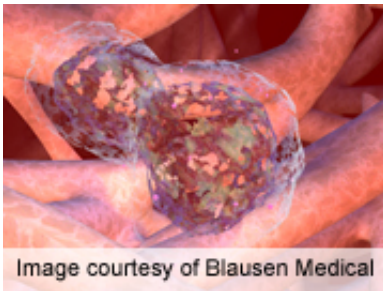


Geriatric factors can foretell tolerances to chemotherapy

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For elderly patients with metastatic colorectal cancer, scores on the Mini-Mental State Examination and Instrumental Activities of Daily Living were predictive of severe toxicity or unexpected hospitalization after fluorouracil-based chemotherapy with or without irinotecan, according to research published online March 4 in the *Journal of Clinical Oncology*.

(HealthDay)—For elderly patients with metastatic colorectal cancer (mCRC), scores on the Mini-Mental State Examination (MMSE) and Instrumental Activities of Daily Living (IADL) were predictive of severe toxicity or unexpected hospitalization after fluorouracil-based chemotherapy with or without irinotecan (IRI), according to research published online March 4 in the *Journal of Clinical Oncology*.

Thomas Aparicio, M.D., Ph.D., of the University of Paris, and colleagues conducted a study involving 123 elderly patients ranging in age from 75 to 91 years with mCRC to determine what geriatric factors predict chemotherapy feasibility.

The researchers found that in elderly patients with mCRC, factors that were significant predictors for grade 3 to 4 toxicity due to chemotherapy included IRI arm, MMSE less than or equal to 27/30, and impaired IADL. For elderly patients receiving a 33 percent reduced dose of chemotherapy, the predictors were alkaline phosphates above two times the upper limit of normal and IRI arm. For unexpected hospitalization, MMSE less than or equal to 27/30 and Geriatric Depression Scale less than or equal to two were significant predictors.

"In conclusion, our study is the first to prospectively demonstrate that geriatric characteristics are independent predictive factors of tolerance to chemotherapy and toxicity in mCRC," the authors write. "[Intensive chemotherapy](#) should be used with caution in patients who have cognitive impairment or dependency. Larger studies are needed to confirm our results."

More information: [Abstract](#)
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