



MENU

652.Multiple myeloma and plasma cell dyscrasias: clinical and epidemiological |
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Outcomes after First Rescue Treatment in Patients with Relapsed or Refractory Multiple Myeloma in Colombia

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Split-Screen



Abstract

Background Proteasome inhibitors (PIs) are approved for treating newly diagnosed and relapsed multiple myeloma (MM) in Colombia. This propensity score matching (PSM) analysis using data from the real-world, was designed to establish the role PIs (bortezomib or carfilzomib) at first relapsed or refractory MM. The primary endpoint was overall response rate (ORR) and secondary endpoint included was overall survival (OS). Moreover, an analysis of OS was done regarding response attained. On Behalf of **RENEHOC-GRIMMCO** (Colombian Registry for Hemato-Oncological Diseases



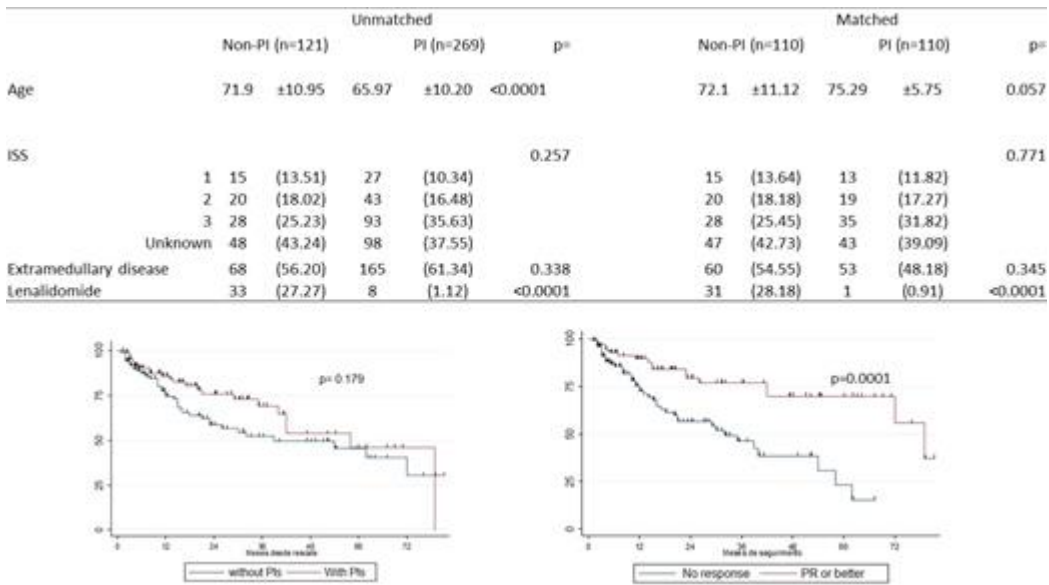
Methods PSM by nearest neighbor analysis to evaluate the role of PIs used at first relapse in multiple myeloma of patients belonging to RENEHOC registry, between 2010 and 2020.

Results 390 patients were identified in the first relapse of the Colombian registry, 269 patients with PI and 121 patients without PI. One hundred and ten patients were included in each group after PSM. Patients were matched for age, ISS, extramedullary disease, and use of lenalidomide to define the influence of this immunomodulatory drug in the PI group. A difference was found in the use of lenalidomide because only 1 patient was treated with PI and lenalidomide concomitantly (0.91%) compared to 31 patients in the group without PI (28.18%), ($p < 0, 0001$).

Regarding ORR, no differences were found between the 2 groups 38.18% in PIs vs 37.27% in non-PIs group ($p = 0.801$). A trend towards better OS was found in the PIs group with a median of 58 months versus 39 months ($p = 0.179$). Overall survival in patients who achieved at least PR was better compared to those who did not reach 79 months versus 32 months in non-responders ($p = 0.0001$).

Conclusion In this study, we found that the use of PI has a tendency to improve overall survival in real-world in MM patients when used in the first relapse and that this effect could possibly be enhanced with the combination with lenalidomide. Regardless of the treatment used, better responses are associated with better survival.

Figure 1



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Abello: ~~Vanessa~~: Honoraria; **Amgen:** Honoraria; **Dr Reddy's:** Research Funding. **Sossa:** ~~Amgen:~~ Research Funding.



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Victor H Jimenez-Zepeda et al., Blood

Treatment of Relapsed and Refractory Multiple Myeloma in Patients with p53 Deletion.

Donna E. Reece et al., Blood, 2008

Real-Life Data on the Outcome of Daratumomab-Refractory Myeloma Patients: Multi-Center Experience

Benyamini, Blood, 2018

Pomalidomide, bortezomib, and dexamethasone

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lenalidomide (OPTIMISMM): outcomes by prior treatment at first relapse

Meletios Dimopoulos et al., Leukemia, 2020

Small-molecule HDAC and Akt inhibitors suppress tumor growth and enhance immunotherapy in multiple myeloma

Mitsuhito Hirano et al., Journal of Experimental & Clinical Cancer Research, 2021

Clinical Study of Bortezomib in the Treatment of Multiple Myeloma at Different Dose-frequency Schedule

CAI De-feng et al., Journal of Sichuan University (Medical Science Edition), 2019



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