

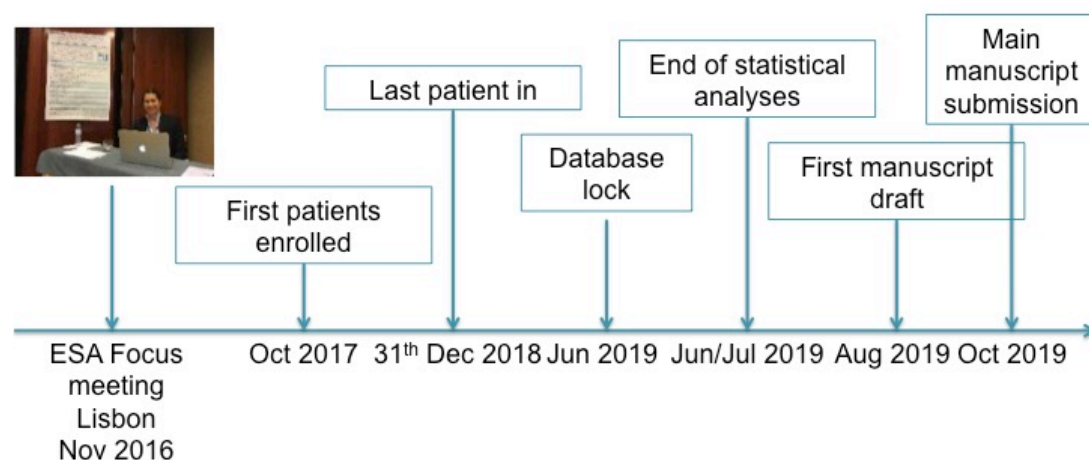
Investigator and Steering Committee Meeting 2nd June 2019

Summary:

1. Powerpoint presentation

Presentation of the actual status of POSE (Number of recruited patients, number of centres with finalised data-monitoring etc.)

Expected timeline:



2. POSE survey

Encouragement to participate in the present POSE survey, which was launched 29th May 2019, link: <https://www.surveymonkey.com/r/FHFZCJZ>

3. Publication plan

We aim to submit the results of the POSE study to The LANCET Journal (IF 53.254)

4. **Subanalyses** are welcome

5. Future plans

- We appreciate a further collaboration with all centres, also the centres which were not able to participate in the present POSE study.
- We aim to apply for the Horizon 2020 call with the title: *“Healthcare interventions for the management of the elderly multi-morbid patient”*

Possible work packages for the Horizon 2020 application:

- a) Systematic review of possible feasible interventions
- b) Delphi-survey regarding the identified interventions for the next study

- c) Clinical study
- d) Development of a telemedical solution for preoperative risk stratification. Possible process: We aim to develop and validate a preoperative online platform for ESA-guideline-based geriatric risk stratification (EJA 2018), which comprises 10 recommendations. The patients will be asked to answer the set of questions at the comfort of home (with the help of their family or caregivers) and take the time he needs, to create an overview of his risks. This overview will be provided to the in-hospital physicians. A connection to a tele-physician would be an additional option.
- e) We appreciate your ideas for further work packages and your involvement to act actively in the Horizon 2020 application.

Brainstorming for the clinical study during the meeting:

- Interventional study (stepped wedged cluster-randomized trial like e.g. OPTI-age)
- POSE BUNDLE e.g. physical prehabilitation (exercises), cognitive prehabilitation (memory tasks); etc.

Possible Outcomes:

- We need clear **feasible** outcomes e.g. Quality of life
- One-year follow-up (including e.g. cognitive outcome)
- Quality of life questionnaires (EQ-5D-5L)
- Cognitive tests
- Depression
- Additional monitoring? NIRS? Anaesthesia depth? How many events of BURST suppression?
- Further possible outcomes: Institutionalisation, Re-admission,
- *Longer FU-time Pro:* Several investigators were very interested to see the patients outcomes at a later stage and would be also interested to see it later than 30 days
Contra: anaesthetists are probably not interested to FU the patients for 6 months
- One intervention could be: NOT to do an intervention!
- We should include the general practitioners in the project
- Problem: legal issues, where will be the data storage? What happens with the data?
- Should we try to do prehabilitation? => Up to now from publications: it is not so easy to implement