



iPads

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-View slides

-Answer questions

-Take notes

-Submit questions to panel

-Program evaluation

Submit your questions throughout the program!

Throughout the Summit, use the same e-mail address to log on to any iPad.

Program Faculty Murali Janakiram, M.S., MD Cherry Lou Rudge, NP Associate Professor **Nurse Practitioner** Department of Hematology & Hematopoietic City of Hope Orange County Cell Transplantation Lennar Foundation Cancer Center City of Hope Orange County Amrita Krishnan, MD Director, Judy and Bernard Briskin Multiple Myeloma Center Executive Medical Director, Hematology Professor, Department of Hematology & Hematopoietic Cell Transplantation City of Hope Orange County Sarah S. Lee, MD Assistant Clinical Professor **Division of Multiple Myeloma** Department of Hematology & Hematopoietic Cell Transplantation City of Hope Orange County © Copyright 2025 | Multiple Myeloma Research Foundation, Inc.

Summit Objectives

- Know the standard of care options available for your stage of the myeloma journey
- Make more-informed treatment decisions to better manage your myeloma
- Discuss with your care team whether a clinical trial is a good option for you
- Be aware of and utilize resources provided by the MMRF and other reputable sources

Summit Agenda					
Time (PT)	Торіс	Speakers			
9:00 – 9:15 am	Introduction to MMRF	Chris Peña, PhD			
9:15 - 9:30 am	Welcome	Amrita Krishnan, MD			
9:30 – 9:45 am	Smoldering in Multiple Myeloma	Amrita Krishnan, MD			
9:45 - 10:00 ам	Treatment for Newly Diagnosed Multiple Myeloma	Sarah S. Lee, MD			
10:00 - 10:20 ам	Q&A Session	All Faculty			
10:20 – 10:35 ам	Break				
10:35 – 10:50 ам	Treatment for Relapsed/Refractory Multiple Myeloma	Murali Janakiram, MD			
10:50 – 11:05 am	Managing Symptoms and Side Effects	Cherry Rudge, NP			
11:05 – 11:20 ам	Q&A Session	All Faculty			
11:25 – 11:55 ам	Lunch				
12:00 - 12:15 рм	Patient Journey	Simon Bray, Patient Advocate			
12:15 - 12:30 pm	Closing Remarks	Veronica Medd, MA			



The MMRF's Mission, Vision & Strategic Plan Objectives

We are not satisfied with current progress; our level of urgency and commitment to achieving cures has never been greater.

Our Mission

To accelerate a cure for each and every multiple myeloma patient.

Our Vision

A world free of multiple myeloma.







MMRC Horizon One Clinical Trial

Goal of Horizon One

• Test how safe treatments and treatment combinations are and how well they work

Who is eligible

Relapsed/refractory patients

What to expect

- Patients will receive 12 months of Tecvayli (teclistimab) treatment at set cycles
- Patients responding well after one year will be randomized to three different arms, testing how effective different dosing regimens of Tecvayli are

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Enrollment Information

- 9 treatment sites, including City of Hope
- Contact Ann Morales, amamanee@coh.org







Question

At what stage is your myeloma? (If you are a caregiver, what is the stage of the patient's myeloma?)

- 1. Newly diagnosed
- 2. Active disease, on treatment
- 3. Relapsed/refractory
- 4. Remission: still on therapy
- 5. Remission: not on therapy
- 6. MGUS or smoldering myeloma
- 7. I don't know.

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Question Is a Multiple Myeloma specialist part of your care team? Yes, one here at City of Hope (Orange County or other sites) Yes, elsewhere No

15

Question

What has your most recent treatment been?

- 1. Quadruplet/triplet therapy
- 2. CAR T-cell therapy
- 3. Bispecific antibody therapy
- 4. Stem cell transplant
- 5. Traditional chemotherapy
- 6. Other
- 7. Not applicable

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If you have SMM, you will have additional tests t marrow biopsy and blood work.	o see if you have high-risk or low-risk SMM, including a bone
The 20/2/20 criteria are used to determine your risk:	
 20 > Plasma cells in the bone marrow over 20% 	
 2 > M protein in the blood over 2 g/dL 	
• 20 > A free light-chain ratio of more than 20	
Based on these criteria. SMM is divided into risk	groups:
·	
Low-risk	High-risk





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Help improve how we understand and treat SMM

Research is underway to prevent SMM from becoming active MM.

Observational studies are research studies in which researchers collect information from participants or look at data that was already collected. In observational studies, researchers follow groups of people over a period of time.

PCROWD

For People with SMM:

Who can join: People with MGUS and SMM or other precursor conditions

What is the goal?

To develop new therapies that prevent precursor conditions like MGUS and SMM from turning into MM

To learn more:

precursor@partners.org 617-582-8664

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For close family relatives of people with SMM:

Who can join:

- Black men and women
- Parents, siblings, children of people with SMM, another precursor condition, or a blood cancer

What is the goal?

To prevent MM in people who may be at increased risk of the disease

33

To learn more:

www.enroll.promisestudy.org









Question

Have you had a stem cell transplant?

- a) No, but I will soon!
- b) No, but I am considering one (or my doctor is discussing with me).
- c) No, my doctor tells me I am not a candidate.
- d) Yes
- e) Not applicable

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Multiple myeloma and its precursor conditions involve plasma cell growth

Plasma cells are cells in the bone marrow that make antibodies.

- Healthy plasma cells help your body fight infections
- Abnormal plasma cells (myeloma cells) make antibodies called monoclonal proteins (M proteins)
- Myeloma cells crowd out normal cells in the bone marrow, overproducing M proteins which affects bone, kidney, and overall health and can cause:
 - Anemia
 - Infections
 - Bone damage
 - Kidney issues







The Right Tests: Common Tests Conducted in Myeloma Patients

Test	Purpose
Blood and urine	Blood and urine tests can confirm multiple myeloma, monitor the effects of treatment, and detect how myeloma affects the blood and kidneys
Bone marrow biopsy	A bone marrow sample might show multiple myeloma cells, helping to diagnose and monitor the disease
Imaging	X-rays, MRIs, CT scans, and PET scans can show damage to bones caused by multiple myeloma and potential spread
Genetic testing	Genetic testing is conducted on myeloma cells from a biopsy and can gives insights into risks and disease progression
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Summary

- To get the best myeloma care, patients should find a care team, understand necessary tests, and work with their team on a treatment plan.
- Blood tests and bone marrow biopsies help determine how well patients respond to treatment.
- The standard of care for newly diagnosed multiple myeloma involves induction, consolidation, and maintenance therapy.
- Overall health, risk of disease returning, and how well a treatment is tolerated can help guide treatment decisions with your care team.

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Namo	What is Paing Testad	Clinical TriaLID #
Name	What is being rested	Clinical Trial ID #
CARTITUDE-6 (Phase III)	New CAR T regimen for newly diagnosed patients: Carvykti (Cilta-cel) + Daratumumab + Bortezomib + Lenalidomide + Dexamethasone	NCT05257083
CA119-0002 (Phase I)	New bispecific therapy: BMS-986453	NCT06153251
Horizon One (Phase II)	New dosing regimens: Tecvayli (Teclistamab)	NCT06171685
D8310C00001 (Phase II)	New CAR T Therapy: GC012F (AZD0120)	NCT05850234
NCI-2020-01962 (Phase II)	New combination therapy with pomalidomide and dexamethasone: Leflunomide + Pomalidomide + Dexamethasone	NCI-2020-01962
	Additional clinical trials at COH can be found here:	
	https://oncore.coh.org/sin/SIPMain	

Questions & Answers Session

All faculty



Question

Have you discussed CAR T-cell therapy as a treatment option for your multiple myeloma with your care team?

- a) Yes, I have already received CAR T therapy.
- b) Yes, I am planning to receive CAR T therapy.
- c) Yes, we've discussed it, but I'm not planning to receive it.
- d) No, it hasn't been discussed.
- e) I'm not sure / I don't remember.
- f) Not applicable









If you are refractory to	Your specialist might recommend
Darzalex or Sarclisa	Kyprolis (Carfilzomib) + Revlimid (Lenalidomide) + Dexamethasone
Velcade (Bortezomib)	Sarclisa (Isatuximab) + Kyprolis (Carfilzomib) + Dexamethasone
Revlimid (Lenalidomide)	Darzalex (Daratumumab) + Velcade (Bortezomib) + Dexamethasone







Side Effect	Symptoms		Onset After CAR T-Cell Infusion	Duration	Treatments
Cytokine release syndrome (CRS)	 Fever Difficulty breathing Dizziness Nausea Headache 	 Rapid heartbeat Low blood pressure 	1–9 days	5–11 days	 Actemra (tocilizumab) Corticosteroids Supportive care
Neurotoxicity (ICANS)	 Headache Confusion Language disturbance 	SeizuresDeliriumBrain swelling	2-9 days	3–17 days	Antiseizure medicationsCorticosteroids







Bispecific Antibodies

What to Expect?

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- Available off the shelf, allowing for immediate treatment
- Does not require lymphodepletion or other preparation
- Administered by subcutaneous (under the skin) injection
- To minimize side effects and to monitor patients closely, first two to three doses are administered in the hospital
- Requires ongoing administration until disease progression or unacceptable side effects



Symptoms and effects	Affected area
Rash, skin peeling	Skin
Nail thinning and loss	Nails
Difficulty swallowing, dry mouth, taste changes	Dral

Considerations with CAR T and Bispecifics

CAR T Cell Therapy

- Single infusion (one and done)
- Potentially persistent
- Hospitalization required
- Dependent on T-cell health (manufacturing failures)
- Bridging therapy often needed to fill time gap (reword)
- Caregiver needed

Bispecific Antibody Therapy

- Off the shelf (immediately available)
- Continuous administration
- Initial hospitalization likely required
- Dependent on T-cell health (T-cell exhaustion)





Objectives

At the conclusion of this presentation, you should be better able to:

- 1. Recognize the main symptoms of multiple myeloma and how they are managed
- 2. Recognize common side effects of multiple myeloma treatments and how they are managed
- 3. Talk to your care team about symptoms or side effects that interfere with dayto-day activities

Treating Bone Disease in Myeloma

Symptom	Treatment			
Spinal fractures	Surgery (vertebroplasty or kyphoplasty) in specific cases where the nervous system may be affected			
Bone loss	 Radiation to destroy myeloma cells Medications to prevent bone breakdown [Xgeva (denosumab), Zometa, (zoledronic acid)] Supplements to support bones (Vitamin D, Calcium) 			
Pain	 Pain management medications, including: Acetaminophen (Tylenol) Corticosteroids (dexamethasone, prednisone) NSAIDs (nonsteroidal anti-inflammatory drugs)* 			
Discuss the right option with your health care team. Please let your care team know if you are experiencing any pain.				
*Prefer to avoid with multiple myelom	a due to increased risk of kidney injury			
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Treating	Kidney Damage in Myeloma	
Symptom	Treatment	
Decreased amount of urine, Increase in creatinine and other proteins	 Fluids Avoid substances that are toxic to kidneys such as Nonsteroidal anti-inflammatory drugs (NSAIDs) Alev Advil/Motrin Plasmapheresis (plasma exchange) Treat other causes Dialysis (severe) 	/e
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Managing side effects while on myeloma treatments: Blood & Cardiovascular

Common Side Effects	Medication(s)	Treatments
Blood clots	 IMIDs: Revlimid, Pomalyst PIs: Velcade 	 Blood thinners (Lovenox; Eliquis; Xarelto) Aspirin
Low blood counts	 Monoclonals: Darzalex, Sarclisa IMIDs: Revlimid/Pomalyst CAR T: Abecma, Carvykti Bispecifics: Tecvayli, Elrexfio, Talvey 	MonitoringDose adjustment
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Managing side effects while on myeloma treatments: Blood & Cardiovascular

Common Side Effects	Medication(s)	Treatments	
Shortness of breath	 IMIDs: Pomalyst PIs: Kyprolis Other: Xpovio 	 Rule out blood clot Dose adjustment	
Hypertension	• Pls: Kyprolis	MonitoringDose adjustment	
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Managing side effects while on myeloma treatments: Peripheral Neuropathy

Common Side Effects	Medication(s)	Treatments
Peripheral Neuropathy (impaired sensation OR burning/tingling in the hands and feet)	 PIs: Velcade, Kyprolis, Ninlaro Monoclonals: Empliciti 	 GABA analogues (Gabapentin or Lyrica) Opioids Acupuncture Dose adjustment
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Managing side effects while on myeloma treatments: Gastrointestinal

Common Side Effects	Medication(s)	Treatments
Constipation	 IMIDs: Revlimid, Pomalyst PIs: Ninlaro Monoclonals: Empliciti Other: Xpovio 	 Stool softeners or Laxatives Fiber Fluids Exercise
Diarrhea	 IMIDs: Revlimid, Pomalyst Pls: Velcade, Kyprolis, Ninlaro Monoclonals: Sarclisa, Empliciti CAR T: Abecma Other: Xpovio 	 Dose adjustment Imodium Cholestyramine*
Nausea	 IMIDs: Pomalyst PIs: Velcade, Kyprolis, Ninlaro Monoclonals: Darzalex, Other: Xpovio 	Anti-nausea medicationsDose adjustment
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Managing side effects while on myeloma treatments: Infections

Common Side Effects	Medication(s)	Treatments
 Infections Upper respiration infections (most common) Urinary Tract Infection 	 IMIDs: Pomalyst Monoclonals: Darzalex, Sarclisa, Empliciti CAR-T Therapy: Abecma, Carvykti Bispecifics: Tecvayli, Elrexfio Other: Xpovio 	 Antibiotics Antivirals Supportive care IVIG - Immunoglobulin
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Managing side effects while on myeloma treatments: Skin

Common Side Effects	Medication(s)	Treatments	
 Rash Dry Skin 	 IMIDs: Revlimid/Pomalyst Bispecifics: Talvey 	 Topical treatments Moisturize OTC Benadryl and Claritin Dose adjustment 	
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Managing side effects while on myeloma treatments: Other

ommon Side Effects	Medication(s)	Treatments
Fatigue	 IMIDs: Revlimid, Pomalyst PIs: Velcade, Kyprolis Monoclonals: Darzalex, Empliciti Bispecifics: Tecvayli, Elrexfio, Talvey, CAR T: Abecma, Carvykti Other: Xpovio 	 Sleep hygiene Regular exercise Conserve energy Dose adjustment
nfusion reactions	• Monoclonals : Sarclisa, Empliciti, Darzalex	 Oral or IV antihistamine Steroid Monitoring Dose adjustment

Beyond Myeloma Treatment: Taking Care of Yourself

Proper nutrition

- Eating a healthy and high fiber diet
- Your team may recommend a nutritionist

Mental health and emotional support

- Support groups are available
- Stress-reducing activities like yoga and meditation can help reduce anxiety

Exercise

Getting regular exercise can improve your physical and mental health

Sleep

• Practice good sleep hygiene (routines, no TV or phone screen close to bedtime)

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Communicating With Your Care Team: Side Effects and Support Services

Talk to your provider about side effects and how to make treatment more tolerable

- 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 an emergency?
- Should I tell my other doctors/my dentist about my diagnosis?

Please take a moment to answer two questions about this presentation.

Questions & Answers Session

All faculty

Closing Remarks

Veronica Bohorquez-Medd, MA Senior Manager, Community Engagement & Education

Save the Date For Upcoming Patient Edu —	ucation Events
Program	Date and Time
Livestream: Considering CAR-T: What You Need to Know	Wednesday, May 14
Webinar: Understanding Bispecifics	Wednesday, May 28
Livestream: Understanding Bispecifics	Wednesday, June 11
For more information or to register, visit themmrf.org/educational-resourc	es com
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