



# Research Week 2020

## Outcomes for Geriatric Patients Evaluated in a Same-Day Multidisciplinary Central Nervous System Clinic for Radiation Oncology and Neurosurgery in a Community Hospital Setting

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### Keywords

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### Abstract

#### Background

The geriatric cancer population is rapidly increasing in the United States. Management of geriatric patients with central nervous system (CNS) disease requires a patient-centric, multidisciplinary approach together with meticulous assessment of their outcomes, as clinical studies guiding treatment recommendations are lacking in this patient population. We have previously reported the outcomes of our multidisciplinary community hospital-based CNS clinic, RADIANS, where both radiation oncology and neurosurgery specialists simultaneously evaluate patients in a same-day, single-setting clinic. We have sought to analyze the outcomes of the geriatric patient population of our RADIANS clinic.

#### Methods

We identified patients 65 years and older in our IRB-approved RADIANS Prospective Patient Registry for CNS Disease. Descriptive statistics were used to report patient characteristics, diagnoses, treatments and outcomes, and patient satisfaction scores.

#### Results

Between August 2016 and February 2020, 56 patients 65 years and older (mean age 74.6, range: 65-94; 32 women and 24 men) were evaluated in the RADIANS clinic. Mean distanced traveled by patients to clinic was 43.4 miles (med=8.3; range=0.6-341). Patient-reported Satisfaction Score was 4.81 (0-5 Scale, 5-very satisfied). The most common referral source was medical oncology. Forty-two patients had malignant CNS disease (brain mets-18; spine mets-12; both-4; primary brain-6; primary spine-2), 14 had benign CNS disease. Post-evaluation treatment: radiation therapy (RT) only (n=20), neurosurgery (NS) only (n=6), both RT and NS (n=14), and no RT/NS intervention (n=16). Fractionated

stereotactic radiosurgery was most common RT delivered; craniotomy with tumor resection was most common NS performed. Treatment outcomes: local tumor control=39/40 (97.5%); radiation necrosis/radiation-induced myelitis=0/34 (0.0%).

### Conclusions

This is the first report of outcomes in geriatric patients with CNS malignancies treated in a community hospital-based multidisciplinary clinic. We show excellent outcomes comparable to younger patients with CNS malignancies, as well as patient satisfaction and ability to travel great distances to receive multidisciplinary care.

