

What is the CyBorD regimen's safety and efficacy as a primary therapy?

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Well thank you for joining me. My name is Robert Orlowski, I am a professor in the Departments of Lymphoma and Myeloma and Experimental Therapeutics, and the director of the Myeloma Section at University of Texas MD Anderson Cancer Center. One question that I am frequently asked is about the so-called CyBorD regimen and its use as primary therapy both with respect to safety as well as efficacy for patients with multiple myeloma. CyborD is a combination which incorporates bortezomib along with cyclophosphamide and with dexamethasone, and certainly as a three-drug combination is one of the best approaches to treatment of patients with newly diagnosed myeloma. It does not have category 1 recommendation from the National Comprehensive Cancer Network, but that is because a phase 3 study comparing CyborD to some other standard has not yet been completed. Despite this, the data do show in smaller phase 2 trials that the combination is excellent, it is very well tolerated, with of course cyclophosphamide given orally and dexamethasone orally, and bortezomib can be given either intravenously or in a subcutaneous route, and the overall response rate with this combination is at least 80% or more with a high proportion of patients having complete responses. One of the other advantages of this combination is that it does not compromise the ability to collect stem cells later on for patients who may be considering stem cell transplantation and that is a benefit as well, so while it does not have category 1 level recommendation, it certainly is an excellent option to consider and discuss with your patients in the newly diagnosed setting.