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Expert Q&A: Young Adults With Cancer [1]

 *Watch the Cancer.Net Video: Adolescents and Young Adults with Cancer, with Melissa Hudson, MD[2], adapted from this content.*



Cancer is the leading cause of death for adolescents and young adults age 15 to 39. An estimated 70,000 people in this age group are expected to be diagnosed with cancer in the United States each year. And, while much progress has been made in the fields of cancer prevention, diagnosis, and treatment, survival rates in 17 of the 23 types of cancers in older adolescents and young adults have not improved since 1990 and, in most of these, since 1975.

To improve cancer care for people in this often-overlooked age group, LIVESTRONG and the American Society of Clinical Oncology (ASCO) have partnered to launch [Focus Under Forty](#) [3]. It is an education curriculum for doctors, designed to build awareness and provide training to address the challenges in treating older adolescent and young adult patients with cancer.

Here, Cancer.Net talks with Archie Bleyer, MD, to learn more about the need for an initiative like this.

Q: What are the most common types of cancer that are diagnosed in young adults?

A: Among young adults (defined here as those ages 15 to 39), the ten most common types of cancer, in order of frequency, are breast cancer, lymphoma (non-Hodgkin and Hodgkin), melanoma, sarcoma, gynecologic cancers of the ovary and cervix, thyroid cancer, testicular cancer, colorectal cancer, leukemia, and brain tumors. These types account for 90% of the cancers in this age group.

Q: What makes cancer in young adults different from other age groups?

A: Cancer in this age group is unique in the wide variety of cancer types that commonly occur. Moreover, there is evidence that the biology of cancer in younger people differs from that found in older people when comparing what otherwise seems to be the same cancer. In

addition—perhaps, in part, because of these differences—progress in extending survival and reducing death for most of the cancers in young adults has been lacking, compared to advances for the same cancers in younger and older people. The psychosocial (emotional and social) changes are also extraordinary, further complicating the challenges of a cancer diagnosis. Finally, because people in this age group are relatively young at time of diagnosis, they have many years ahead of them (if treatment is successful) to live with the long-term effects [4] of having cancer.

Q. What are some common emotional and social concerns for young adults with cancer?

A: The range of emotional and social concerns is wider than at any other age, even under the best of circumstances when health is not limiting. The concerns include independence, education, career choice and employment, body image, sexuality, peer pressure and social acceptance, marriage, dating, and pregnancy and parenthood. Many young adults are also coping with sexually transmitted diseases (STDs), alcohol and substance abuse, and other addictions. Health insurance may also be difficult to obtain, although several provisions in the new health care law may help young adults with cancer.

Q: What are some possible late effects of treatment for young adults with cancer, and what are some ways to manage the risks?

A: The late effects of cancer and its treatment are seen in nearly every organ and organ system in young adults. A few notable examples of late effects include the development of a second tumor; infertility [5] (the inability to produce or bear children); sexual dysfunction [6]; fatigue [7]; depression [8]; and weight gain [9], and obesity. In addition, some people may experience heart problems; chemo brain [10] (difficulty thinking clearly after cancer treatment), peripheral neuropathy [11] (symptoms in the hands and feet from nerve damage) and other nervous system side effects [12]; hearing loss; kidney failure; and liver dysfunction.

Meanwhile, some young adults with certain types of cancer discover that they have a genetic condition that puts them at an increased risk for other cancers, requiring further preventative treatment and screening examinations. Learn more about the genetics of cancer [13].

These issues highlight the importance of regular follow-up care for young adult cancer survivors throughout their lifetime.

Q: The survival rate for young adults with cancer has held steady over the past few decades, while it has improved for other age groups. What are some factors that may explain this?

A: The most important factor is that research about cancer in this age group has been lacking, compared to research in children, in whom the first advances in cancer therapy were achieved, and in older patients, who represent the bulk of cancer diagnoses. No other age group has fewer patients participating in clinical trials and or fewer biospecimens for laboratory research. Other factors include a lack of experts in young adult oncology, a lack of comfort among oncologists in managing the psychosocial problems within the age group, and the historical trend of separating pediatric and adult oncology training, practice, organization, education, research, and funding. However, awareness of the problems associated with young adult cancer is improving nationally

(and internationally), and the lack of health insurance coverage (which is lower in this age group than in any other and unique to the United States.) should be improved by the Affordable Care Act of 2010.

Q: In addition to the age-specific resources on Cancer.Net[14], where can young adults with cancer and their families go for more information?

Some helpful websites include Planet Cancer [15], CancerCare [16], LIVESTRONG Young Adult Alliance [17], The Ulman Cancer Fund for Young Adults [18], Vital Options [19], ImTooYoungForThis.org [20], Young Adult Cancer Canada [21], National Collegiate Cancer Foundation [22], Young Cancer Spouses [23], Pregnant with Cancer [24], Aging With Dignity [25], and Mothers Supporting Daughters with Breast Cancer [26]. In addition, there are local experts—such as young adult social workers, clergy, psychologists, and psychiatrists—skilled in working with this age group. And a bill of rights [27] for young adults with cancer is now available; it lays out standards of care and a framework for expectations.

Dr. Bleyer is a pediatric and young adult oncologist who serves as a Medical Director of Clinical Research at the St. Charles Health System in Central Oregon, Co-Chair of the Research Task Force of the LIVESTRONG Young Adult Alliance, and as Clinical Research Professor at the Oregon Health & Science University.

More Information

Cancer in Young Adults [28]

Resources for Young Adults [29]

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Links:

- [1] <http://www.cancer.net/navigating-cancer-care/young-adults/expert-qa-young-adults-cancer>
- [2] <http://www.cancer.net/node/27046>
- [3] <http://www.university.asco.org/focusunder40>
- [4] <http://www.cancer.net/node/25396>
- [5] <http://www.cancer.net/node/25268>
- [6] <http://www.cancer.net/node/25054>
- [7] <http://www.cancer.net/node/25048>
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- [13] <http://www.cancer.net/node/24897>
- [14] <http://www.cancer.net/node/25106>
- [15] <http://www.planetcancer.org>
- [16] http://www.cancercare.org/get_help/special_progs/young_adults.php?origin=enews_0409p
- [17] <http://www.livestrong.org/What-We-Do/Our-Actions/Programs-Partnerships/LIVESTRONG-Young-Adult-Alliance>
- [18] <http://www.ulmanfund.org>
- [19] <http://www.vitaloptions.org>
- [20] <http://www.imtooyoungforthis.org>

- [21] <http://www.youngadultcancer.ca/>
- [22] <http://www.collegiatecancer.org>
- [23] <http://www.youngcancerspouses.com>
- [24] <http://www.pregnantwithcancer.org>
- [25] <http://www.agingwithdignity.org/voicing-my-choices.php>
- [26] <http://www.mothersdaughters.org>
- [27] <http://www.seventyk.org/learn>
- [28] <http://www.cancer.net/node/25117>
- [29] <http://www.cancer.net/node/25218>