

Is there an age limit for lung cancer surgery?

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The increasing age of the general population is also causing a rise in the number of patients ages 80+ presenting for surgery with non-small cell resectable lung cancer.

In the past it was felt that the risks associated with performing surgical procedures on such patients were excessive due to concomitant diseases and life expectancy.

In this study we review our series of resections for non-small cell lung cancer in patients of ≥ 80 years of age to determine whether major surgery (exeresis) in this patient population is justified in terms of postoperative complications and long term survival.

Between January 1993 and May 2005, 59 patients aged between 80 and 86 (mean age 81.8 years)

underwent surgery in our Surgical Unit for non-small cell lung cancer. When cardio-pulmonary function permitted, the planned procedure was an anatomical resection associated with radical hilio-mediastinal lymphadenectomy with curative intent. Thirty-eight lobectomies were performed, including 5 associated with en-bloc chest wall resection, 1 pulmonectomy, 2 segmentectomies and 18 atypical resections. No intra-operative deaths were reported.

In view of our results and following an analysis of post-operative complications and long-term survival, it can be stated that in selected patients aged ≥ 80 years, major lung resection for lung cancer is justified. However, concomitant diseases need to be carefully assessed and considerable care must be taken to prevent post-operative complications.