

REMERCIEMENTS

THANKS



Lodovico BALDUCCI

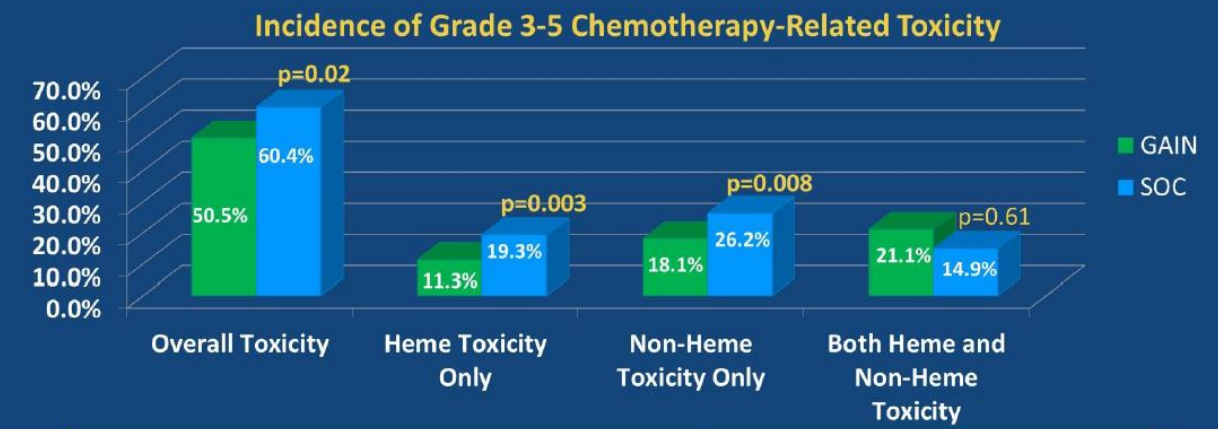
LA PLACE FONDAMENTALE DE L'ÉVALUATION GÉRIATRIQUE

THE FUNDAMENTAL PLACE OF GERIATRIC ASSESSMENT



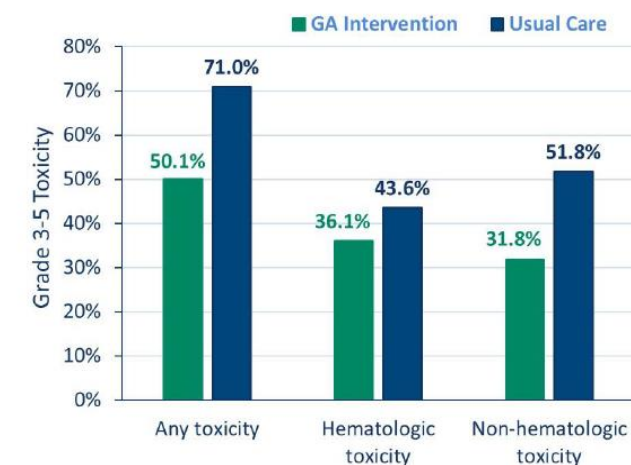
Arti HURRIA

Results: Primary Endpoint



The GAIN arm had a statistically significant reduction of 9.9% (95% CI: 1.6-18.2%, **p=0.02**) in chemo-related toxicity compared to the SOC arm

Any Grade 3-5 CTCAE Toxicity in 3 Months

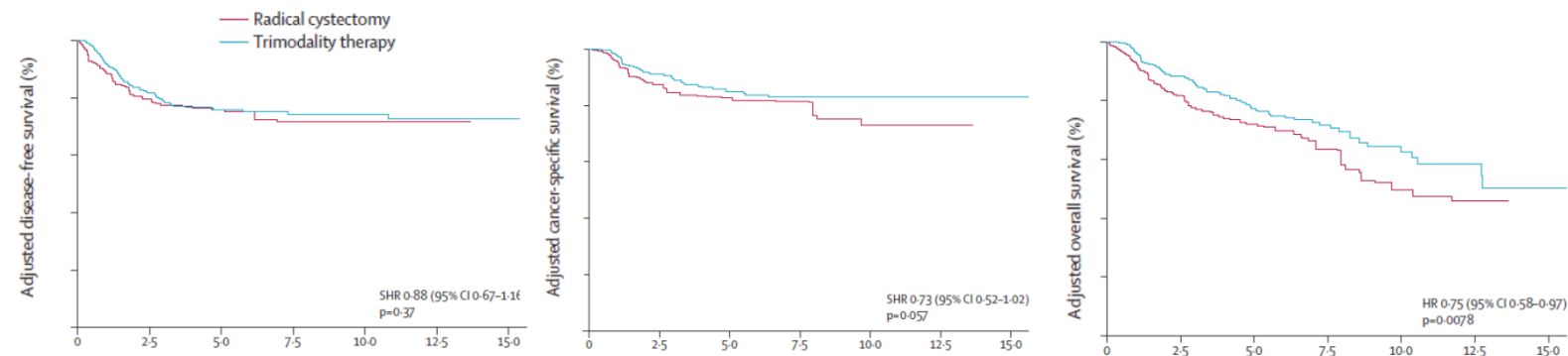


- **Any Grade 3-5 Toxicity**
Adjusted Risk Ratio: 0.74
95% CI: (0.63-0.87), P < 0.01
Clustering effect: P = 0.15
- **Any Grade 3-5 Hematologic Toxicity**
Adjusted Risk Ratio: 0.85
95% CI: (0.69-1.05), P = 0.13
Clustering effect: P = 0.30
- **Any Grade 3-5 Non-hematologic Toxicity**
Adjusted Risk Ratio: 0.73
95% CI: (0.53-0.996), P = 0.047
Clustering effect: P < 0.01

Radical cystectomy versus trimodality therapy for muscle-invasive bladder cancer: a multi-institutional propensity score matched and weighted analysis

Alexandre R Zlotta*, Leslie K Ballas, Andrzej Niemierko†, Katherine Lajkosz†, Cynthia Kuk, Gus Miranda, Michael Drumm, Andrea Mari,


Lancet Oncol 2023; 24: 669-81



Survie spécifique à 5 ans chirurgie vs TMT 81% (95% CI 77-85) vs 84% (79-89)

Radical cystectomy and adjuvant chemotherapy for bladder cancer in the elderly: a population-based study

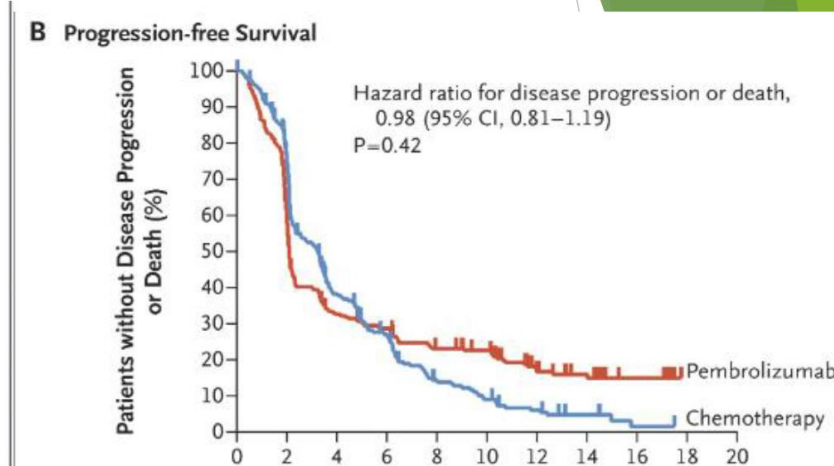
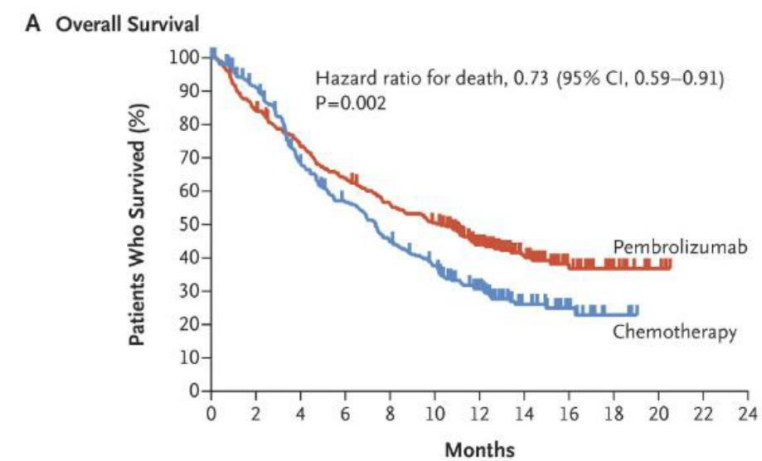
- ▶ Etude retrospective à Ontario
- ▶ 3320 patients de 1994 à 2008
- ▶ Age stratifié <70ans (41%), 70-74 (20%), 75-79 (19%), >80ans (20%)

- ▶ Survie globale spécifique à 5 ans : respectivement 42%, 37%, 34%, and 32% (P < .001)
- ▶ Survie globale à 5ans : respectivement 40%, 34%, 28%, and 23%
- ▶ Chimiothérapie adjuvant diminué avec l'âge (27%, 16%, 12%, 5%; P < .0001)
- ▶ Chimiothérapie adjuvant améliore la survie spécifique : HR 0.73 (> ou < 70ans)
- ▶ Améliore survie globale : HR à 0.7 (> ou < 70ans)

- ▶ Conclusion: la chimiothérapie adjuvante est utilisé moins fréquemment chez les patients > 70ans malgré bénéfique sur survie globale quelque soit les tranches d'âge

▶ Urology 2015 April

Traitement de 2ème ligne métastatique Pembrolizumab



Subgroup	No. of Deaths/ No. of Patients	Hazard Ratio (95% CI)
Overall	334/542	0.73 (0.59-0.91)
Age		
<65 yr	149/230	0.75 (0.53-1.05)
≥65 yr	185/312	0.76 (0.56-1.02)
Sex		
Male	246/402	0.73 (0.56-0.94)
Female	88/140	0.78 (0.49-1.24)
ECOG performance-status score		
0 or 1	323/526	0.74 (0.59-0.92)
2	5/6	0.43 (0.04-4.20)

CONCLUSION

La stratégie thérapeutique doit être au service du patient âgé

The therapeutic strategy must be at the service of the elderly patient

L'évaluation est indispensable pour traiter les patients âgés. Un combat de la Sofog et de Dialog que le G8 et le G-CODE soient intégrés à toutes les études cliniques de recherche pour les patients âgés de 75 ans et plus.

Assessment is essential for treating elderly patients. A fight by Sofog and Dialog for the G8 and G-CODE to be integrated into all clinical research studies for patients aged 75 and over.

BALANCE



SHARING

