
New Poll Explores Attitudes of Older Adults on Cancer Screening Guidelines



In the United States, various cancer screening guidelines provide recommended starting and stopping ages for regular screenings. However, there's a growing shift towards considering additional factors beyond age in these guidelines, such as estimated life expectancy, overall health status, and past screening history, all of which contribute to making decisions about whether have more screening tests.

In January 2023, the University of Michigan National Poll on Healthy Aging conducted a survey among adults aged 50–80 to gauge their views on how decisions about cancer screening should be made.

The survey findings indicate that a significant proportion of adults aged 50–80 hold differing views when it comes to continuing cancer screening based on how much longer they have. Specifically:

- Over half (56%) of respondents aged 50-80 disagreed that guidelines should determine whether someone should continue cancer screening based on their remaining lifespan.
- Women were more inclined to disagree with guidelines using life expectancy in determining when to recommend stopping cancer screening (66% of women vs. 57% of men). A significant proportion of women, 30%, strongly disagreed with this approach, while 37% somewhat disagreed.
- There were differences in strong disagreement based on race and ethnicity, with Black, non-Hispanic older adults (37%) expressing stronger disagreement compared to White, non-Hispanic (24%) and Hispanic (28%) older adults.

The survey results provide insights into how older adults perceive a 10-year life expectancy threshold when deciding whether someone should continue or stop getting cancer screening tests. Overall, 55% of older adults believe the 10-year life expectancy threshold is about right, whilst 27% felt it was too short and 17% felt it was too long.

57% of older adults characterised as medical minimisers, disagreed with using life expectancy in cancer screening guidelines. Whilst 70% of all older adults don't see screening as an issue even when guidelines don't recommend it.

Although a personalised approach to cancer screening guidelines is normally embraced, this poll demonstrates that the reality is more complicated. Most older adults disagreed with the idea of cancer screening guidelines using life expectancy as a sole criterion, whether to justify continuing or to justify stopping screening.

The disagreement was more common among women versus men, which is noteworthy considering that women typically have more recommended screening tests and often live longer, potentially reaching the age cutoffs mentioned in these guidelines.

Many older adults who disagree with guidelines determining when to discontinue screening based on life expectancy appear not to have concerns about receiving additional cancer screening tests.

The lack of concern was prevalent among White, non-Hispanic older adults, a population with the most access to cancer screening tests.

The poll findings highlight the importance of more personalised healthcare: the need to educate both patients and healthcare providers about the relevance of life expectancy in cancer screening decisions.

By increasing awareness of this, individuals and their healthcare teams can engage in more meaningful discussions about the benefits, risks, and appropriateness of screening tests based on individual health profiles.

Source: [University of Michigan](#)

Image Credit: [iStock](#)

Published on : Thu, 5 Oct 2023