Premise: elderly aunty with comorbidities preferring minimal intervention

### patient scenario:

Dr. Lee: Good morning, Mdm Lim. Thank you for coming in today. How are you feeling?

Mdm Lim: Good morning, doctor. I’m okay, but I’m quite old already, and I have some other health problems. I don’t want to go through a big operation if I don’t have to.

Dr. Lee: I understand, Mdm Lim. It’s important to find a treatment that is safe and suits your needs. Can you tell me what worries you the most?

Mdm Lim: I have diabetes and high blood pressure. My legs are not so strong anymore, and I get tired easily. I don’t think I can go through a big operation.

Dr. Lee: Those are very valid concerns. Since your cancer is in the early stages, we have different options. A lumpectomy, which removes just the lump, is a smaller operation with a shorter recovery time. However, it usually requires radiotherapy after surgery.

Mdm Lim: Oh, I heard radiotherapy needs many hospital visits. I don’t think I can come so often.

Dr. Lee: Yes, radiotherapy is typically done 5 days a week for a few weeks, and that can be quite tiring. Another option is a mastectomy, which removes the entire breast and usually does not require radiotherapy. However, it is a bigger surgery and takes longer to recover from.

Mdm Lim: That sounds tough. Is there a way to avoid a big surgery?

Dr. Lee: In some cases, especially for older patients with other health problems, we may consider hormonal therapy instead of surgery, especially if your cancer is hormone positive. This is a medication that helps slow down or stop the cancer from growing, and it can be a good option if surgery is too risky. However, it’s not an immediate cure—it’s a long-term treatment to keep the cancer under control.

Mdm Lim: I see. That sounds like it might be easier for me. But will the cancer go away completely?

Dr. Lee: Hormonal therapy won’t remove the cancer like surgery does, but for some elderly patients with slow-growing cancer, it can control the disease for many years. We would monitor you regularly to make sure it’s working well.

Mdm Lim: I think I prefer to take medicine if it can help. I don’t want a big operation at my age.

Dr. Lee: That’s a very reasonable choice. We can start with hormonal therapy and keep monitoring you. If at any point the cancer grows or changes, we can reassess your treatment.

### Decisional tool (pros and cons of each modality):

Hormonal Therapy (For Patients Who Cannot Undergo Surgery)

* Pros:
  + Non-invasive, no surgery or hospital stays.
  + Can slow or stop cancer growth, especially in slow-growing tumors.
* Cons:
  + Does not remove the cancer, only controls it.
  + Requires long-term medication and monitoring.
  + Not suitable for all types of breast cancer (only works for hormone-receptor-positive cancers).

Lumpectomy + Radiotherapy (Breast-Conserving Surgery)

* Pros:
  + Less invasive surgery, suitable for elderly patients.
  + Preserves the breast while effectively treating cancer.
* Cons:
  + Requires radiotherapy, which involves frequent hospital visits and may be tiring, especially since Mdm Lim has weaker legs and cannot ambulate well
  + Risk of needing a second surgery if margins are unclear.
  + May not be ideal for patients with limited mobility or multiple health issues.

Mastectomy (Complete Breast Removal)

* Pros:
  + No need for radiotherapy in most cases.
  + Lower risk of local recurrence.
* Cons:
  + More extensive surgery with a longer recovery time.
  + Higher surgical risk for elderly patients with multiple health issues.
  + More physically demanding post-operative recovery