

# The Cardio-Oncology MDT; patients at the heart of the matter

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## Background

The Cardio-Oncology multi-disciplinary team meeting (C-O MDTM) is an integral component of care for cancer patients and survivors, with both chronic and new cardiovascular disease (CVD). It involves meticulous collaboration between oncologists and cardiologists to achieve optimal clinical outcomes, often in scenarios with modest related clinical evidence or guidelines.

Here we evaluate the role of our C-O MDTM in optimizing the management of C-O patients.

## Methods

We analysed the healthcare records of all consecutive patients discussed at a dedicated C-O MDTM in a tertiary centre in London between October 2016 and July 2019. Clinical data, reason for discussion and the MDT outcome were recorded.

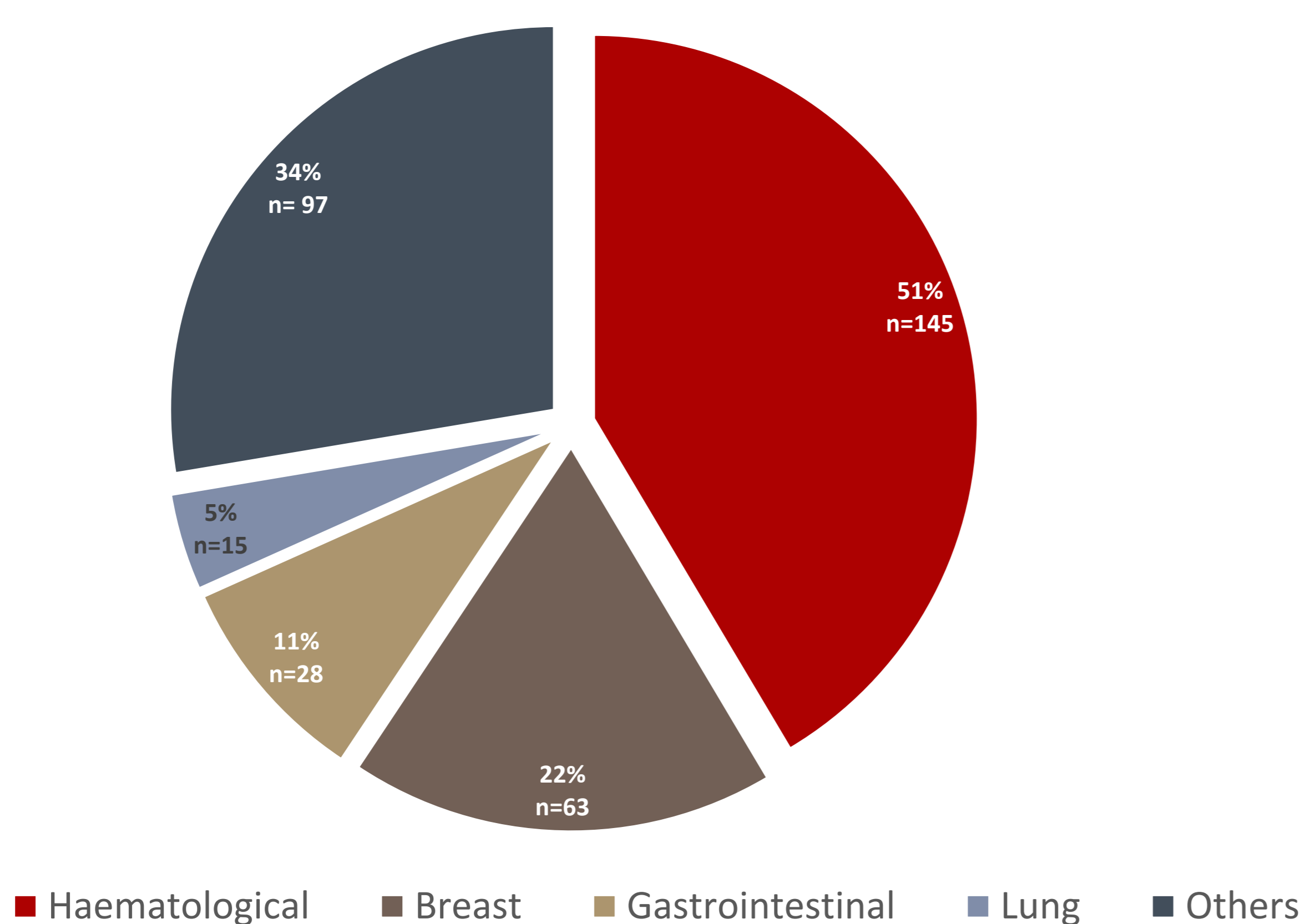
MDT members included cardiologists, oncologists, trainees, cardiac physiologists and specialist nurses.

## Results

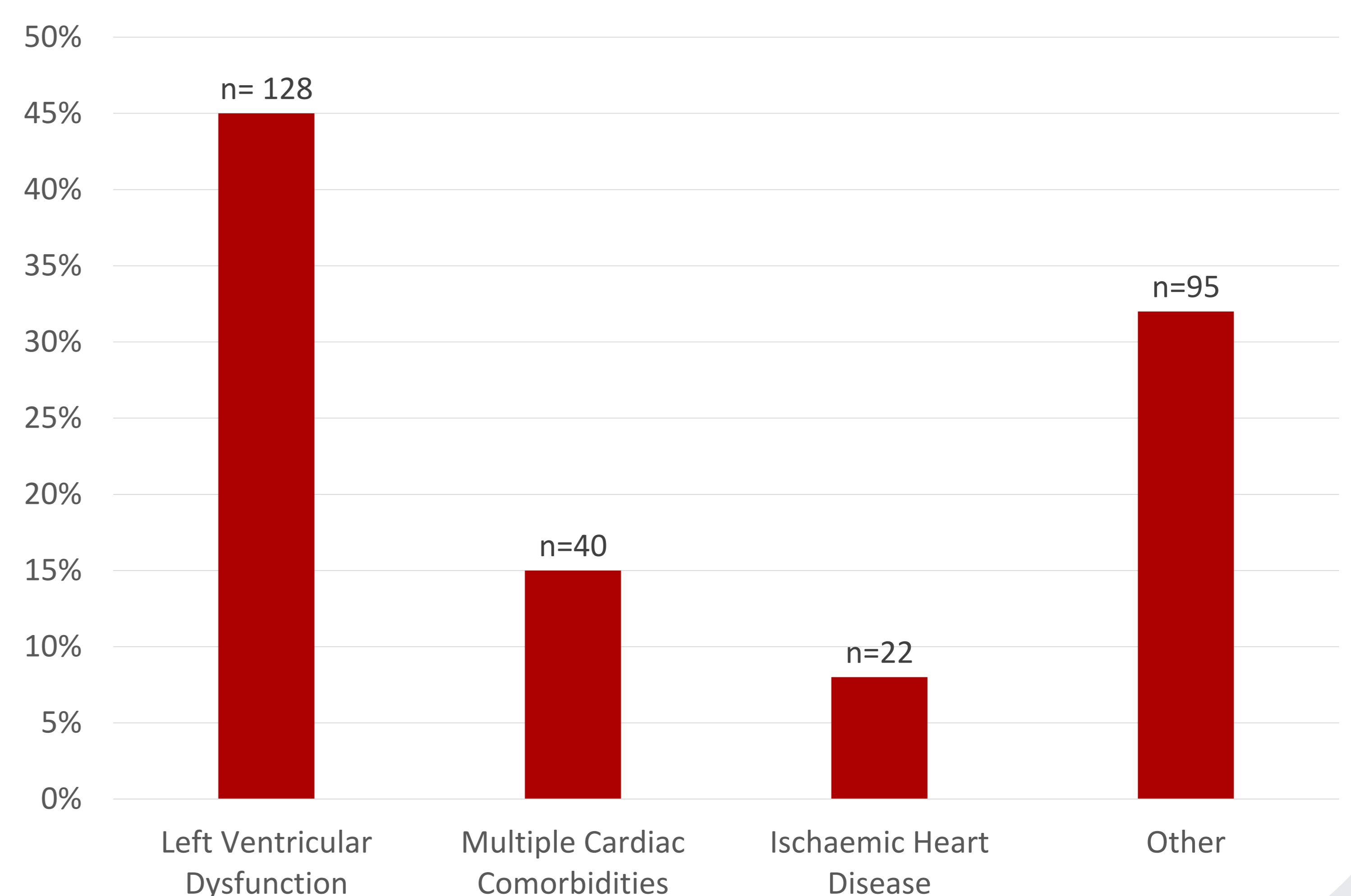
285 patients were discussed over a period of 2 years 10 months (median age 62 y; 52% female). The most common malignancies were haematological (51%), followed by breast (22%) and gastrointestinal (11%) cancers. Commonest reasons for discussion were left ventricular (LV) dysfunction (45%), multiple cardiac comorbidities (15%) and ischaemic heart disease (8%). 72% of patients had known CVD prior to their cancer diagnosis.

77% of patients were able to continue/complete cancer treatment, facilitated by close cardiac monitoring in C-O clinics. Of this subset, 78% of breast cancer patients with LV dysfunction were able to continue/complete cancer treatment consisting of chemotherapy and/or Her2-targetted therapy and all were alive at follow up.

Graph Depicting Most Common Malignancies Discussed in CO-MDTM



Most Common Reasons for Discussion



## Discussion

The C-O MDTM is integral to the management of complex cardio-oncology patients, providing a consensus view to allow the appropriate management of these patients to optimise cancer outcomes and minimise cardiac mortality and morbidity.