



# Prevalence and Management of Anemia in Patients with Hematologic Malignancies and Solid Tumors: Results from the European Cancer Anemia Survey (ECAS)

**Presenter:** Heinz Ludwig

**Presenter's Affiliation:** ECAS Advisory Board

**Type of Session:** Poster

## Background

- Anemia (hgb < 12 g/dL) affects the majority of cancer patients at some time during their course of treatment.
- Large randomized trials show that correction of anemia leads to symptom improvement and improved quality of life (QOL).
- Unfortunately, the majority of anemic cancer patients receive no treatment for their anemia. (ASH/ASCO guidelines recommend treatment for hgb < 10)
- The ECAS survey intended to investigate the prevalence, incidence, severity and management of anemia in cancer patients and predict which patients are at greatest risk.

## Materials and Methods

- Prospective, observational, non-controlled study of adult patients (at least 18 years old). Patients enrolled from January to July, 2001 and followed for six months.
- Data was collected at enrollment and at each subsequent follow-up visit.
- Anemia defined as Hgb < 12 g/dL for the purposes of this study.
- Chi-square and Pearson R analysis of data.

## Results

- 15,367 patients from 24 European countries and 750 centers were enrolled.
- 20% had hematologic malignancies (HM), 75% had Solid Tumors (ST), 5% were classified as "other."
- At enrollment, anemia rates were 53% for HMs and 36% for STs.
- Low hgb correlated significantly with poor performance status (R= 0.35 and 0.17 for HM and ST, respectively, with P < 0.001 for both).
- 72% of HM patients and 66% of ST patients were anemic at some time during the survey period. Chemotherapy caused greater incidence of anemia than radiotherapy: 56 vs. 20% for HM and 64 vs 19% for ST.
- Only 49% of HM patients and 37% of ST patients who were anemic at some time during the survey received treatment for their anemia.
- The mean hgb level at which patients were treated with epoetin was 9.4 for HM and 10.1 for ST. Transfusions were given at a mean hgb level of 8.3 for HM and 9.0 for ST.

## Author's Conclusions

- Recognition and treatment of anemia should be an essential component of the overall cancer care of cancer patients.

## Clinical/Scientific Implications

- There are solid data showing that correction of anemia in cancer patients with either growth factors such as epoetin or blood transfusion leads to decreased symptoms and improved quality of life. The majority of cancer patients experience some level of anemia during their cancer treatment. Despite these facts, the majority of anemic cancer patients never have their anemia treated. Moreover, those patients who do receive anemia treatment generally are not treated until their hgb decreases below 10g/dL. This study suggests that cancer physicians need to be more vigilant and proactive in

diagnosing and treating the anemia which occurs in the majority of their patients. Such a simple strategy should improve their patients' overall well being during aggressive cancer treatments.

**Oncolink's ASH Coverage made possible by an unrestricted Educational Grant from Ortho Biotech.**

---

Oncolink is designed for educational purposes only and is not engaged in rendering medical advice or professional services. The information provided through Oncolink should not be used for diagnosing or treating a health problem or a disease. It is not a substitute for professional care. If you have or suspect you may have a health problem or have questions or concerns about the medication that you have been prescribed, you should consult your health care provider.