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TITLE: ASSESSING THE IMPACT OF COMPREHENSIVE GERIATRIC ASSESSMENT DIRECTED INTERVENTIONS IN ASIAN GERIATRIC ONCOLOGY PATIENTS

AUTHORS/INSTITUTIONS:

Noorhanah Mohd Said [1], Yean Shin Ng [1], Yao Yao [2], Wan Nghee Eng [1], , Matthew Chen [3] , Bee Choo Tai [4] Angela Pang [1]

1.Department of Haematology Oncology, National University Cancer Institute, Singapore

2.Department of Pharmacy, National University Hospital, Singapore

3.Department of Geriatric Medicine, National University Hospital, Singapore

4.NUS Saw Swee Hock School of Public Health

Background:

There are limited studies investigating the use of the CGA in the geriatric oncology population in Singapore. Most oncologists are not familiar with of the use of the comprehensive geriatric assessment (CGA) in guiding cancer care in older cancer patients.

A Geriatric Oncology service was piloted in the National University Cancer Institute, Singapore (NCIS), with CGA done in the elderly patients and multidimensional interventions tailored to improve the outcomes in these patients.

Methods:

All patients seen in the NCIS outpatient clinic aged ≥ 70 were accrued in our study. They received a CGA and EORTC QLQ 30 QOL survey at accrual and 3 months later. A geriatric oncology multidisciplinary team then recommended interventions for the patients based on the initial CGA findings.The study endpoints were i) the presence of issues of concern identified on the CGA not identified by the primary oncologists. ii) Improvement in the patient's QOL for patients provided with tailored multidimensional interventions.

Results:

A total of 230 patients were recruited over a period of 18 months. Of which, 60% of the patients (n=138) had issues of concern requiring at least one intervention after the CGA that were not identified by their primary oncologist.The use of assistive device (p=0.044), need for financial assistance (p<0.001), time up and go >12s (p=0.048), mini cog <4 (p<0.001), social support < 11 (p<0.001) and weight loss > 10% (p<0.001) were associated with a need for intervention.There was a significant improvement after the CGA tailored interventions in the following EORTC QLQ C30 domains: Emotional functioning (OR 3.94; 95% CI 1.83 - 6.05; p <0.001), Social functioning (OR 12.17;

95% CI 5.45 - 18.89; p <0.001), and symptoms of insomnia (OR -9.05; 95% CI -14.12 - -3.98; p <0.001) and constipation (OR -11.30, 95% CI -16.15 - -6.45; p <0.001)

Conclusion:

Early identification and tailored interventions in this group has shown to benefit and improve various domains of the patients' QOL while they are undergoing cancer treatment. CGA is a vital tool in identifying gaps in care and optimizing patients for cancer treatment.