Supplementary material for Aaldriks et al., Prognostic factors for the feasibility of chemotherapy and the Geriatric Prognostic Index (GPI) as risk profile for mortality before chemotherapy in the elderly, Acta Oncol, 2015; doi: 10.3109/0284186X.2015.1068446.

Addendum 1

SCREENING	
A	Has food intake declined over the past 3 months due to loss of appetite, digestive problems, chewing or swallowing difficulties? 0 = severe decrease in food intake 1 = moderate decrease in food intake 2 = no decrease in food intake
B	Weight loss during the last 3 months 0 = weight loss greater than 3kg (6.6lbs) 1 = does not know 2 = weight loss between 1 and 3kg (2.2 and 6.6 lbs) 3 = no weight loss
C	Mobility 0 = bed or chair bound 1 = able to get out of bed / chair but does not go out 2 = goes out
D	Has suffered psychological stress or acute disease in the past 3 months? 0 = yes 2 = no
E	Neuropsychological problems 0 = severe dementia or depression 1 = mild dementia 2 = no psychological problems
F	Body Mass Index (BMI) (weight in kg) / (height in m²) 0 = BMI less than 19 1 = BMI 19 to less than 21 2 = BMI 21 to less than 23 3 = BMI 23 or greater
Screening score (subtotal max. 14 points) 12-14 points: Normal nutritional status 8 - 11 points: At risk of malnutrition 0 -7 points: Malnourished	
ASSESSMENT (if screening < 12 points)	
G	Lives independently (not in nursing home or hospital) 1 = yes 0 = no
H	Takes more than 3 prescription drugs per day 0 = yes 1 = no
I	Pressure sores or skin ulcers 0 = yes 1 = no
J	How many full meals does the patient eat daily? 0 = 1 meal 1 = 2 meals 2 = 3 meals
K	Selected consumption markers for protein intake • At least one serving of dairy products (milk, cheese, yoghurt) per day • Two or more servings of legumes or eggs per week • Meat, fish or poultry every day 0.0 = if 0 or 1 yes 0.5 = if 2 yes 1.0 = if 3 yes
L	Consumes two or more servings of fruit or vegetables per day? 0 = no 1 = yes
M	How much fluid (water, juice, coffee, tea, milk...) is consumed per day? 0.0 = less than 3 cups 0.5 = 3 to 5 cups 1.0 = more than 5 cups
N	Mode of feeding 0 = unable to eat without assistance 1 = self-fed with some difficulty 2 = self-fed without any problem
O	Self view of nutritional status 0 = views self as being malnourished 1 = is uncertain of nutritional state 2 = views self as having no nutritional problem
P	In comparison with other people of the same age, how does the patient consider his / her health status? 0.0 = not as good 0.5 = does not know 1.0 = as good 2.0 = better
Q	Mid-arm circumference (MAC) in cm 0.0 = MAC less than 21 0.5 = MAC 21 to 22 1.0 = MAC 22 or greater
R	Calf circumference (CC) in cm 0 = CC less than 31 1 = CC 31 or greater
Assessment score (max. 16 points) Total (Screening + Assessment) 24 to 30 points: Normal nutritional status 17 to 23.5 points: At risk of malnutrition Less than 17 points: Malnourished	
Mini Nutritional Assessment (MNA)* (From: Guigoz et.al. Identifying the elderly at risk for malnutrition. The Mini Nutritional Assessment. Clin Geriatr Med, 2002. 18(4): p.737-57). * http://www.mna-elderly.com/forms/MNA_MNenglish.pdf .	

Addendum 2

Groningen Frailty indicator (GFI)

Mobility

Is the patient able to carry out these tasks single handed without any help? (The use of help resources such as walking stick, walking frame, wheelchair, is considered independent)

1. Shopping
2. Walking around outside (around the house or to the neighbors)
3. Dressing and undressing
4. Going to the toilet

Physical Fitness

5. What mark does the patient give himself/herself for physical fitness? (scale 0 to 10)

Vision

6. Does the patient experience problems in daily life due to poor vision?

Hearing

7. Does the patient experience problems in daily life due to being hard of hearing?

Nourishment

8. During the last 6 months has the patient lost a lot of weight unwillingly? (3 kg in 1 month or 6 kg in 2 months)

Morbidity

9. Does the patient take 4 or more different types of medicine?

Cognition (Perception)

10. Does the patient have any complaints about his/her memory or is the patient known to have a dementia syndrome?

Psychosocial

11. Does the patient sometimes experience emptiness around him/her?
12. Does the patient sometimes miss people around him/her?
13. Does the patient sometimes feel abandoned?
14. Has the patient recently felt downhearted or sad?
15. Has the patient recently felt nervous or anxious?

Scoring:

Questions 1–4:	Independent = 0; dependent = 1
Question 5:	0–6 = 1; 7–10 = 0
Questions 6–9:	No = 0; yes = 1
Question 10:	No and sometimes = 0; yes = 1
Questions 11–15:	No = 0; sometimes and yes = 1

(From: Slaets JP. Vulnerability in the Elderly: frailty. Med Clin North Am 2006;90:593-601)

Addendum 3.

Dichotomized items of the screening tests.

With MNA the individual items were dichotomized as follows;

- item A: score 0/1 vs score 2
- item B: score 0/1 vs score 2/3
- item C: score 0/1 vs score 2
- item E: score 0/1 vs score 2
- item F: score 0/1/2 vs score 3
- item J: score 0 vs score 1/2
- item K: score 0.0/0.5 vs score 1.0
- item M: score 0.0/0.5 vs score 1.0
- item N: score 0/1 vs score 2
- item O: score 0/1 vs score 2
- item P: score 0.0/0.5 vs score 1.0/2.0
- item Q: score 0.0/0.5 vs score 1.0

The cut-off score for the items of the IQ-CODE was between 'nothing changed' and 'worse'.

The cut-off score for the items of the MMSE according to Small et al.* were;

- 'immediate memory': • 2 points,
- 'serial sevens': • 3 points,
- 'delayed memory': • 2 points
- 'follow commands': • 2 points,

* From: Small, B.J. et al., *Mini-Mental State Examination item scores as predictors of Alzheimer's disease: incidence data from the Kungsholmen Project, Stockholm. J Gerontol A Biol Sci Med Sci*, 1997. 52(5): p. M299-304.

Addendum 4**Chemotherapy of malignancies**

Type of malignancy	Chemotherapy	N (%)
Upper digestive tract (N=64)	Platina combination therapy	47 (73.5)
	Gemcitabine	13 (20.3)
	Capecitabine	2 (3.1)
	Platina mono therapy	2 (3.1)
Lower digestive tract (N=142)	5-fluoropyrimidine combination therapy	82 (57.8)
	5-fluoropyrimidine mono therapy	54 (38.0)
	Irinotecan mono therapy	4 (2.8)
	Platina combination therapy	2 (1.4)
Haematological (N=110)	Combination chemotherapy (mostly rituximab, cyclophosphamide, hydroxydaunomycin, oncovin, prednisone (R-CHOP))	82 (74.5)
	Multiple myeloma directed therapies (vincristin-adriamycin-dexamethasone (VAD), bortezomib and combinations, melphalan and combinations)	18 (16.4)
	Mono therapy (chlorambucil, fludarabine, methotrexate, decitabine, rituximab)	10 (9.1)
Breast (N=61)	Capecitabine mono therapy	16 (26.1)
	Anthracycline mono therapy	9 (14.8)
	Anthracycline combination therapy	9 (14.8)
	Paclitaxel	6 (9.8)
	Docetaxel	3 (4.9)
	Taxane combination therapy	4 (6.6)
	CMF (Cyclophosphamide, Methotrexate, 5-Fluorouracil)	4 (6.6)
	Vinorelbine	4 (6.6)
	Anthracyclines + Taxane	4 (6.6)
	Herceptin	1 (1.6)
	Gemcitabine	1 (1.6)
Gynaecological (N=38)	Platina combination therapy	25 (65.8)
	Platina mono therapy	12 (31.6)
	Melphalan	1 (2.6)
Prostate (N=29)	Docetaxel	28 (96.6)
	Mitoxantrone	1 (3.4)
Lung (N=21)	Platina combination therapy	17 (81)
	CDE (cyclophosphamide, doxorubicin, etoposide)	4 (19)
Urinary tract (N=11)	Platina combination therapy	8 (72.7)
	M-VAC (methotrexate, vinblastin, adriamycin, cisplatin)	2 (18.2)
	Platina mono therapy	1 (9.1)