



Newly Diagnosed Multiple Myeloma: Where to Begin

September 11, 2024

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Resources

- Resource tab includes
 - Speaker bios
 - Copy of the slide presentation
 - Exhibit Hall

**Submit your questions
throughout the program!**

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Delivering On Our Mission

The MMRF is committed to acting with urgency to ensure that patients have effective, more personalized treatments available when they need them and the resources necessary to increase their survival and improve their quality of life.



Accelerate the Development of Novel Therapies

Invest in companies with early-stage assets (Myeloma Investment Fund) and speed clinical trials through MMRC in patient populations with greatest unmet need (Horizon).



Driving More Personalized, Optimal Treatment Approaches

Deploy resources and funding to drive research focused in areas of high unmet need, generate hypotheses for clinical exploration (TRU and MAC) and make all MMRF-generated and/or supported data available to researchers (Virtual Lab).



Empower Patients and the Entire Community

Provide high-quality education to patients, caregivers, and healthcare providers, as well as access to nurse navigators with a strong focus on addressing the needs of traditionally underserved patients; fund Fellows and other initiatives to increase the number of BIPOC (especially Black) researchers and clinicians (Scholars).

Speakers



Ajay K. Nooka, MD, MPH
Winship Cancer Institute
Emory University School of Medicine
Atlanta, GA



Urvi A. Shah, MD, MS
Memorial Sloan Kettering
Cancer Center
New York, NY



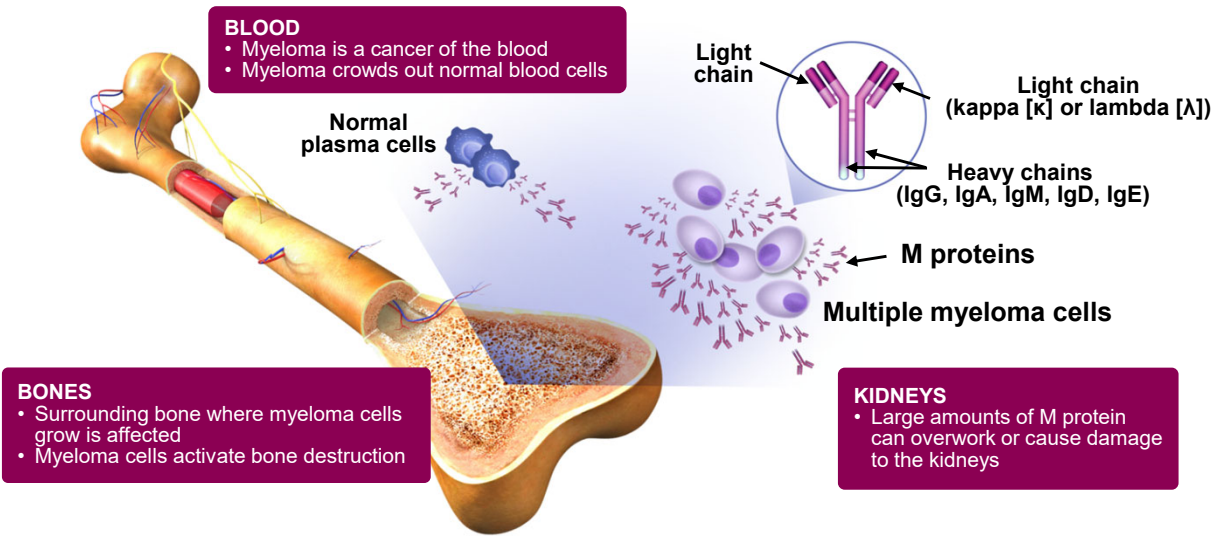
Newly Diagnosed Multiple Myeloma: Overview of Diagnosis and Treatment

Urvi A. Shah, MD, MS

Memorial Sloan Kettering Cancer Center
New York, NY

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Multiple Myeloma Affects Your Bones, Blood, and Kidneys



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Demographic Risk Factors: Multiple Myeloma

Older age

Male sex

Obesity

Race: 2× incidence in African Americans

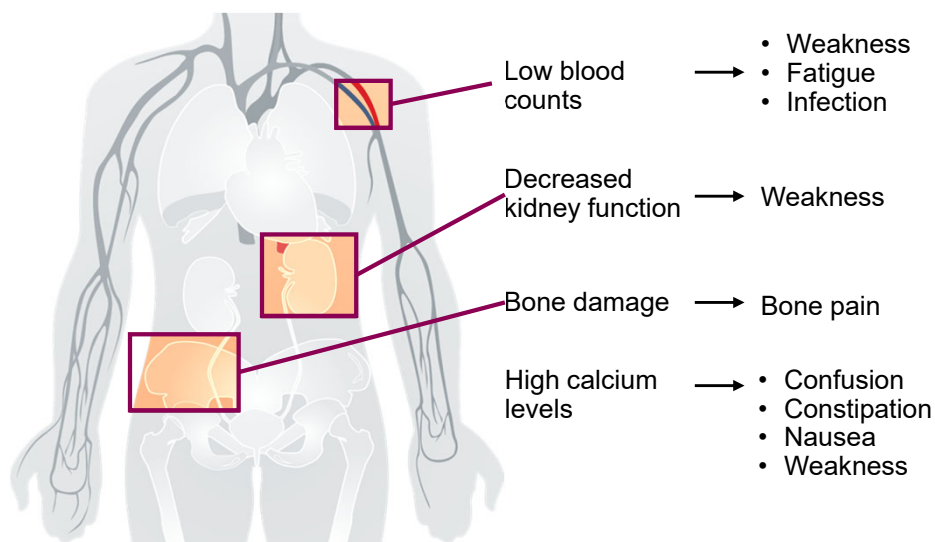
Family history

- One first-degree relative with multiple myeloma
- Relatives of multiple myeloma patients have more monoclonal gammopathy of undetermined significance (MGUS)
- Current recommendation is to not screen families

Schinasi LH et al. *Br J Haematol.* 2016;175:87. Thordardottir M et al. *Blood Adv.* 2017;1:2186.

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Effects of Myeloma and Common Symptoms



About 10% to 20% of patients with newly diagnosed myeloma do not have any symptoms.

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Get on the Right Track

Key steps for the best possible care for myeloma patients.

THE RIGHT TRACK



Right Team

Access experts and centers that have extensive experience treating multiple myeloma



Right Tests

Get the information, tests and precise diagnoses to make the right treatment decisions



Right Treatment

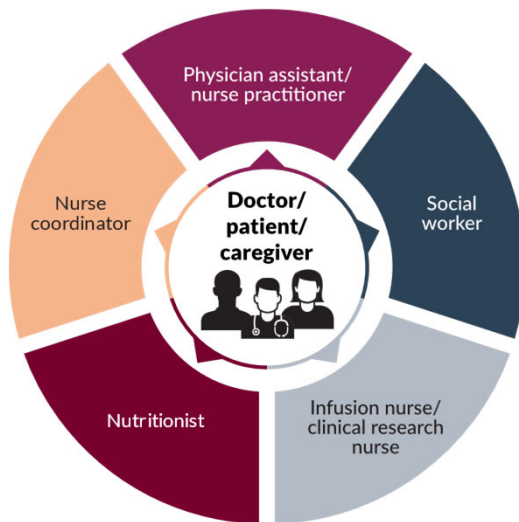
Work with your team to decide on the best treatment plan and identify clinical trials that are right for you

Share at Every Step

You can help yourself while helping others.

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The Right Team



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The Right Tests: Common Tests Conducted in Myeloma Patients

Blood tests Urine tests



- Confirms the type of myeloma or precursor condition
- Includes complete blood count, comprehensive metabolic profile, beta-2-microglobulin, quantitative immunoglobulins, urinalysis, among others

Bone marrow biopsy



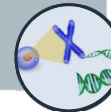
- Confirms diagnosis of myeloma
- Determines how advanced the myeloma or precursor condition is

Imaging tests



- Detects the presence and extent of bone disease and the presence of myeloma outside of the bone marrow
- Includes x-ray, MRI, CT scan, PET scan

Genetic tests

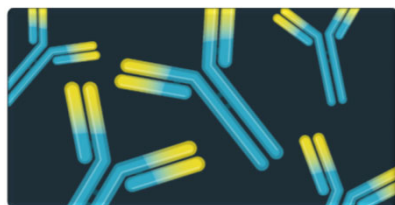


- Conducted using myeloma cells from biopsy and gives insights into risks and prognosis
- Includes karyotyping, FISH, DNA sequencing

MRI, magnetic resonance imaging; CT, computed tomography; PET, positron emission tomography; FISH, fluorescence in situ hybridization; DNA, deoxyribonucleic acid

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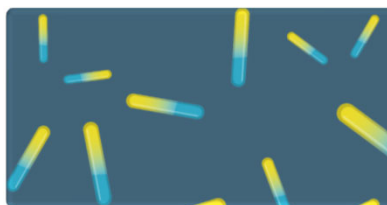
Types of Multiple Myeloma Based on Blood or Urine Tests



Intact M protein

- Named for the type of immunoglobulin and light chain pair; for example, IgG kappa (κ) or IgG lambda (λ)

80%



Light chain only

- Also known as Bence Jones protein
- Renal failure more common in light chain multiple myeloma

20%



Non-secretory

- No M protein present

3%

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Multiple Myeloma Prognosis and Risk





R-ISS, Revised International Staging System; β 2M, beta-2 microglobulin; LDH, lactate dehydrogenase; R2-ISS, second revision of the International Staging System
 Palumbo A et al. *J Clin Oncol.* 2015;33:3459.
 D'Agostino M et al. *J Clin Oncol.* 2022;40:3406.


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Getting the Right Treatment: Goals of Multiple Myeloma Therapy

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Reduce disease burden as low as possible with the aim of reducing the number of myeloma cells to undetectable levels.
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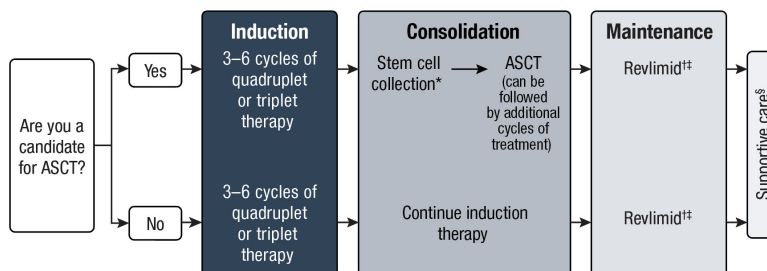
Improve quality of life with as few treatment side effects as possible.
- 

Provide the longest possible period of response before relapse.
- 

Prolong overall survival.

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Overview of Treatment Approach for Active Multiple Myeloma



*The amount of time between when your stem cells are collected and re-infused depends on the timing of your transplant and can vary from days to years, depending on when you choose to undergo the ASCT.

†If you have high-risk markers, additional agents may be given with Revlimid; if you cannot tolerate Revlimid, another treatment (for example, a proteasome inhibitor) may be given.

‡In the U.S., maintenance is typically given until progression, but studies are evaluating stopping treatments for patients with deep responses. If you have little or no evidence of disease but are experiencing side effects, discuss with your doctor whether to continue until progression. Dose adjustments are also options.

§Supportive care (care for the prevention and management of treatment side effects) is given throughout treatment.

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Beyond Myeloma Treatment Taking Care of Yourself

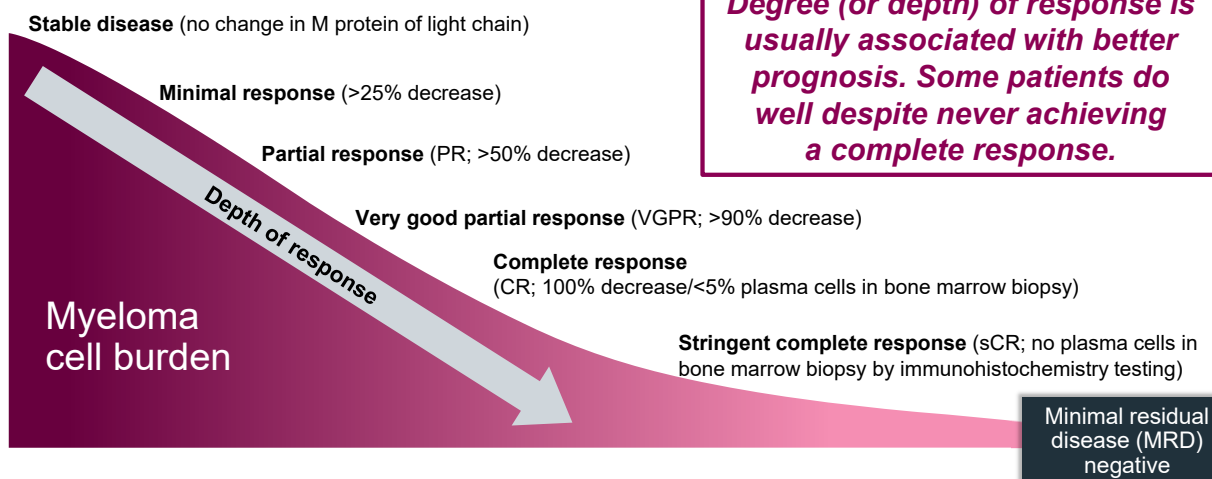
- Proper nutrition
 - Eating a healthy diet high in fiber rich foods (fruits, vegetables, beans, legumes, seeds, nuts and whole grains) can boost energy and mood and keeps your immune system in peak shape.
 - Your team may recommend a nutritionist
- Exercise
 - Getting regular exercise can improve your physical and mental health
- Mental health and emotional support
 - Support groups for multiple myeloma patients are available
 - Stress-reducing activities like yoga and meditation can help reduce anxiety
- Sleep
 - Insomnia and fatigue are common
 - Practice good sleep hygiene (routines, no TV or phone screen close to bedtime)



Shah UA et al. *Leukemia*. 2023;37:964.

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Measuring Response to Therapy



Palumbo A et al. *J Clin Oncol*. 2014;32:587. Kumar S et al. *Lancet Oncol*. 2016;17:e328.



Newly Diagnosed Multiple Myeloma: Treatment Specifics

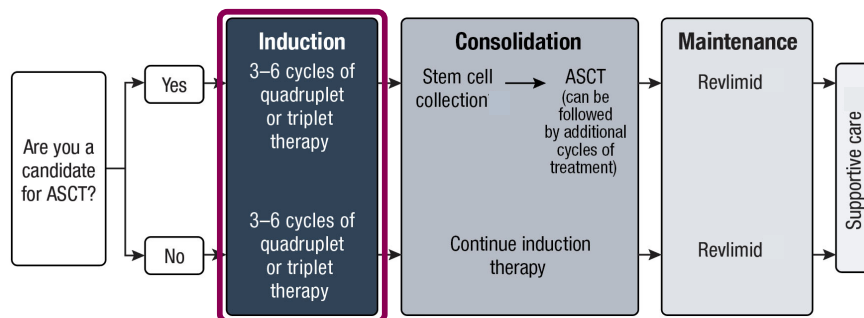
Ajay K. Nooka, MD, MPH

Winship Cancer Institute

Emory University School of Medicine

Atlanta, GA

Treatment Approach: Induction



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Induction Therapy Regimens: Quadruplets and Triplets

Regimen	Abbreviation
Quadruplets	
Darzalex, Velcade, Revlimid, dexamethasone	D-VRd
Darzalex, Kyprolis, Revlimid, dexamethasone*	D-KRd
Sarclisa, Velcade, Revlimid, dexamethasone*†	Isa-VRd
Sarclisa, Kyprolis, Revlimid, dexamethasone*	Isa-KRd
Triplets	
Velcade, Revlimid, dexamethasone‡	VRd
Kyprolis, Revlimid, dexamethasone*	KRd
Darzalex, Revlimid, dexamethasone	DRd

*Not currently FDA approved. †FDA approval decision expected September 2024. ‡For patients with poor kidney function, cyclophosphamide is sometimes used in place of Revlimid (CyBoRd).

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Induction Therapy: Administration Mode and Frequency

How is Revlimid administered?

- Oral capsule
- 25 mg* once daily for 21 days out of a 28-day cycle (3 weeks on, 1 week off)

How is Darzalex administered?

- Intravenous or subcutaneous injection†
- Once a week for the first 8 weeks then every 2 weeks for 4 months (first dose can be split over 2 days)

How is Velcade administered?

- Subcutaneous injection
- Once or twice a week

How is Kyprolis administered?

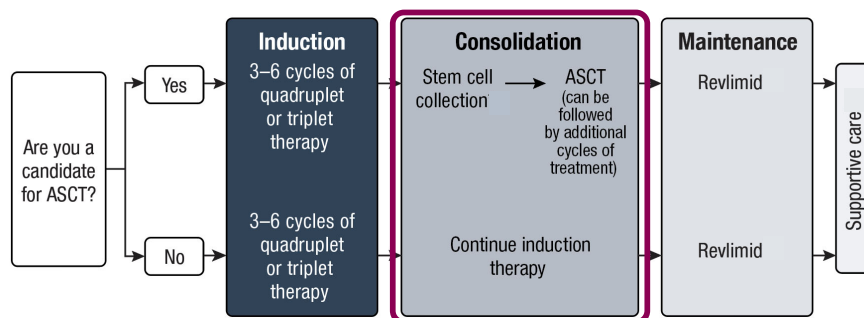
- Intravenously
- Once weekly or twice weekly as a 10- or 30-minute infusion

How is Sarclisa administered?

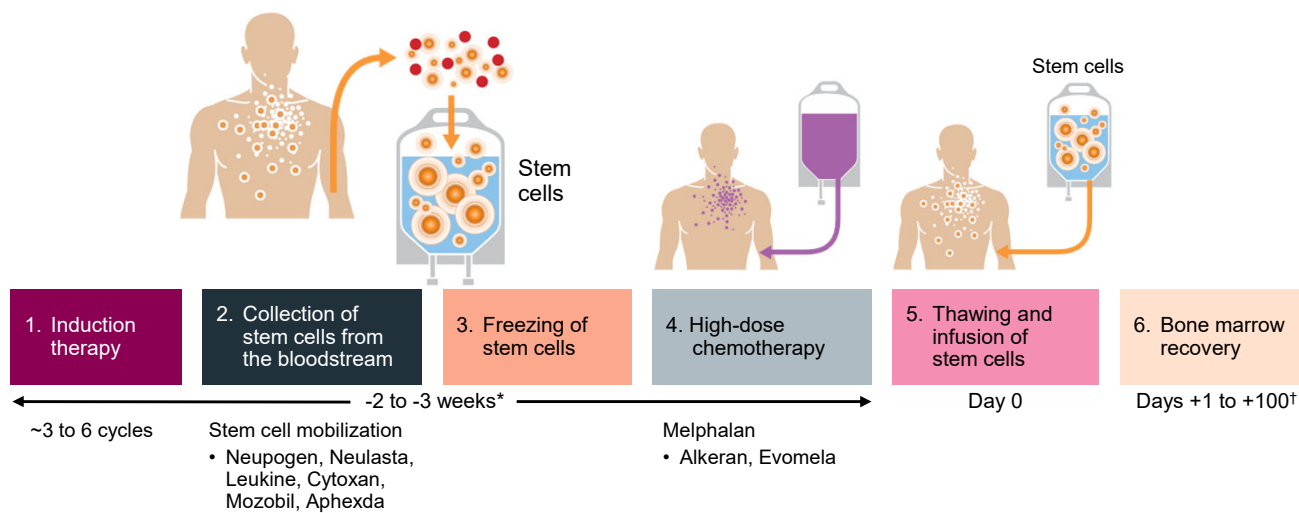
- Intravenously
- Once a week for the first 4 weeks then every 2 weeks thereafter

Intravenous, injection into a vein; subcutaneous, injection under the skin
 *Dose may be adjusted as needed. †Dose schedule varies slightly depending on combination and formulation.

Treatment Approach: Consolidation



Autologous Stem Cell Transplantation (ASCT)

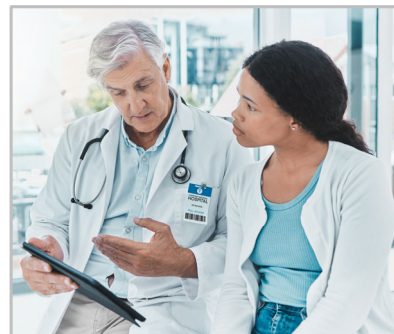


*The weeks leading up to the transplant; †The days after the transplant.

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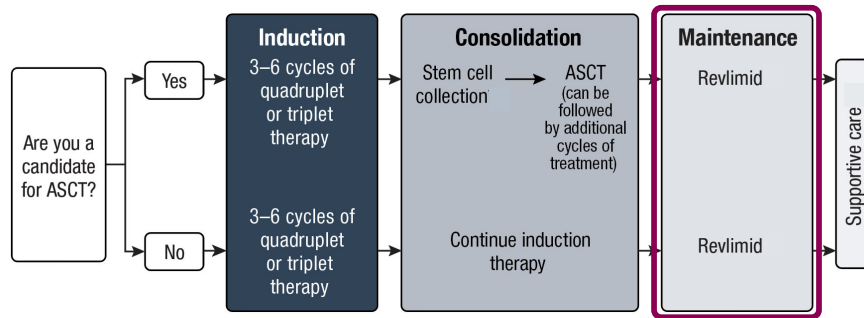
ASCT Considerations

- Suitability for ASCT is based on overall health
 - This includes how active you are and how many comorbidities you have
 - If you are a candidate, you are encouraged to have stem cells collected so that the cells are available if you choose to undergo the process at some point
- You will need a caregiver after ASCT
 - Helps manage medical care and household tasks for several weeks or months
- Recovery takes several months
 - You may feel tired and weak
 - You will be off work for 3 to 6 months



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Treatment Approach: Maintenance



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Maintenance Therapy

Successful maintenance therapy must...

Be convenient

Be safe and well tolerated long term

Not interfere with the use of other future treatments



	Preferred	Recommended	Certain circumstances
Candidates for transplant	• Revlimid*	• Velcade	• Velcade-Revlimid • Kyprolis-Revlimid • Darzalex ± Revlimid • Ninlaro
Not a candidate for transplant	• Revlimid*	• Velcade	• Velcade-Revlimid • Ninlaro

*Category 1 recommendation. Based on high-level evidence, there is uniform NCCN consensus that the intervention is appropriate. National Comprehensive Cancer Network Guidelines Version 4.2023. Multiple Myeloma.

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Minimal Residual Disease (MRD) Testing Requires Bone Marrow Biopsy + Imaging Tests

TEST RESULTS

If standard tests find no myeloma remaining in your body, your doctor may test you for the presence of MRD.	MRD positive  Myeloma cells are still detected	MRD negative  Myeloma cells are not detected	MRD negativity has been associated with longer time until disease progression and longer survival.
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MGUS, monoclonal gammopathy of undetermined significance; SMM, smoldering multiple myeloma

Questions to Ask Your Care Team

Treatment



What tests do I need before we can decide on treatment?



What are my treatment options?



If my myeloma is considered high risk, what are the preferred treatment options?



Will I experience any side effects from my treatment?



How are the treatments administered (infusion, injection, or pill)?



How long should I expect to be on this treatment?



Is there a clinical trial that might be appropriate for me?



Am I eligible for a stem cell transplant? If so, should I get one?

Support Services



What support services are available to me?



What financial resources are available to me?



Are there any myeloma patient support groups available to me? Are any in my area?



What is the best way for me to contact you in case of emergency?



Should I tell my other doctors/my dentist about my diagnosis?

Summary

- Survival rates are improving because of new drugs and new combinations of drugs, including immune therapies and especially monoclonal antibodies.
- Quadruplet regimens are becoming the new standard treatment for newly diagnosed myeloma patients.
- The body of evidence from clinical trials indicates that maintenance therapy extends time to disease progression and survival.
- MRD is useful as an end point in clinical trials helping to expedite new drug approval in myeloma. Studies examining its role in guiding therapy are ongoing.
- The treatment paradigm will continue to change with the approval of additional novel agents.

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Questions & Answers

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Patient Education Programs 2024

Multi-channel offerings

- Patient Summits
- Patient Webinars
- Myeloma Matters Podcasts
- FB Livestreams
- Conference Highlights
- Nursing Fireside Chats
- The MMRF Patient Toolkit
- High Impact Topic Videos
- Fast Facts in Myeloma Infographics

PATIENT EDUCATION

PATIENT SUMMIT
Seattle, WA
Saturday, November 16, 2024
In-person: 8:00 AM – 12:30 PM PT
Online: 9:00 AM – 12:30 PM PT
This event can be attended in-person, or if you prefer, you can join online.

SAVE THE DATE: 11/8
Patient Webinar
Clinical Studies
Friday, November 8, 2024
12:00 PM ET

MYELOMA matters

MULTIPLE MYELOMA TREATMENT OVERVIEW

AUTOLOGOUS STEM CELL TRANSPLANT

LEARN YOUR LABS

Multiple Myeloma Personalized Medicine: What You Need to Know

Clinical Studies in Multiple Myeloma: What You Need to Know

Bone Health and Multiple Myeloma: What You Need to Know

Multiple Myeloma High-Impact Topic: AUTOLOGOUS STEM CELL TRANSPLANT

Multiple Myeloma High-Impact Topic: LEARN YOUR LABS

MMRF MULTIPLE MYELOMA Research Foundation

themrf.org

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MMRF Patient Resources

EXPECT GUIDANCE.

MMRF Patient Navigation Center

- Information & Resources
- Expert Advice
- Support

MMRF MULTIPLE MYELOMA Research Foundation

MMRF Patient Navigation Center

You and your care team will have many decisions to make along your treatment journey. The Patient Navigation Center is a space for multiple myeloma patients and their caregivers to connect with patient navigators – who are professionals specializing in oncology – for guidance, information, and support. You can connect with a patient navigator via phone, or email. Whatever questions you may have, our patient navigators are here to help.

MMRF Patient Navigators include:

- Grace Allison, RN, BSN, OCN, RN-BC
- Brittany Hurtmann, RN, BSN
- Edin Mensching, RN, BSN, OCN

THE RIGHT TRACK

Get on the right track for you

The MMRF's Right Track program puts you on the path to the best results for you.

- Right Team**
Access experts and centers that have extensive experience treating multiple myeloma.
- Right Tests**
Get the information, tests, and precise diagnoses to make the right treatment decisions.
- Right Treatment**
Work with your team to consider the best treatment plan and identify clinical trials that are right for you.

Contact the Patient Navigation Center Today
Looking for guidance? We're here to help.
Monday – Friday | 9:00am – 7:00pm ET
Phone: 1-888-841-MMRF (6673) | Online: TheMMRF.org/PatientNavigationCenter
Email: patientnavigator@themrf.org

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Myeloma Mentors® allows patients and caregivers the opportunity to connect with trained mentors. This is a phone-based program offering an opportunity for a patient and/or caregiver to connect one-on-one with a trained patient and/or caregiver mentor to share his or her myeloma journeys and experiences.

No matter what your disease state—smoldering, newly diagnosed, or relapsed/refractory—our mentors have insights and information that can be beneficial to both patients and their caregivers.

Contact the Patient Navigation Center at 888-841-6673 to be connected to a Myeloma Mentor or to learn more.

Join the MMRF Community!

National Walk/Run Program 

- Twin Cities | 9.14.24 Atlanta | 10.26.24
Detroit | 9.21.24 Tampa | 11.2.24
Washington D.C. | 9.28.24 Dallas | 11.16.24
New York City | 10.5.24 Houston | 11.23.24
Boston | 10.12.24 Scottsdale | 12.7.24
Philadelphia | 10.19.24 National Virtual | 12.14.24

Other MMRF Event Programs

- Moving Mountains for Multiple Myeloma (mountain icon)
Half and Full Marathons (t-shirt icon)
Bike/Road to Victories (bicycle icon)
Create Your Own Fundraiser (balloon icon)



Upcoming Patient Education Events

Save the Date

Program	Date and Time	Speakers
Expert Session on IMS Highlights <i>Webinar</i>	Wednesday, October 9, 2024 10:00 AM ET	Nikhil Munshi, MD A. Keith Stewart, MBChB
Newly Diagnosed Multiple Myeloma <i>Livestream</i>	Thursday, October 17, 2024 3:00 PM ET	Noa Biran, MD Ann McNeill, APN
Clinical Studies <i>Webinar</i>	Friday, November 8, 2024 12:00 PM ET	Brandon Blue, MD Faith E. Davies, MBBCh, MD
MMRF Patient Summit <i>Hybrid Event in collaboration with the Fred Hutch Cancer Center</i>	Saturday, November 16, 2024 8:00 AM – 12:30 PM PT	Andrew J. Cowan, MD Kara Cicero, MD, MPH Andrew Portuguese, MD
Understanding BCMA-Targeted Therapies <i>Webinar</i>	Tuesday, December 3, 2024 6:00 PM ET	Cesar Rodriguez, MD Jing Christine Ye, MD

For more information or to register,
visit themmrf.org/educational-resources



Resources

- Resource tab includes
 - Exhibit Hall
 - Speaker bios
 - Copy of the slide presentation

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Thank you!

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