

Retrospective Chart Review Evaluating Outcomes of Primary Induction and Salvage Therapies for Patients with Elderly (Age ≥ 60) Acute Myeloid Leukemia

Trivedi J¹, Irvine E¹, O'Neal B¹, Grauer D², Henry D², Williams CB^{1,2}

Department of Pharmacy¹, The University of Kansas Hospital, Kansas City, Kansas

The University of Kansas School of Pharmacy², Lawrence, Kansas

ABSTRACT

Objectives:

- Primary: To evaluate complete remission rates of the primary induction and salvage therapies for elderly patients (age ≥ 60 years) with Acute myeloid leukemia (AML).
- Secondary endpoints include: adverse effects of the cytotoxic regimen, progression-free survival and overall survival.

Methods:

- Adult AML patients that received primary induction and salvage therapies between January 1, 2008 and June 2010 were eligible.

Results:

- Response both in terms of completeness and duration was higher with 7+3 (8 patients) followed by 5+2 (4 patients), Clinical Trial (6 patients) and Decitabine (2 patients). Risk status based on cytogenetics and molecular abnormalities provided better correlation to both response and to treatment failure.
- ~26% of patients experienced treatment related toxicity and/or treatment delays.

Conclusion:

- Poor risk status and relapsed/refractory nature of disease is associated with treatment failure and ideal treatment in this group remains debatable. Improved delineation is warranted.

BACKGROUND

The incidence of acute myeloid leukemia (AML) increases with advancing age and its prognosis is directly related to age. Patient-specific factors along with leukemia-associated factors impact the outcome of elderly patients with AML.

- Poor performance status at diagnosis is associated with mortality during induction therapy. Due to comorbid illnesses, elderly patients have inadequate cardiac, pulmonary, renal and/or hepatic functional reserve and are less tolerant to intensive cytotoxic chemotherapy.
- Additionally the risk of systemic infections and a higher incidence of high-risk cytogenetics lead to poor outcomes in the elderly.

OBJECTIVES

Primary:

- The primary objective of the study is to evaluate efficacy, based on the criteria defined by International Working Group; between the primary induction and salvage therapies for elderly patients (Age ≥ 60 years) with Acute Myeloid Leukemia.

Secondary:

- Secondary end points of the study include:
 - Tolerability of the chemotherapeutic regimen including infections
 - Progression free survival (PFS)
 - Overall Survival (OS)

METHODS

Retrospective analysis of elderly (Age ≥ 60 years) patients that received primary induction and salvage therapies for the treatment of AML at The University of Kansas Hospital and Westwood Cancer Center between January 1, 2008 and June 2010. Patient identification will be carried out utilizing ICD-9 codes, the UHC database and hospital records.

Selection criteria:

- Inclusion: Elderly patients with the diagnosis of AML
- Exclusion: No specific exclusion criteria

PRELIMINARY RESULTS

N = 38	
Average age at diagnosis	69 years
Gender	
Female	13
Male	25
AML Type	
Primary AML	15
Secondary AML	14
Relapse/Refractory AML	9
Risk status based on Cytogenetics and Molecular abnormalities	
Better-risk	1
Intermediate-risk	18
Poor-risk	18
Information not available	1
Current status	
Number of patients (alive and in remission)	7
Patients lost to follow-up	14

PRELIMINARY RESULTS

