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having these treatments. Powerful anti-cancer agents cannot, for example, be given to patients with cardiovascular disease. Even so, an elderly person may be left with the impression that they were denied treatment because of their age.

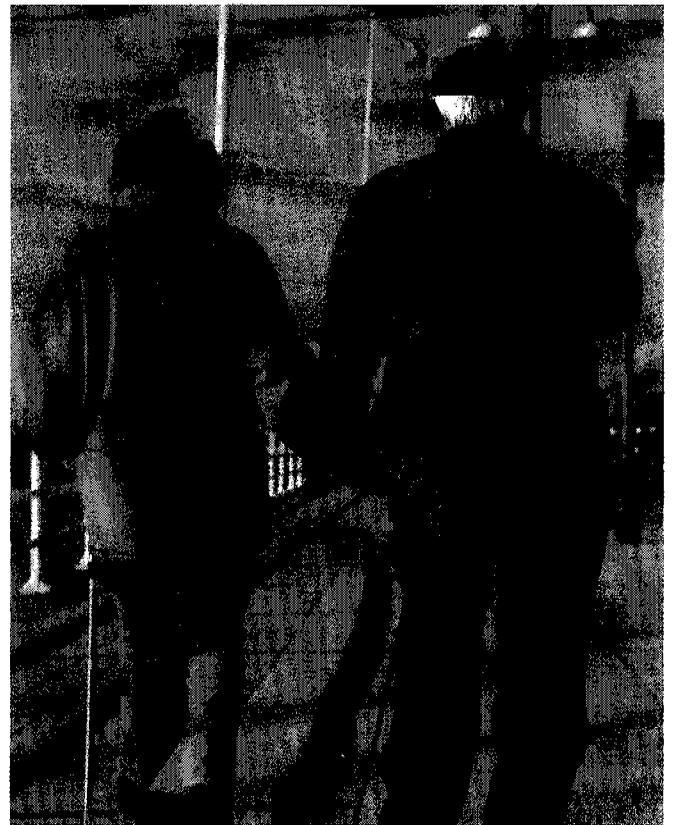
"If I had refused, I would have regretted it," Mrs Toivanen confesses. She has one more dose of chemotherapy to take, and is due to start radiotherapy in March. "I'm sure all the flowers will look prettier and the sun shine brighter this spring."

Her hormone treatment will continue for another five years.

"I don't know if I'll live to be 85, but the doctors

TREATMENT COSTS ARE SET TO DOUBLE

- With cancer becoming increasingly common, women in particular are at greater risk of developing the disease in the future. This is because they live longer than men and they have many different forms of cancer, notably breast cancer, whereas the most common cancers in men, i.e. those caused by smoking, will become rarer.
- The Finnish Cancer Organisations have estimated that future cancer patients will include a large number of older women living alone, care givers, elderly people in institutional care, and men with prostate cancer. This calls for a new kind of competence – geriatric oncology, i.e. cancer care of the elderly.
- Over the next decade, the number of new cancer cases per year is estimated to exceed 30,000.
- The population in the oldest group of cancer patients will grow, as more effective treatments reduce the risk of dying from cancer. On the other hand, this will also lead to longer treatment periods, as cancer becomes chronic, i.e. turns into a long-term illness.
- As the number of people experiencing cancer continues to rise, the costs of cancer care will have doubled by 2015.



Quality time. Who is to say that these people's lives are any less valuable just because they are in their 70s?

are optimistic. If the treatment doesn't work and the cancer spreads, at least I've been allowed my 80 years," says Irja Toivanen.

At this moment of melancholia, she finds some comfort in a comment in her medical notes. The folder holds a copy of a statement from her doctor to the social insurance institution, KELA, in which he says: "General condition very good, spry and youthful for her age." "I've never received such a nice compliment from anywhere else but the cancer clinic. I've underlined it and put an exclamation mark next to it."