Structured assessment of frailty in multiple myeloma as a paradigm of individualized treatment algorithms in cancer patients at advanced age

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Suppl. Table 1. Selected clinical trials in multiple myeloma patients with frailty assessments being included therein

| # | Institution performing the analysis | Trial title | Phase | Trial-# | Retro- vs. prospective | number of pts | Results / Study specifics |
|---|--|---|----------------------|-------------|------------------------|-------------------------------------|--|
| 1 | University of Freiburg (UKF) | Allogeneic (allo)-SCT | IV | NCT00655343 | retrospective | 109 | R-MCI did improve from 4 before to 3 after allo- SCT. Renal function and age declined over time, but did not neccessarily decreased QoL measures after allo-SCT in long-term survivors. |
| 2 | UKF | VBDD | 1711 | NCT01394354 | prospective | 33 | QoL improved in responsive pts: both frailty scores and functional tests were used and showed R-MCI improvement as well as of other frailty scores and functional tests. |
| 3 | Ohio State | Frailty + functional assessment in MM | IV, Observational | NCT02033928 | prospective | 111 | Change in Comprehensive Frailty Assessment: before and after transplant (Tx) and non-Tx pts. Study ongoing. |
| 4 | City of Hope + University of Rochester | Touchscreen-based geriatric and functional assessment | IV | NCT03068637 | prospective | 165 | Limited pt time required for survey completion and provider time for results review show mGA can be incorporated into clinical workflow. Real-time mGA results indicating fit/frailty status influenced treatment decisions. |
| 5 | Torino, GIMEMA | Rd vs. Rd-R in unfit MM pts | II | NCT02215980 | prospective | 210 | Rd-R improved event-free survial (EFS) endpoints in unfit MM pts. First results shown at ASH 2018. |
| 6 | Indiana university | Maia randomization: standard Dara-Rd vs. reduction in frail pts | II, Open label | NCT04223661 | prospective | 44 | Dara-Rd vs. reduced dose with frailty index >/=2. Study ongoing. |
| 7 | HOVON 143 | Efficacy and tolerability of Ixa-Dara-dex in unfit and frail NDMM pts | II | NTR6297. | prospective | n=65 unfit, n=67 frail pts | Dose-adjustment feasable and advisable, but early mortality still occurring. Study ongoing, early ASH results shown 2019: #695. |
| 8 | University of Leeds, UK study group | FiTNEss (Frailty-adjusted therapy in Tx Non-Eligible pts with NDMM) | III | NCT03720041 | prospective | 740 | IRd according to frailty score - randomization into 4 groups. Study ongoing. |

Abbreviations:

pts: patients, #: number, UKF: University of Freiburg Medical Center, allo-SCT: allogeneic stem cell transplantation, R-MCI: revised myeloma comrobidity index, Tx: transplantation VBDD: Vorinostat-Bortezomib-Doxorubicin-Dexamethason treatment in relapsed/refractory multiple myeloma (RRMM), QoL: Quality of life, ND MM pts: newly diagnosed MM patients, , GIMEMA: Italian study group. Rd vs. RD-R: Lenalidomide-dexamethason vs. continuation of reduced lenalidomide doses without dexamethason in Rd-R, IRd: Ixazomib-Lenalidomide-Dexamethasone; Ixa-Dara-Dex: Ixazomib-Daratumumab-Dexamethasone; Dara-RD: Daratumumab-lenalidomide-dexamethasone

see other studies in MM also in R.Mina, S.Bringhen, T.M.Wildes, S.Zweegman, AE.Rosko. ASCO educational book 2019