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ASSESSMENT OF POSTOPERATIVE OUTCOMES IN ELDERLY WOMEN WITH BREAST CANCER

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Abstract:

Breast cancer (BC) is among the most prevalent malignancies affecting women worldwide and has recently become the leading cause of cancer-related morbidity among females. Globally, approximately 1.3 million new cases are diagnosed annually, with over 500,000 deaths. In Uzbekistan, as in many developed countries, breast cancer incidence is on the rise, with over half of the new cases detected in women over the age of 65. This trend reflects the global demographic shift toward aging populations and increased life expectancy.

Older patients represent a heterogeneous group, characterized by varying degrees of comorbidity, functional independence, and social support. The prognosis in elderly women with BC is influenced both by the biological nature of the tumor and by agerelated health conditions. Studies show that hormone receptor-positive breast cancer (ER+/PR+) is more prevalent in older women, found in up to 80% of cases. Despite the high incidence, there is a lack of randomized clinical trials focused on optimizing treatment strategies specifically for this age group.

This article highlights the importance of personalized treatment approaches for elderly women with breast cancer, considering clinical, morphological, and molecular-genetic tumor characteristics. Given the growing proportion of older adults within the BC patient population, the development of evidence-based therapeutic protocols tailored to their specific needs is both timely and essential.

Keywords: Breast cancer, elderly women, postoperative outcomes, hormone receptor-positive, comorbidities, treatment strategies, prognosis, molecular profiling



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Conclusion:

Elderly women (aged 65 and above) are becoming the dominant patient group in the global breast cancer population. They present unique challenges due to their agerelated physiological changes and frequent comorbidities. While hormone-sensitive tumors are more common in this demographic, treatment approaches must be individualized to balance effectiveness with tolerability. Given the current lack of clinical trials specifically targeting this population, there is a pressing need for more research to inform evidence-based treatment strategies. Addressing both oncologic and geriatric factors is crucial in improving postoperative outcomes and overall survival in elderly breast cancer patients

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