

**What is the definition of elderly in AML, and is there an age at which we decide not to treat?**

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Welcome to *Managing AML*, I am Dr. Aziz Nazha. I am frequently asked, “What is the definition of elderly in AML, and is there an age at which we decide not to treat?” This is a great question. AML is a disease of the elderly; the median age of diagnosis of AML is 60 years old. Typically, we draw a line in the sand around the age of 60 to separate patients of 60 years old or older as “older adults with AML,” compared to younger than 60 who we consider younger adults with AML. Although, some clinical trials have used the age of 65 years and older as a definition of elderly AML. Again, these are mainly lines in the sand as the age is a continuous variable, and dividing it is mainly based on clinical trials or expert opinion.

In terms of the age at which we decide not to treat, overall, any elderly adult with AML should be offered treatment regardless of their age, preferably the treatment should be a clinical trial. In terms of intensive treatment, typically we offer intensive treatment for well, fit patients, between the ages of 60-75. We can offer them intensive chemotherapy if they have good performance status and fewer comorbidities, and if we think they can tolerate chemotherapy. For patients between the ages of 75-80, we still can discuss intensive chemotherapy with them case-by-case; it depends on their goal of the treatment and whether we think they can tolerate intensive chemotherapy. Typically, for patients 80 and above, we do not offer them intensive chemotherapy, but we do offer them treatment with less intense chemotherapy, whether it is a clinical trial or treatment with hypomethylating agents or low-dose cytarabine.