

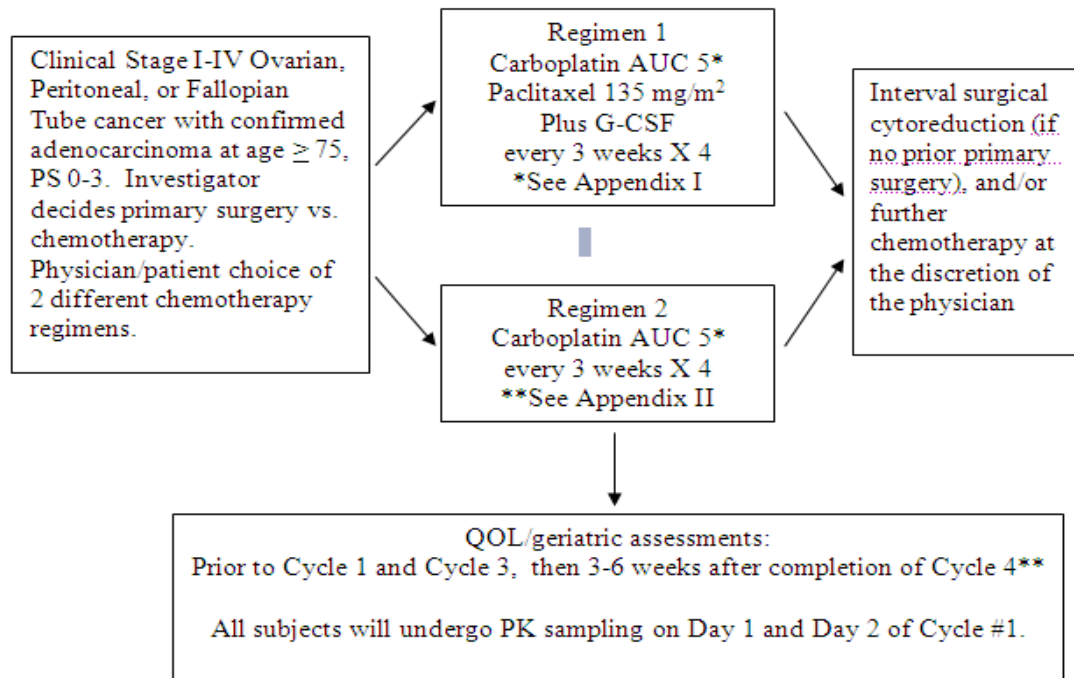
GOG/NRG Elderly WG

Update Fall 2013

GOG 273-Original

SCHEMA

This is a prospective observational study, not a comparison of treatment regimens.



*Patients for whom the physician deems a carboplatin dose of AUC dose of 5 to be unsafe, may be given an AUC of 4.

GOG 273

- Accrual to the first two arms complete (slight overaccrual, n=212)
- If possible, first results will be presented at SGO meeting March 22-25, 2014

GOG 273—Third Arm

- **Carboplatin AUC 5* every 3 weeks Plus Weekly Paclitaxel 60 mg/m² over 1 hour every 3 weeks X 4 cycles (Day 15 Paclitaxel is optional)** *Patients for whom the physician deems a carboplatin dose of AUC 5 to be unsafe may be given an AUC of 4
- All patients are now registered to this arm
- No further PK
- 12 pts accrued so far, goal ~ 100
- William Tew, chair
- Primary objective is to explore an association between the Geriatric Assessment Score (GAS) and tolerance to chemotherapy. The GAS is defined as the summation of the risk factor scores derived from a predictive model for chemotherapy toxicity for older adults developed by Hurria et al with cancer on chemotherapy, in which 11 risk factors were suggested to be associated with grade ≥ 3 chemotherapy-related toxicities

ELD1106

- Approved by DCP, protocol under development
- Will explore predictive value of GAS for surgical toxicity
- Goal to have one geriatric assessment that can be used throughout GOG/NRG protocols, surgical and chemotherapy