Geriatricians Provide Older Cancer Patients With Care and Advocacy

Older adults facing cancer and blood disorders have specialized needs due to health and wellness issues inherent to aging.

September 2, 2019 By Dana-Farber Cancer Institute

A cancer diagnosis can be unsettling, but when Nancy Stamper learned she had multiple myeloma at age 78 in November 2016, it was particularly daunting. Older adults facing cancer and blood disorders have specialized needs due to health and wellness issues inherent to aging, but Stamper — now 81 — has found an ally to help her through this challenging journey.

In addition to her oncologist Jacob Laubach, MD, MPP, and his clinical team at Dana-Farber/Brigham and Women's Cancer Center (DF/BWCC), Stamper is under the care of geriatrician Tammy Hshieh, MD, MPH, who co-manages her care as part of the Older Adult Hematologic Malignancy (OHM) Program at DF/BWCC. Hshieh treats the rest of her physical, psychological, and well-being needs, so Stamper can devote her energy to fighting cancer.

"Dr. Hshieh has been with me since the start, and I can't say enough about her," says Stamper, a retired teacher and grandmother. "She gives me tips to help deal with pain and other side effects, and even helped me find a new primary care practice easier for me to reach."

Geriatric assessments and co-management

All new patients age 75 and older and treated for hematologic malignancies at DF/BWCC are given a baseline assessment for frailty through the OHM program. The program is sustained in part by the Mary P. Murphy Fund for Hematologic Malignancies, which was established by Edmund F. Murphy, Jr. and Family.

If they are determined, like Stamper, to need a more comprehensive geriatric assessment and management, Hshieh co-manages their care — including supervision of current non-oncologic medications, help in maximizing physical and psychological health, and an assessment of family and social support. Patients can also seek her out with questions on diet and exercise, mobility, emotional well-being, home safety, and medical services for home.

"Just as children with cancer have special needs, we know there are nuances and subtleties to older people that may not come up in a 30-year-old patient," says Hshieh. "I want to optimize care for these individuals and make things as smooth as possible so that they can focus on their cancer

care with their oncologist. We want to help older patients be set up to succeed with whatever their cancer treatment plan may be."

An expert on hand

Hshieh says the approach works extremely well because geriatricians are used to working on multidisciplinary teams with other doctors, nurses, and social workers; because many cancer patients see their oncologists more often than their primary care physicians, Hshieh can carefully observe memory and cognition to make sure they are not impacted by chemotherapy drugs or other treatment.

"Dr. Hshieh and her colleagues have added a very positive, impactful dimension to the care we are able to provide older patients," says Laubach, who works with nurse practitioner Ginger Dalton, MS, APRN, to oversee Stamper's care. "Her attention to specific issues of concern and interest to such patients not only complements, but greatly enhances, what we seek to achieve in terms of managing the underlying disease and optimizing quality of life."

Like Laubach, Hshieh gets to know her patients' families. This includes Walton Stamper, 83, Nancy's husband, who is a cancer survivor himself. He accompanies Nancy to each office visit and infusion, but values having an expert on hand.

"She [Hshieh] takes great notes, is a good listener, and you can communicate with her very clearly," says Walton Stamper. "When she's felt that something needed to be taken care of based on what we told her — such as helping with Nancy's pain management — she has taken appropriate action to address all concerns with Dr. Laubach or other members of her care team."

This article was originally published on August 15, 2019, by Dana-Farber Cancer Institute. It is republished with permission.

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