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**Will new MM diagnostic criteria cause confusion in risk stratifying smoldering and active myeloma?**

Welcome to *Managing Myeloma*. My name is Sergio Giralt, and I am the Melvin Berlin Family Chair for Myeloma Research at Memorial Sloan Kettering Cancer Center. I am also a professor of medicine at Weill Cornell Medical College and the chief of the Adult BMT Service at Memorial Hospital in New York City. I am frequently asked, “Will the new diagnostic criteria for multiple myeloma cause confusion between risk of progression assessment, like biomarkers of malignancy, for smoldering myeloma and risk stratification for active myeloma?” The short answer is yes, and that is why this activity in *Managing Myeloma* is so important. We think that the new criteria of the IMWG will make a significant difference in patients who have very high risk of developing CRAB criteria. Most of us who practice in the field of myeloma would like the patients who are at high risk of developing either calcium abnormalities, renal abnormalities, anemia, or bone disease be identified early and start treatment early before these complications occur. The new SLiM characteristics, or SLiM parameters [ $\geq 60\%$  clonal plasma cells by bone marrow biopsy; sFLC involved:uninvolved ratio  $\geq 100$ ;  $>1$  lesion  $\geq 5$  mm by MRI] will actually allow us to start treatment early in patients who are expected to develop CRAB criteria within 12 to 24 months. We know that this causes confusion in the field, and we hope that activities such as what we will be doing in *Managing Myeloma*, will help the practicing physician understand better and provide better treatment for their patients. Thank you for viewing this activity. For additional resources, please view the other educational activities on *ManagingMyeloma.com*.

Please view the [Updated Criteria for the Diagnosis of Multiple Myeloma](#).