

Myeloma

Update on Treatment From the American Society of Hematology (ASH®) Annual Meeting

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Meet our guest speaker **William Bensinger, MD**



“Thanks to the combinations of new drugs and the use of autologous [stem cell] transplant...many patients can now [live] 10 years or more with this disease [myeloma]...15 years ago the median survival was three years,” explains Dr. William Bensinger, Director of the Autologous Bone Marrow Transplant program at Seattle Cancer Care Alliance. In a program sponsored by The Leukemia & Lymphoma Society (LLS), Dr. Bensinger discussed myeloma, its treatment, and treatment updates coming out of the 2014 ASH annual meeting.

Managing the Disease

The goals of therapy are to control the disease activity in myeloma and improve disease-related symptoms, like bone damage, pain, and fractures.

Traditional treatments used for myeloma are autologous stem cell transplantation, steroids, alkylating agents, and anthracyclines. Two new classes of drugs are immunomodulatory drugs, such as thalidomide (Thalomid®), lenalidomide (Revlimid®), and pomalidomide (Pomalyst®), and proteasome inhibitors, such as bortezomib (Velcade®) and the more recently approved carfilzomib (Kyprolis®).

Highlights From ASH

At ASH, there were a number of clinical trials that studied carfilzomib in combination with other drugs for either initial therapy or for relapsed myeloma.

There are a number of new drugs under development that look very promising, such as oral forms of bortezomib and carfilzomib like marizomib, oprozomib, and ixazomib.

According to Dr. Bensinger, the most exciting new treatments at the 2014 ASH annual meeting were the

monoclonal antibodies (mAbs) elotuzumab, daratumumab, and SAR650984. All three have substantial single-agent activity and could be game changers in the treatment landscape. Elotuzumab may be the first of the mAbs to reach approval. He explained that these therapies will likely work even better in combination with other drugs.

Treatment-related side effects can occur with many of these drugs but can be managed. “In terms of your treatment, it’s very important to involve all the members of your team,” explained Dr. Bensinger. This includes your medical oncologist and other doctors, nurses, pharmacists, dietitians, physical therapists, and social workers.

Dr. Bensinger also highlighted the importance of individualizing care. Age, genetics, kidney function, overall health, and convenience are all important factors in determining a patient’s proper treatment.

“Clinical trials are extraordinarily important, and they’re critical to the successes that we’ve made in the treatment of myeloma,” Dr. Bensinger emphasized. All of the treatments for myeloma, such as pomalidomide and carfilzomib, were approved because of patient participation in clinical trials. New mAbs, oral proteasome inhibitors, and other drugs will only succeed if patients participate in these trials. Clinical trials can also be beneficial to patients because they are given access to new drugs before they are commercially available.

For more information, the LLS provides educational materials and assistance to patients with myeloma.

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Visit www.LLS.org/chat.

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The survival rate for myeloma more than tripled since the 1960s.

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Survival story: Jeanette



See Yourself Winning

After stepping off a curb at work one day, Jeanette's femur bone suddenly broke in half. When she tried to stand up, she broke a bone in her hip. At the hospital, X-rays revealed a tumor in Jeanette's knee. Shortly thereafter, an oncologist told her that she had stage 2 multiple myeloma.

Jeanette was an active, 53-year-old woman who ran and worked out at the gym for at least an hour every day. She hardly ever got sick and she relied on staying healthy to balance her busy schedule of working and caring for her ailing mother. Jeanette was surprised by her diagnosis, as she is one of the few patients who had not experienced the usual symptoms of multiple myeloma.

"It was just like a dark horse. It came out of nowhere," she recalls. Yet, Jeanette felt "it was a blessing instead of a curse" that her femur broke because her cancer was found at an earlier stage.

"You've got to believe you see yourself winning."

After she received the diagnosis, Jeanette—who was always a fighter—asked the doctor, "Is there any cure for this, or is this something that we need to work together on and make a plan to fight this thing? Because I'm not gonna let it win."

Although Jeanette told her sister and son about her diagnosis, she initially kept the news from her mother because of her mother's poor health.

"I hated to lie to her, but we didn't want her to get all stressed out because of her heart."

Jeanette's doctor in Shreveport, LA, suggested several treatment options and recommended that she consider a stem cell transplant. Although the doctors were able to harvest more than enough stem cells, Jeanette chose to delay the transplant because of the impact to her immune system that would require her to be in isolation for several weeks and limit her ability to care for her mother. Jeanette opted for radiation treatments and chemotherapy instead.

She experienced a metallic taste in her mouth from the radiation treatment, but did not experience any peripheral neuropathy or other side effects from the chemotherapy. Since she was also seeing an orthopedic specialist for her broken leg and taking muscle relaxers and pain medications that upset her stomach, Jeanette inquired about alternative pain-relief options. Her doctor suggested she try yoga and meditation. Jeanette was surprised to discover that mindfulness meditation was helpful for her. "It's like self-hypnosis to your brain. I spoke to the pain. I would tell myself 'you're not in pain.'"

A nurse encouraged Jeanette to join a patient support group because she thought Jeanette's positivity would be helpful to others. The nurse told her, "When you come in this treatment room, it's just like you bring a ray of light with you." The support group stays in touch with each other every day to encourage one another. Jeanette stays very active in the group, often giving talks and sharing what she has learned.

Jeanette recommends other patients learn as much as possible about their disease from their doctor and other sources. "From there, you will be more informed, more aware, and stronger. You've got to believe you see yourself winning."

Jeanette eventually told her mom about her diagnosis when the time was right. Her mom passed away soon after. Jeanette is currently in remission and has just had a stem cell transplant.