408P - PREDICTION OF SURVIVAL USING THE G8 SCALE FRAILTY IN A PROSPECTIVE SERIES OF ELDERLY PATIENTS WITH COLON CANCER

G. Soler1,2, L. Raventós1,2, R. Legido1,2, C. Martinez3, F. Torrents1, M. Martinez-Villacampa1, C. Santos1, F. Losa3, A. Teulé1, J.C Rufinelli1, R. Gallego1, A. Manzana3, A. Ríos3, A. Piera3, C. Boixareu1, Saldaña2, R. Salazar1
1 Colorectal tumors unit. 2 Geriatric oncology unit. Department of Medical Oncology. Catalan Institute of Oncology L’Hospitalet. (Barcelona, Spain) 3 Department of Medical Oncology. Hospital St Joan Despí. Moises Broggi

INTRODUCTION

- Colorectal cancer (CRC) is one of the most commonly diagnosed cancers. About one half of the cases were diagnosed in patients over 70 years. Elderly patients represent a very heterogeneous group.

- A multimodal Geriatric assessment is recommended in older patients, but requires considerable time and resources.

The geriatric screening tool was developed to identify fit elderly cancer patients who could receive standard treatment from those who would benefit from a comprehensive geriatric assessment to guide the best treatment.

The aim of our study was to evaluate the role of the G8 scale tool in predicting overall survival in elderly colon cancer patients.

METHODS

Between January 2016 and December 2019, geriatric screening tools was performed on consecutive patients aged >75 years diagnosed with colon cancer at the Catalan Oncology Institute and Moises Broggi Hospital.

The assessment includes social status, functionality (activities of daily live, ECOG), cognition and G8. The G8 score was classified into three groups according to their G8 score: (>14 as the highest score group, 11-14 as the intermediate score group, and <11 as the low score group).

RESULTS

1. Patients Characteristics:

- Out of 283 enrolled patients, 57% were classified as stage IV, of which 40% were women. The median age of screened patients (pts) was 80.4 years (75.1-88.9). The most frequent diagnosis was colon cancer (72.7%) followed by rectal cancer (27.3%).

2. Overall survival according to G8 score

- Among all patients, from the low score group (SC), with a median OS of 16 months survived significantly less than the high SC with a median OS of 35 months (p<0.0001).

- In metastatic patients, median OS was 7.2 months in the low score group, and 30.3 months in the high score group. The difference was statistically significant.

3. Overall survival according to G8 score and chemotherapy (CT)

- In pts who received adjuvant CT there were no differences.
- In metastatic pts who underwent chemotherapy, the low SC obtained a median OS of 12.7 months versus 33 in high SC. (p=0.055).

- In metastatic pts who did not undergo chemotherapy, the low SC, with a median OS of 4 months survived significantly less than the high SC with a median OS of 24.3 months(p=0.031).

CONCLUSIONS

- The G8 score helps to identify significantly patients with poor prognosis.
- The G8 score detects which patients benefit from chemotherapy and which do not. Thus avoiding unnecessary toxicities.
- The G8 score is not a time-consuming screening tool. Thus, it should be considered in a routine clinical practice for treatment decision-making in the elderly colorectal cancer patients.