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**What are the common side effects of melphalan?**

This is Dr. Sergio Giralt from Memorial Sloan-Kettering Cancer Center.

I am frequently asked, “What are the most common side effects of melphalan?” Melphalan is given either orally at low doses, chronically for treatment of multiple myeloma in combination regimens together with bortezomib or steroids or even lenalidomide. The most common side effect of oral melphalan therapy is usually myelosuppression, which means a decrease in the white count and the platelet count. Your physician will be monitoring your white count and platelet count in deciding how often and at what dose you should be getting the melphalan. Otherwise oral melphalan is generally very well tolerated with minimal gastrointestinal side effects such as nausea, vomiting or diarrhea.

High-dose melphalan is given as part of the conditioning regimen for autologous stem cell transplantation. It is usually given intravenously over one or two days. High-dose melphalan is associated with significant myelosuppression that requires stem cell support, that requires transfusions, and should be done only under the close supervision of an expert team. High-dose melphalan is also associated with significant gastrointestinal effects such as nausea, diarrhea, and poor appetite that can sometimes take two to four weeks to improve.