

Associations of Demographic and Social Factors on Health-Related Quality-of-Life Changes Among Older Women With Breast or Gynecologic Cancer

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OBJECTIVES: To examine associations of sociodemographic factors and social limitations with health-related quality of life (HRQOL) from pre- to postdiagnosis in older female cancer survivors.

SAMPLE & SETTING: 9,807 women aged 65 years or older with breast or gynecologic cancer from the Surveillance, Epidemiology, and End Results–Medicare Health Outcomes Survey.

METHODS & VARIABLES: Physical and mental HRQOL were assessed using the physical component summary (PCS) and mental component summary (MCS) of the Veterans RAND 12-Item Health Survey. Descriptive statistics and mixed-effects models for repeated measures were used.

RESULTS: Social limitations were the only significant factor associated with changes in MCS scores. Race and ethnicity, rurality, and social interference were associated with significant decreases in PCS scores.

IMPLICATIONS FOR NURSING: Nurses can assess mental and physical HRQOL after diagnosis and advocate for appropriate referrals. Oncology care should be tailored to cultural considerations, including race and ethnicity, rurality, and social support.

KEYWORDS health-related quality of life; older adults; breast cancer; gynecologic cancer

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With the aging U.S. population and advances in the prevention, screening, and treatment of cancer continuing to accumulate, quality and length of life in cancer survivorship has become a pressing issue. Of particular interest are older cancer survivors (aged 65 years or older), who are a rapidly growing segment of the cancer survivor population (Bluethmann et al., 2016). In 2022, an estimated 67% of the more than 18 million cancer survivors living in the United States were aged 65 years or older. By 2040, these figures are projected to increase to 26.1 million cancer survivors, of whom an estimated 73% will be aged 65 years or older. In addition, there is a growing population of older breast and gynecologic cancer survivors, accounting for about 43% of new cancer diagnoses in U.S. women (Siegel et al., 2024). In addition to the hallmarks of aging, which include declines in functional capacity and a greater prevalence of preexisting comorbidities, older cancer survivors also contend with social vulnerabilities (i.e., social influences on health) that may jeopardize their cancer survivorship experience (Rowland & Bellizzi, 2014; Williams et al., 2016).

Health-related quality of life (HRQOL) is an individual's perceived physical and mental health, which can be influenced by an individual's clinical status and demographic background (Reeve et al., 2009). HRQOL has been associated with a myriad of longitudinal outcomes among older adults, including overall cancer risk and survival (Klapheke et al., 2020b; Mukand et al., 2022; Park et al., 2021; Smith