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**How important is the availability of supportive care when considering transplant in older patients?**

Welcome to Managing MDS. I am Dr. Ellen Ritchie. I am frequently asked, “How important is the availability of supportive care when thinking of transplant as an option in older patients?” If you cannot find someone to be a 24-hour support for your patient when going through transplant, it is probably not feasible in the older patient. There needs to be someone who can, in the initial months after transplant, stay with that patient full-time and help them to achieve their ADLs (Activities of Daily Living) and IADLs (Instrumental Activities of Daily Living) and to get emergency care for them if it is needed. Many older patients need to come back and forth from the clinic on a daily basis for a few months after transplant. There has to be someone available who can bring them back and forth and potentially stay with them during infusions or transfusions. I do not think it is possible for an older patient to go through a transplant without someone to support them. In the choice of actually good support for patients, I have noted looking at the geriatric parameters of my older patients that having someone younger, like a child who is in the picture, to help the patient in addition to an older spouse is often a good plan. An older caregiver is more limited in his/her ability to care for someone who is very sick and living in their house. Those patients may need even extra support during the period that they are going through transplantation. Having a good caregiver is probably one of the most important aspects in achieving a good overall response to transplant. You need someone who will be with you and support you both emotionally and physically as you go through this procedure.

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