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Introduction

Geriatric assessment (GA) is an interdisciplinary and multidimensional process aimed at determining an older person's physical, cognitive, psychosocial and functional capabilities. GA has been shown to predict severe treatment-related complications in oncologic patients such as chemotherapy toxicity, yet its incorporation into routine clinical practice seems low.

The aim of this study was to evaluate the use of GA tools among haematologists in Uruguay.

Materials and Methods

The 120 members of the Uruguayan Society of Haematology were asked to complete an online survey on their practice characteristics, the use of GA tools and access to geriatricians using SurveyMonkey (SurveyMonkey Inc., San Mateo, California, USA), from July 7th to August 7th 2019.

Results

One third of the haematologists in Uruguay completed the survey and gave their informed consent to publish its results (n=40, response rate = 30%). Responders' characteristics are shown in Table 1.

	n	%
Age (y)		
< 40	21	52.5
≥ 40	19	47.5
Institution		
Public	11	27.5
Private	14	35
Both	15	37.5
Location		
Metropolitan	24	60
Remote	9	22.5
Both	7	17.5

Table 1: Responders' characteristics.

Comorbidities, potential treatment toxicity and poor functional status were identified as the most difficult challenges when treating older patients with haematologic malignancies and were also the main factors influencing the choice of treatment. Only 12% of the answering physicians routinely performed GA (Fig. 1) despite 70% respondents agreed that GA was necessary or very necessary (Fig. 2).

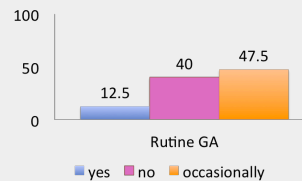


Fig. 1: Percentage of GA use in regular practice among responders

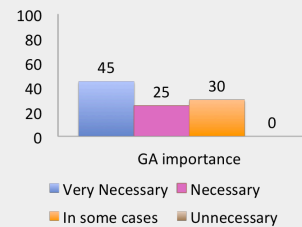


Fig. 2: GA importance among haematologists

Results

Lack of knowledge of the optimal instrument to use and time required to implement a comprehensive GA were the main reasons why GA was not performed. Charlson Comorbidity Index was used by 27,5% of the responders but no global GA was completed.

Referral to a geriatrician was an option for most physicians but it would take more than two weeks in 60% of the cases (Fig. 3).

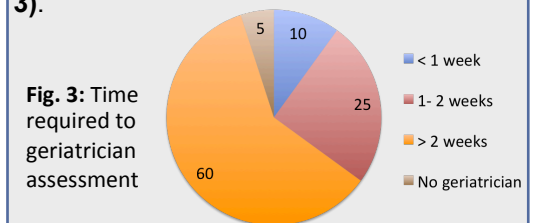


Fig. 3: Time required to geriatrician assessment

Conclusions

The incorporation of GA in the haematology practice in Uruguay remains infrequent, despite the emerging evidence of its utility. Promoting the incorporation of an effective and user-friendly GA tool in clinical practice is of prime importance.