

## Frailty assessment and adjustment of therapy

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The introduction of the immunomodulatory agents (IMiDs; thalidomide, lenalidomide and pomalidomide) and the proteasome inhibitors (PIs; bortezomib and carfilzomib) has not only greatly improved the prognosis of younger patients with MM, also in the elderly patients  $\geq 65$  years. Even data from population based registries indicate that if novel therapy is given to the elderly outside of randomized clinical trials, there is an increase in OS, even in the oldest patients. This indicates that also a subgroup of elderly patients benefits from novel therapies.

### Are there tools available to define the subpopulation of elderly MM patients that will benefit from treatment?

Therefore, there is an urgent need to determine in whom therapy is feasible and in whom it might compromise the quality of life. A recent publication of the International Myeloma Working Group showed that a concise frailty score, based on age (<75, 75-80, >80 years, score 0,1,2 respectively), CCI ( $\leq 1$  or  $\geq 2$ , score 0 or 1) and (instrumental) Activities Daily Life score (ADL  $> 4$  or  $\leq 4$ , score 0 or 1, iADL  $> 5$  or  $\leq 5$ , score 0 or 1), predicted non-hematological toxicity in 869 patients  $\geq 65$  years uniformly treated within 3 randomized clinical trials. These data underscore the importance of geriatric assessments as well as the need for prospective validation in uniformly treated patient populations.

### How to treat elderly MM patients in clinical practice?

Given the first data on the predictive value of geriatric scores (fit – unfit – frail) determined by limited geriatric assessments, this should be implemented in clinical practice. Unfortunately, there are no studies prospectively investigating the clinical outcome in a randomized trial either adapting the dose of anti-MM according to these geriatric assessments yet. Awaiting the results of these clinical trials practical guidelines were recently published that can be used to personalize therapy in the elderly patients being currently treated.

## References

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