

Factors Associated with Early Therapy Initiation in Patients with MDS

David P. Steensma, MD, FACP

Associate Professor of Medicine Harvard Medical School Institute Physician Dana-Farber Cancer Institute Boston, Massachusetts

Hello. I am live at the American Society of Hematology 2018 Annual Meeting in San Diego, California. I would like to discuss data from the Connect Registry which is a registry of patients with myelodysplastic syndromes and patients with acute myeloid leukemia who are 55 years or older.

Among patients with myelodysplastic syndromes, treatment initiation is quite variable. Some are started on drug therapy earlier in the disease course. Others are started later in the disease course, and this, of course, is clinically appropriate depending on the circumstance. We wanted to understand what were the factors that contributed to early versus late treatment initiation, and so we looked at more than 800 patients in the registry and sought to understand why patients initiated therapy within the first 45 days of diagnosis. Patients are enrolled in the registry within 60 days of diagnosis. More than 100 community and academic medical centers across the United States are participating in the Connect MDS Registry. These data were presented by Dr. Christopher Cogle from Florida.

One of the major factors with treatment initiation early on was access to healthcare. Those who were insured and those who came from higher income areas were more likely to initiate therapy early. In addition, for higher risk patients, having the patient undergo molecular testing was also associated with the increased likelihood of starting therapy early. This may either be because physicians who obtain molecular testing have a keener interest in patients with myelodysplastic syndromes and may perhaps be more activist about treatment or it may also additionally reflect access to healthcare. Finally, red cell transfusion dependence in lower risk patients and the presence of excess blasts in higher risk patients were associated with early initiation of therapy. This makes sense because the finding of high blast proportion or red cell transfusion needs is a compelling indicator for treatment in myelodysplastic syndromes to try to improve either quality of life or delay disease progression. Interestingly, patient age and patient frailty, and even comorbid conditions were not associated strongly with early initiation of treatment therapy which suggests that it is primarily based treatment initiation on both disease characteristics and on the patient's social situation. These are not the things that we necessarily can modify but they are of interest in understanding the care patterns and health outcomes of patients with myelodysplastic syndromes.



Reference: Cogle C, Garcia-Manero G, Grinblatt D, et al. Factors Associated with Early Therapy Initiation in Patients (pts) with Myelodysplastic Syndromes (MDS) in the ConnectÂ[®] MDS/AML Disease Registry. ASH 2018. Abstract 4731.