

How do I dose daratumumab, lenalidomide and dexamethasone in the combination regimen?

Carol Ann Huff, MD

Associate Professor of Oncology and Medicine
Director, Multiple Myeloma Program
Medical Director, Department of Oncology
Sidney Kimmel Comprehensive Cancer Center at Johns Hopkins
Baltimore, Maryland

Hi, I am Dr. Carol Ann Huff. Over the next few minutes, I will discuss with you how I dose daratumumab in conjunction with lenalidomide and dexamethasone in patients with multiple myeloma. The administration of daratumumab in combination with lenalidomide and dexamethasone was found to have superior responses to lenalidomide and dexamethasone alone in the POLLUX study. I dose daratumumab at the standard dosing of 16 mg/kg, weeks 1 through 9, followed by every other week through the end of the 6th month, and then monthly thereafter.

The premedications recommended in the [package insert](#) include corticosteroids in the form of methylprednisolone in combination with acetaminophen and antihistamines. Our institution has found that it is quite helpful to include montelukast in conjunction with this, once-weekly with the first 1 to 2 months of therapy, to help reduce infusion-related reactions. The lenalidomide dosing is 25 mg, days 1 through 21 on an every 28-day cycle. If dose reductions are needed based on renal dysfunction or cytopenias, those are made accordingly. The dexamethasone dosing is given weekly, weeks 1 through 3 out of every 4 weeks, at a dose of 20 to 40 mg orally for patients receiving this combination therapy.

Patients generally tolerate this regimen quite well, and responses are typically seen within 1 to 2 months of beginning treatment.