

## Chairman's introduction

In the last decade, the problem of cancer in older people has been somewhat underestimated by the oncological community. Now with growing evidence of the general increase in the lifespan of individuals in the Western world, physicians have become more aware of the special approaches needed in the management of elderly people, mainly because of a number of social and physical age-associated limitations. This concern is presently shared by the majority of clinical oncologists who are often under the pressure of increased numbers of older patients referred to outpatient and inpatient departments in their everyday practices. These increased numbers derive mainly from the reduced tendency to deny active oncological treatment to old, and also to the very old patients, compared with 10 years ago.

Population-based data on cancer in the elderly in European and North American countries are currently available, while results from controlled clinical trials are still scarce for most neoplasia. However, a lot of attention has been dedicated by some clinical oncologists in Europe to cancer in the elderly through retrospective studies, specific trials, studies on the validation of geriatric scales applied to older cancer patients, presentations at international meetings, workshops, conferences and reviews.

This paper aims to collect in a concise way all the available information on the main issues in the field of cancer surgery, radiotherapy and medical approaches to the treatment of cancer in the elderly. The part dedicated to the pharmacology of cancer drugs in the elderly is a necessary premise to medical oncology treatments and the multidimensional evaluation in geriatrics is also discussed.

### Evaluation

The issue of management of cancer in the elderly is complex because of the interference of age-associated conditions, (comorbidity, functional status impairment, possible neurological and mental deterioration), with the application of standard treatment. But many facets and individual variations in the age-associated limitations does not mean there is an absence of optimal solutions for therapeutic problems.

To stress the magnitude of the problem, an epidemiological exposition has been written to open these series of articles.

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