

EHA Highlights from Saad Z. Usmani, MD, FACP

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Welcome to *Managing Myeloma*, I am Dr. Saad Usmani. I will be reviewing an abstract on first results from INSIGHT MM, the largest global prospective observational myeloma study which was presented at the 2018 European Hematology Association Annual Congress that was held in Stockholm, Sweden. This particular prospective study is going to accrue a total of 4,200 patients with newly-diagnosed myeloma, as well as patients with relapsed/refractory myeloma within 1-3 prior lines of treatment, across 15 countries in Europe, North America, Asia, and Latin America. The abstract that was presented at the EHA meeting was an experience on the first thousand patients that had been accrued to the study. The data were not simply describing the patient characteristics of the myeloma patients that had been accrued to this particular study, but also the treatment patterns of those first thousand patients. What is important to appreciate with respect to this prospective registry study is how access to the new novel agents has impacted the survival, the response, as well as quality of life of patients. There are a lot of quality of life and health economics outcomes data that are going to be compared in this global prospective observational myeloma study.

This is an early look, and what was observed within this thousand-patient experience was a little less than half of the patients were newly diagnosed, and a little over 500 patients had relapsed myeloma. The patterns of utility of the three-drug combinations were higher in Europe and the United States compared to the Latin American and the Asian countries. Specifically, the two-drug combinations including thalidomide-dexamethasone or bortezomib-dexamethasone were seen more frequently in Asian countries, specifically Taiwan. Looking at the kind of triplet drugs that were utilized for frontline therapy, VCD (bortezomib-cyclophosphamide-dexamethasone) was more commonly utilized in Europe, whereas RVD (lenalidomide-bortezomib-dexamethasone) was utilized more in the United States. What was also interesting to see in terms of patterns of treatment was that only about a third of the newly diagnosed patients were treated to relapse or progression. A majority of patients in the newly diagnosed setting were treated for a finite duration of treatment, not continuous therapy. That pattern changed at relapsed. For relapsed patients, two-thirds of the patients across the cohort were treated to relapse, progression, or intolerance.

Since the median time on follow-up on the study is still measured in a few months (it is less than six months or so) the efficacy data, the progression-free survival data, and the time to next treatment data are immature.

What we can infer from the data that were presented in this abstract, we can safely say that there is no uniform standard of care in clinical practice across the world. A major reason for that is access to different drugs and drug classes in different parts of the world that dictate the choices we make for our patients being cared for.

The experience in the first thousand patients that were accrued also confirmed that the proteasome inhibitors and immunomodulatory drugs have replaced the conventional chemotherapy drugs across the board in different parts of the world and are being utilized for not just frontline but also relapsed/refractory treatment.

The most important aspect of this particular global prospective registry is to not simply see the treatment patterns but also, in the real-world setting, to see what is the progression-free survival of standard risk versus high-risk patients in a newly diagnosed setting; what are the patterns of relapses; and how are patients handling these novel agents long-term. This will lead to setting up guideposts on how to develop newer classes of drugs and how to improve upon them, and improve upon the current standard of care for both newly diagnosed and relapsed/refractory myeloma patients. Overall, I think this registry is important. It is still only one-fourth accrued, so we are hoping that we will have more mature data presented by the authors at upcoming meetings.

Thank you for viewing this activity.

ABSTRACT

Boccadoro M, Usmani S, Chari A, et al. A Global Treatment Standard in Multiple Myeloma (MM) Remains Elusive Despite Advances in Care Over 15 Years: First Results from INSIGHT MM, The Largest Global Prospective, Observational MM Study. EHA 2018. Abstract PS1300.

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