

Paper Category:	Interventional Studies
Paper Title: (Arial Font; 14 Pt Size)	Evaluating the Comprehensive Geriatric Assessment model as an assessment tool to identify chemo-toxicity in elderly patients with haematological malignancies.
Abstract Body: (Arial Font; 12Pt Size)	<ul style="list-style-type: none"> • Background • Objectives • Method • Results • Discussions and Conclusions
<p>(Maximum word limit - 300 words)</p> <p>Background Elderly patients with haematological malignancies have greater risk of chemotherapy related adverse events, and experience poorer outcomes compared to younger patients. Conventional assessment using ECOG scores may over-estimate the fitness their fitness to receive chemotherapy, hence exposing them to greater risks.</p> <p>Objectives We aim to evaluate the Comprehensive Geriatric Assessment (CGA) model as a tool to identify frail elderly patients who are at greater risk of chemo-toxicities.</p> <p>Methods Retrospective analysis of patients aged above 65 years with haematological malignancies planned to receive anti-cancer treatment in a single centre was conducted. CGA scores were assessed prior to commencement of treatment. Treatment related adverse events (TRAE) were recorded and classified according to the Common Terminology Criteria for Adverse Events. The relationship between CGA scores and patient overall survival rates as well as incidence of severe TRAEs (Grades 3 to 5) were evaluated in this study.</p> <p>Results A total of 30 patients were recruited, with a median age of 72 years (range 65 – 90). 8 patients were identified as Fit, 15 were identified as Pre-Frail, and 7 were identified as Frail. Mean survival time for Frail patients was lower (248 days, CI 20.6-475.4) compared to Fit (466 days, CI 339.4-592.9) and Pre-Frail (435 days, CI 338.8-531.2) patients. 207 severe TRAEs were reported, with severe haematological TRAEs were the most common, at 117 events. Fit patients experienced an average of 9.4 severe TRAEs, whilst Pre-Frail and Frail patients experienced an average of 6.7 and 4.4 events respectively.</p> <p>Discussion and conclusion Frail patients identified by the CGA had lower overall survival rates compared to Pre-Frail and Fit patients. However, the CGA model shows an inverse correlation with fitness level and rates of severe TRAEs. Further analyses need to be</p>	

conducted to determine the significance of these results and assess the viability of the CGA model as an assessment tool for chemo-toxicity.

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