

# AMERICAN SOCIETY OF CLINICAL ONCOLOGY-ASP-JUNIOR DEVELOPMENT AWARD IN GERIATRIC ONCOLOGY

## *Award Recipient:*



ARTI HURRIA, MD  
MEMORIAL SLOAN-KETTERING CANCER CENTER

## PROJECT:

DEVELOPMENT OF A CANCER-SPECIFIC GERIATRIC ASSESSMENT

## MENTORSHIP TEAM:

GEORGE BOSL, MD

MARK LACHS, MD

The overarching goal of this research is to develop a geriatric instrument for older patients with cancer that improves the oncologist's ability to anticipate chemotherapy toxicity, predict overall outcomes, and develop interventions to improve outcomes in the older cancer patient. Existing oncology instruments are largely inapplicable to the older adult because they were validated in younger patients and do not address the critical domains of geriatric assessment that predict morbidity and mortality in the older patient. This research is of great importance because 60 percent of all cancer and 70 percent of cancer mortality occur in patients over the age of 65. Oncologists need a comprehensive measure of the "functional age" of the geriatric patient to predict outcomes (morbidity and mortality with and without cancer treatment) based on factors other than chronological age and to develop interventions to optimize cancer treatment. No such tool exists today.

This research program, developed with the mentorship of George Bosl, MD, (oncologist) and Mark Lachs, MD, (geriatrician) proposes to integrate recent advances in geriatric assessment, clinical epidemiology, and psychometrics to create a clinically useful tool for the practicing oncologist. We hypothesize that a cancer-specific geriatric instrument can be formulated to identify factors independent of age that predict cancer treatment morbidity and mortality and result in rationale interventions to optimize oncologic care. The specific aims of this research are to:

1. Demonstrate the feasibility and psychometric properties of a primarily self-administered cancer-specific geriatric assessment in a prospective multi-center clinical trial.

2. Determine this new tool's ability to predict risk of toxicity to chemotherapy.
3. Develop interventions to decrease the risk of toxicity and improve overall outcomes.

My academic development to date includes training in geriatrics at the Harvard geriatrics fellowship program and training in oncology and hematology at Memorial Sloan-Kettering Cancer Center. I currently hold a faculty position at Memorial Sloan-Kettering Cancer Center where I have spent the last three years immersed in the clinical care and research focused on geriatric oncology patients with breast cancer. Through this work, I have developed a greater appreciation for the difference in "culture" between oncology and geriatrics, the strengths of each respective discipline, and the importance of applying geriatric principles to the care of the older oncology patient.

The support of the American Society of Clinical Oncology-ASP-Junior Development Award in Geriatric Oncology will allow me to meld my previous training in geriatrics and oncology and develop the skills needed to develop an independent research career in geriatric oncology. With the formal support provided by this grant, I will devote time to receive further training in the fields of epidemiology, biostatistics, clinical trial design, and psychosocial research. Through the support of this grant and through working with my mentors, I hope to further our knowledge about geriatric oncology, and thus enhance the health and quality of life of older adults with cancer.