease.

Scientific contact:

Dr India Pinker

Ageing, Cancer and Disparities (ACADI) Research Unit

Luxembourg Institute of Health

Email: India.Pinker@lih.lu

Press contact:

Arnaud D'Agostini

Head of Marketing and Communication



Luxembourg Institute of Health

Tel: +352 26970-524

Email: communication@lih.lu