

Frailty mars outcomes after autologous hematopoietic stem cell transplantation in lymphoid malignancies

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(HealthDay)—For patients with lymphoid malignancies undergoing autologous hematopoietic stem cell transplantation (aHSCT), frailty is associated with worse hospital outcomes, according to a study published online Dec. 23 in *Clinical Lymphoma, Myeloma, & Leukemia*.

Muni Rubens, M.D., Ph.D., from the Miami Cancer Institute, and colleagues examined the effects of frailty on [hospital outcomes](#) among [patients](#) with non-Hodgkin lymphoma (NHL), Hodgkin lymphoma (HL), and multiple myeloma (MM) who received aHSCT (20,573; 8,974; and 40,750 patients, respectively) in a retrospective analysis of the Nationwide Inpatient Sample database from 2005 to 2014.

The researchers found that 5.5, 3.8, and 4.8 percent of patients with NHL, HL, and MM, respectively, were frail. Among those with NHL, there were significant associations between frailty and in-[hospital mortality](#) and prolonged length of stay (odds ratios, 4.04 and 2.32, respectively). Similar significant associations were seen between frailty and in-hospital mortality and prolonged length of stay for HL patients (odds ratios, 1.82 and 1.55, respectively) and for MM patients (odds ratios, 4.28 and 3.00, respectively). After stratifying by age and comorbidities, these associations remained significant. Hospitalization cost differed significantly between frail and nonfrail patients.

"We found [a] substantial number of frail patients received aHSCT, which is contrary to the current consensus that aHSCT should be administered only to nonfrail patients," the authors write. "Among these patients, independent of the effects of age and preexisting comorbidities, frailty was associated with adverse hospital outcomes such as greater in-hospital mortality rates, prolonged duration of in-hospital stays, and higher hospitalization costs."

More information: [Abstract/Full Text \(subscription or payment may be required\)](#)

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