MOLECULAR TESTING IN OLDER PATIENT TREATED FOR AN ADVANCED OR METASTATIC NON-SQUAMOUS NON SMALL CELL LUNG CANCER

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Background

- Tumor genomics testing has drastically changed the prognosis of patients treated for an advanced/metastatic nonsquamous non-small cell lung cancer (aNSCLC).
- Lung cancer is associated with older age. But considering the heterogeneity of this population it remains unclear whether older patients are tested in the same proportion as younger patients.
- This study aims to compare the biomarker testing rate performed in nonsquamous aNSCLC at diagnosis between patients aged ≥ 70 yo, and their younger counterparts.

Methods

- Retrospective analysis using the Epidemic-Strategy and Medical Economics (ESME) Advanced or Metastatic Lung Cancer Data Platform, a French multicenter real life database.
- All patients with a non squamous aNSCLC diagnosed between 2015 and 2018.
- Biomarker testing was defined as, at least one molecular alteration testing and/or PD-L1 testing performed within 1 month before or 3 months after the aNSCLC is diagnosed.

Results

- 2848 patients aged ≥ 70 yo (median age, 76 years) and 6900 patients < 70 yo were included in the analysis.
- There was no significant difference in the biomarker testing rate performed between the two groups (63% vs 65%, p = 0.16) (Fig.1a).

Conclusion: Age is not a barrier to molecular biomarker testing in older patients with a nonsquamous aNSCLC. Comprehensive geriatric evaluation can help older patients to access therapy-predictive biomarker testing technique.