

# International Myeloma Foundation Patient and Family Seminar

**Vienna, Austria**

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# New Development in Diagnosis & Treatments



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International Myeloma Foundation



# What information is required to make a decision?

- Age
- Sex
- Details of myeloma
  - Type
  - Stage
  - Chromosomes.....
- Immediate medical issues: pain; infection;...
- Other medical problems: diabetes; heart disease;...
- Work/ family situation: job; children;...
- Personal preferences

# PROS & CONS: MRI / PET

## MRI

- Very accurate
- Gadolinium enhancement shows active disease
- Very slow to improve with  $R_x$ : 6-9 month "lag"
- Cumbersome to screen whole body

## PET

- Also accurate
- Shows active myeloma
- Some false negatives
- MGUS negative
- Shows early response to treatment
- Maybe **too** sensitive
- CT-PET ideal for whole-body monitoring

# Anatomic/ functional staging

## Integration of Imaging

DURIE/SALMON  
STAGE

PLUS  
upstage

MRI/PET  
Number of lesions

I B

0 - 4

II A or B\*

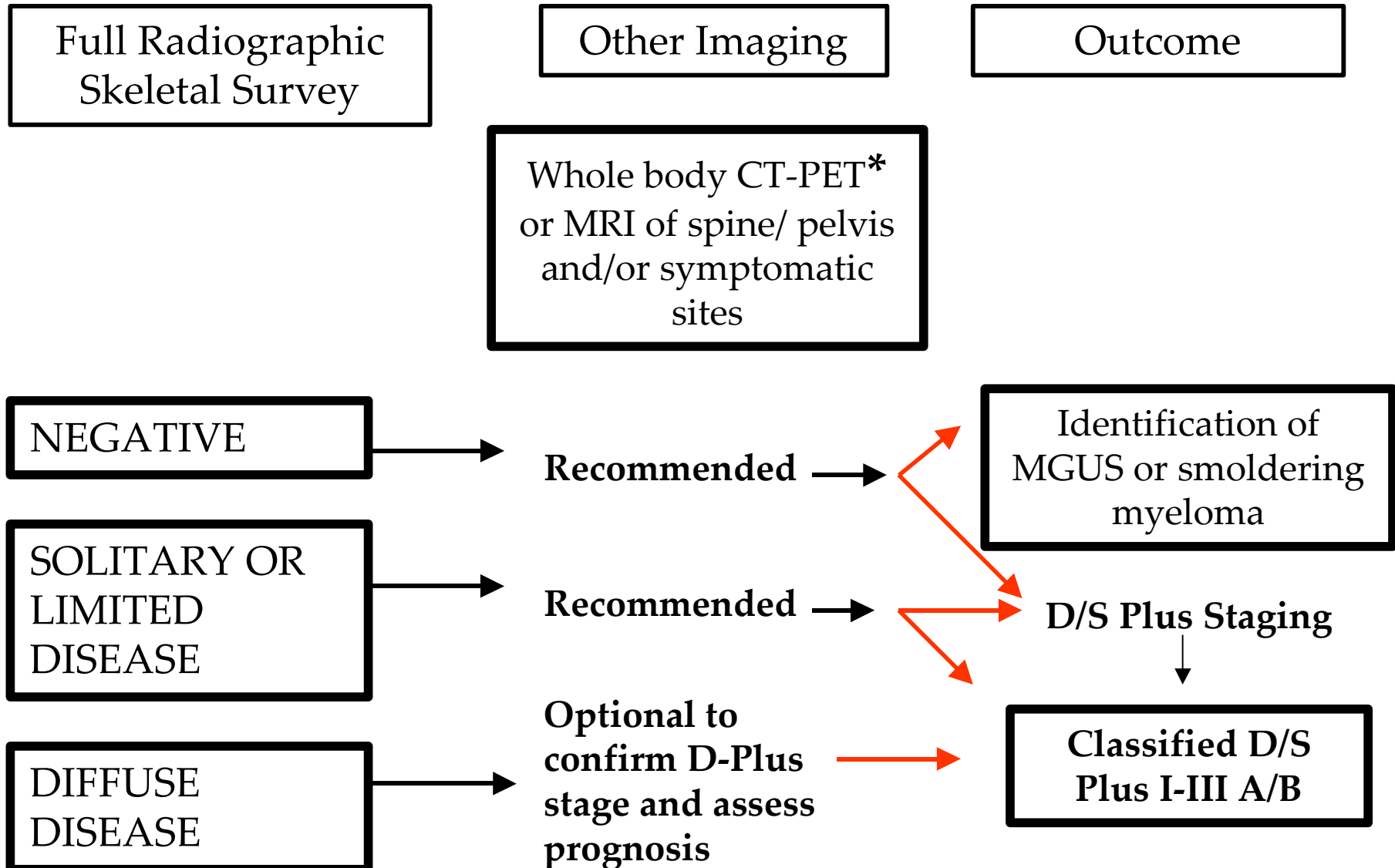
5- 20

III A or B\*

> 20

\* B: creatinine > 2  
EMD on PET or MRI

# Ideal Baseline Diagnostic Evaluation for Staging and Prognosis



# Initial Treatment Strategy

Induction  
Frontline

Consolidation  
Transplant

Maintenance  
or Monitoring

**Induction:**

- VAD or VDD
- Thal + Dex
- MP or MPT

Revlimid + Dex  
Velcade + Dex  
PAD...others

High dose  
chemotherapy

Double transplant  
Novel consolidation

Prednisone / Dexamethasone  
Thalidomide + Dexamethasone

Revlimid + Dexamethasone  
Velcade combo's...others

# Initial Decisions 2006

## Chromosome Testing

If normal

If abnormal

Age <65

Age ≥ 65

No  
Transplant

- Chromosome 13q-
- 4;14
- Or other “high risk” features

Consideration of  
new trial  
including Velcade

- VAD
- Thal/Dex
- Rev/Dex
- Velcade/ Dex

- MP or MPT
- OR**
- Modified Thal/Dex/CTD/  
other combos

Transplant  
1 or 2      Or not

Full  
Transplant  
DURIE      ½ Transplant  
1 or 2      Or not

# Frontline Options

## THERAPY

## CR + PR

**VAD**

**65%**

**Thal/Dex**

**68%**

**Dex**

**46%**

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**Revlimid/ Dex**

**91%**

**Velcade/ Dex**

**88%**

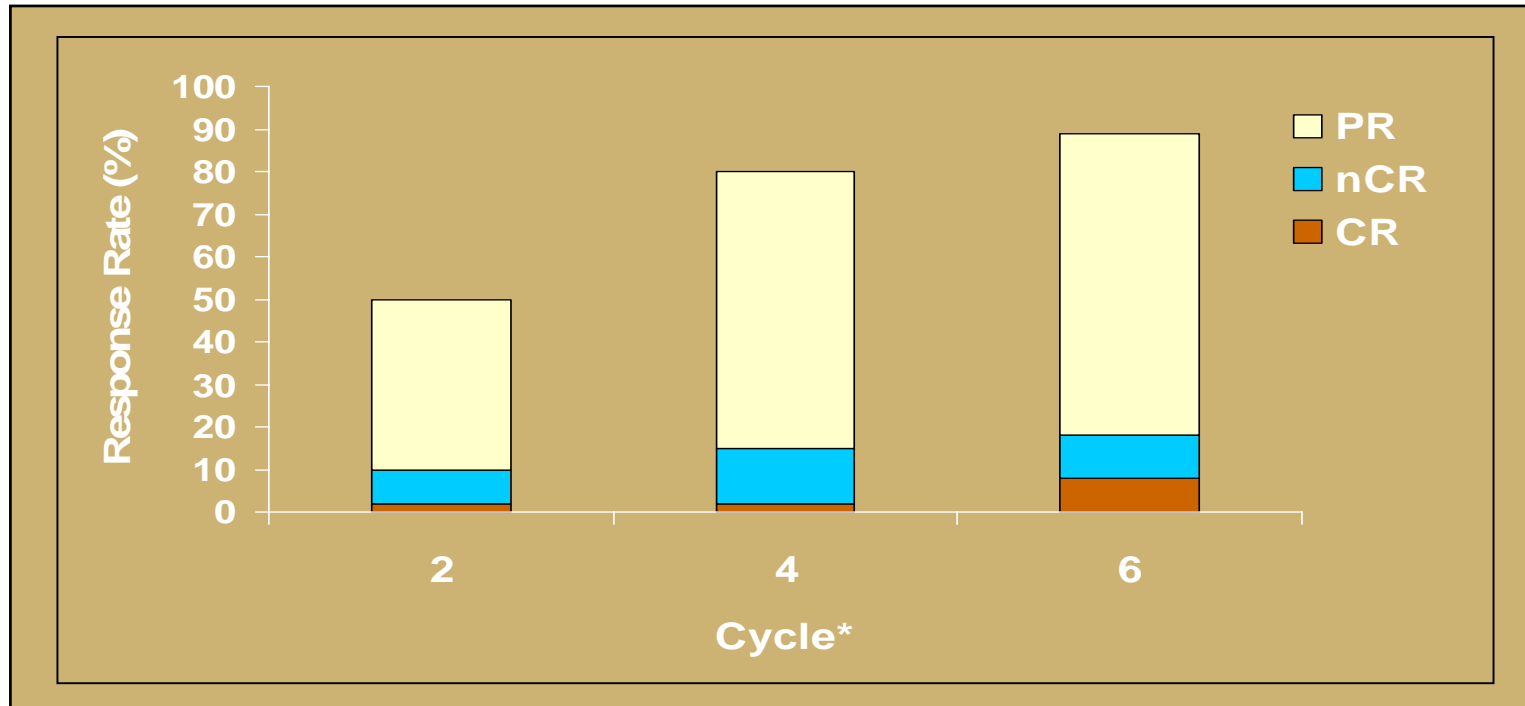
# Phase III Trial: Thal/Dex vs Dex in Patients With Newly Diagnosed MM

## Adverse Events Reported During 4 Cycles of Treatment

<b>Adverse Events</b>	<b>Thal/Dex (N=102)</b>	<b>Dex (N=101)</b>
<b>DVT (Grade <math>\geq 3</math>)</b>	<b>16 (16%)</b>	<b>3 (3%)</b>
<b>Neuropathy (Grade <math>\geq 3</math>)</b>	<b>6 (6%)</b>	<b>4 (4%)</b>
<b>Total of any Type (Grade <math>\geq 3</math>)</b>	<b>45 (44%)</b>	<b>19 (19%)</b>

Rajkumar SV et al. Presented at: 2004 ASCO Annual Meeting; June 5–8, 2004; New Orleans, LA

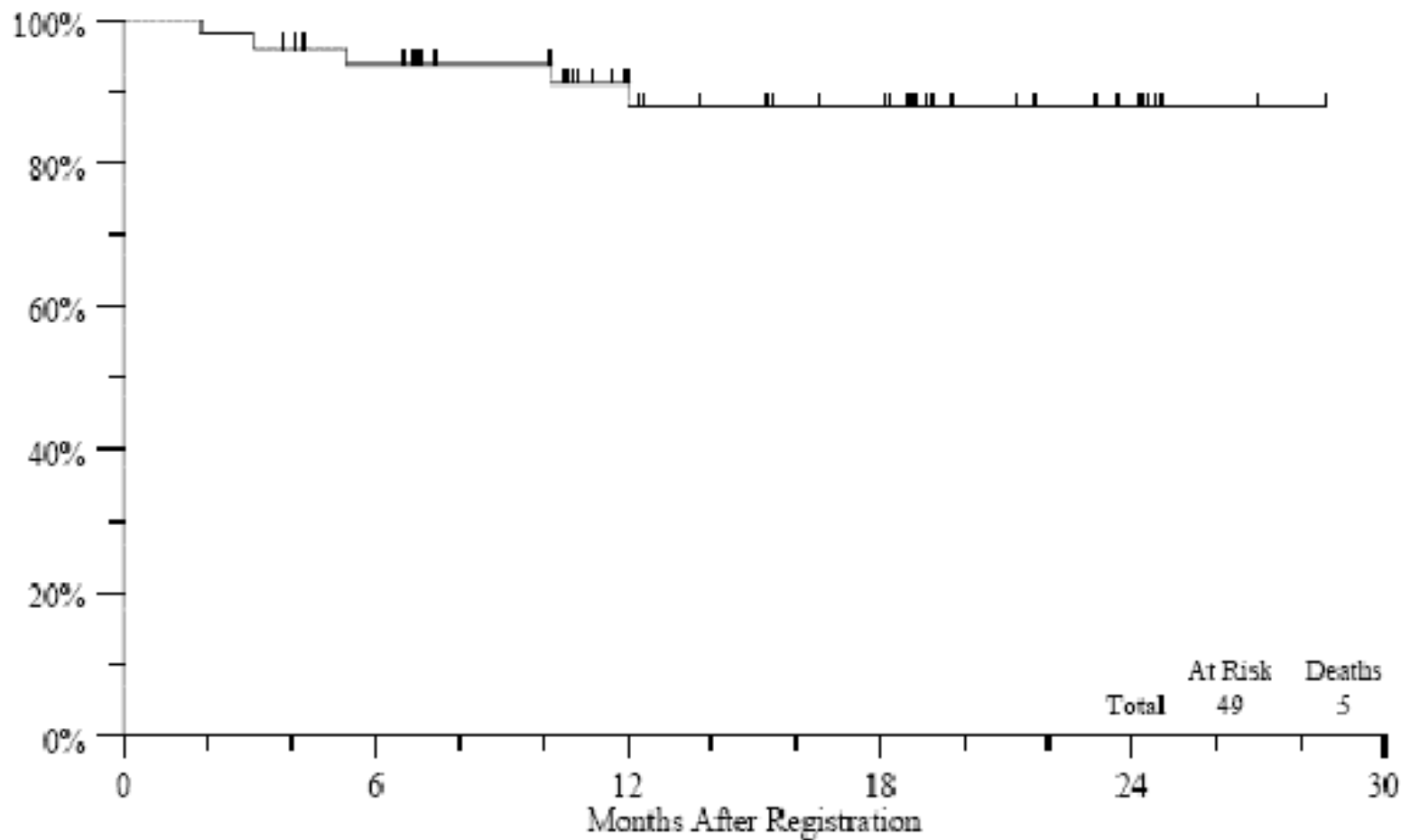
# Veldade ± Dexamethasone for Previously Untreated Multiple Myeloma



- 21% achieved best response in  $\geq 4$  cycles
- 10% achieved best response in  $\geq 6$  cycles

\* All patients received velcade alone for the first 2 cycles of treatment.

# Velcade/ ONS Overall Survival (N=49)



- Median overall survival: not reached
- Estimated survival rate at 12 months: 91%

DURIE

# So What's the Answer for patients < 65

- **Thal/ Dex**
  - **Velcade/ Dex**
  - **Rev/ Dex (or BiRD)**
- 
- **OR Attempt even higher CR?**

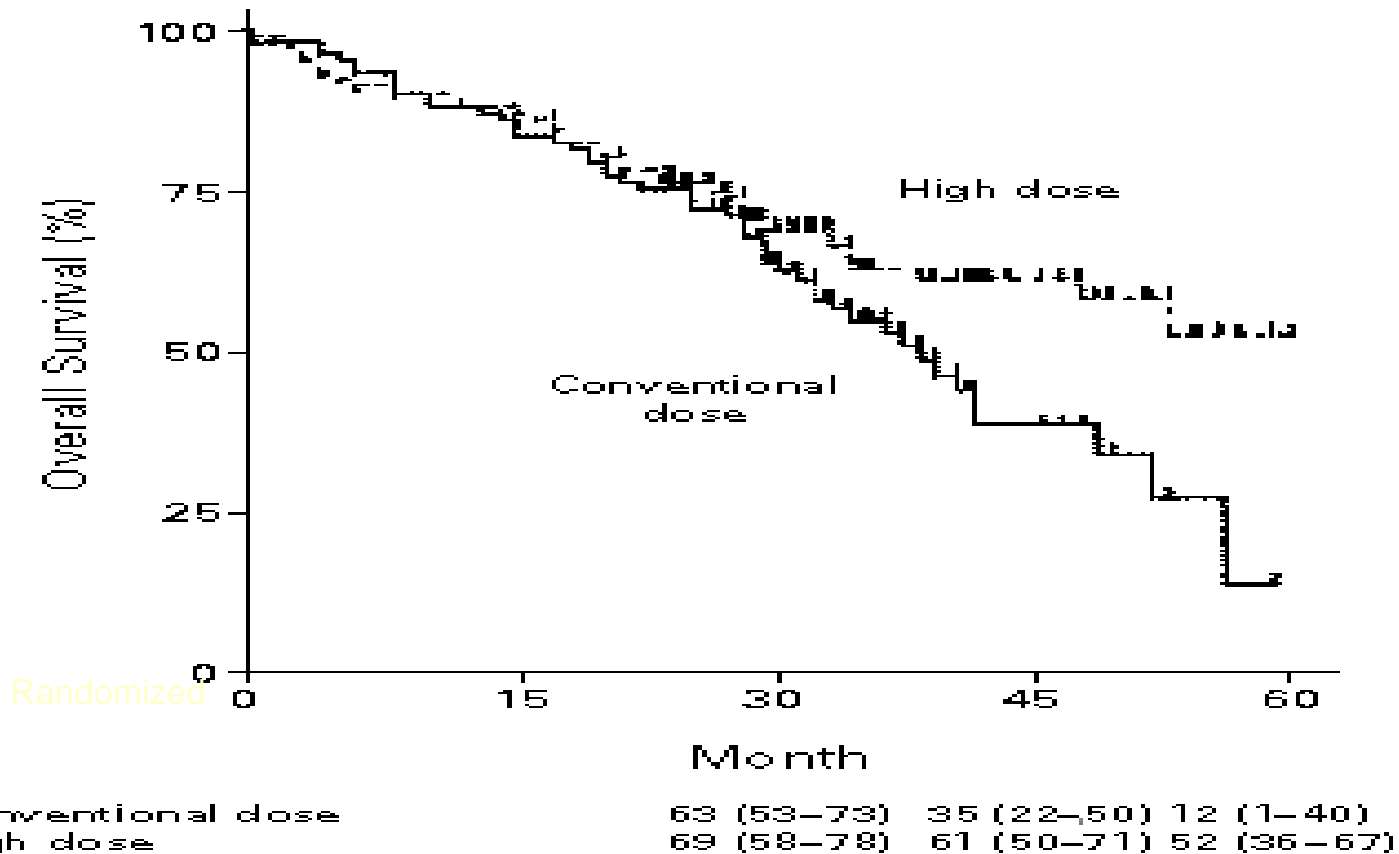
# New Trials

## Frontline Induction

- **Velcade/ Dex vs VAD** IFM
- **Velcade/ MP vs MP (Vista)** Spain
- **Velcade/ AD vs VAD** HOVON
- **Velcade/ Thal/ Dex vs Thal/ Dex** SWOG
- **Velcade/ Cytosan/ Dex** Aptium

# Is Transplant Needed?

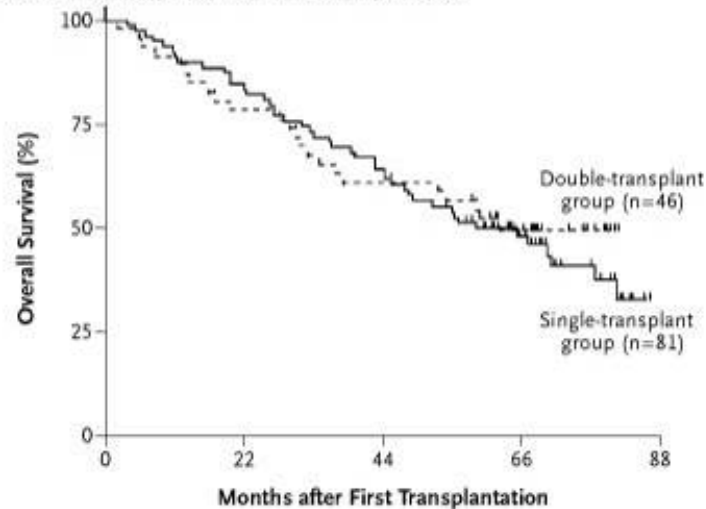
## High-Dose Therapy/AutoSCT Is Superior to Conventional Chemotherapy in Myeloma



# Overall Survival According to Response Following Single Transplant

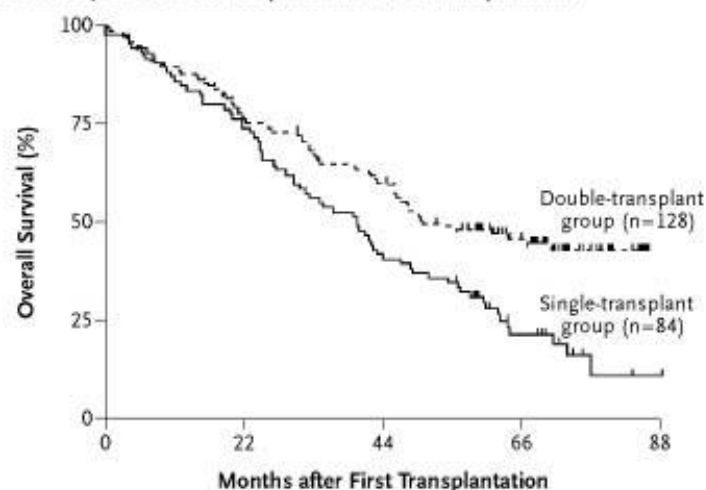
1 versus 2  
transplants

A Very Good Partial Response after First Transplantation



VGPR  
following single

B Absence of Very Good Partial Response after First Transplantation



Absence of VGPR  
following single  
transplant



The NEW ENGLAND  
JOURNAL of MEDICINE

Attal. *N Engl J Med.* 2003;349:2495.

# How About for an Older Patient?

⊕ **MP**

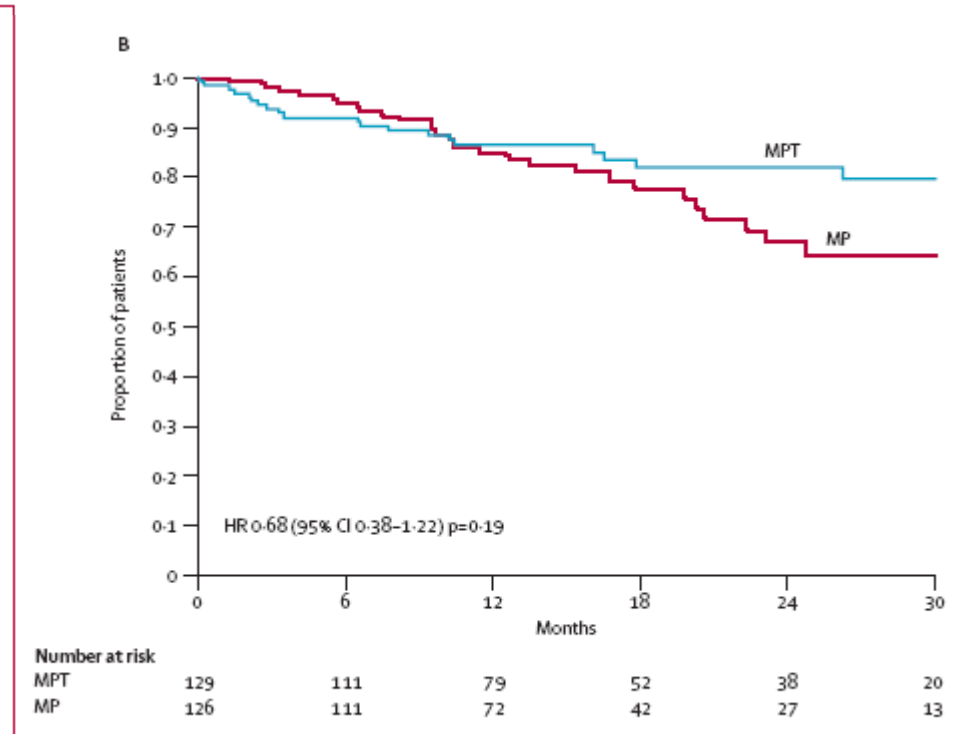
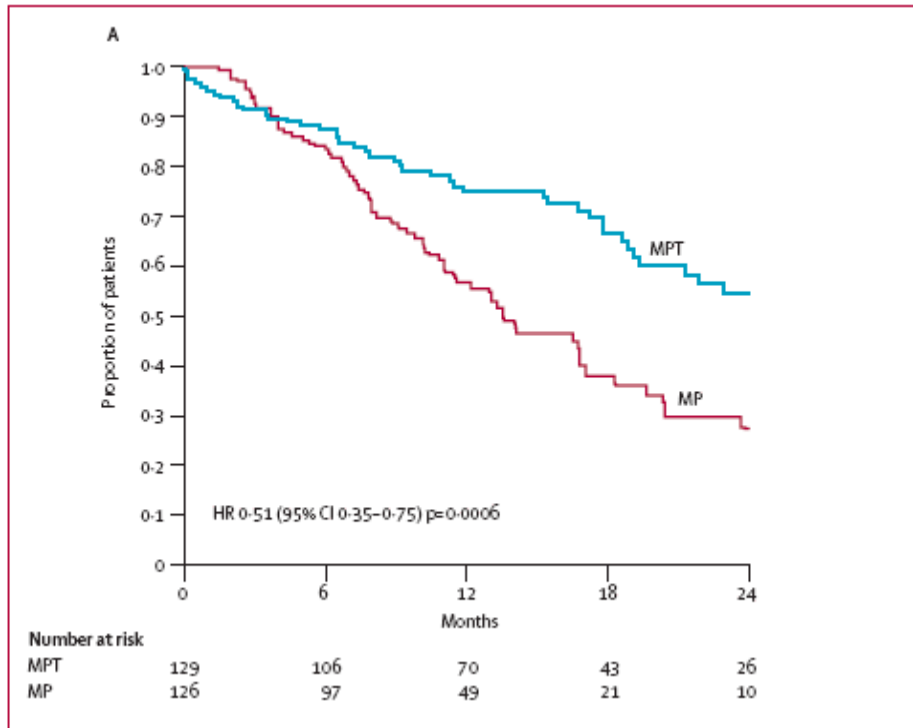
⊕ **MPT**

⊕ **VAD + MEL 100mg/ m<sup>2</sup> x2**

# MP vs MPT

## Event-free survival

## Overall survival



Palumbo A, Brinchen S, et al. Lancet 2006; 367: 825-31.

DURIE

# Velcade for Patients with 13q- Chromosome Deletion

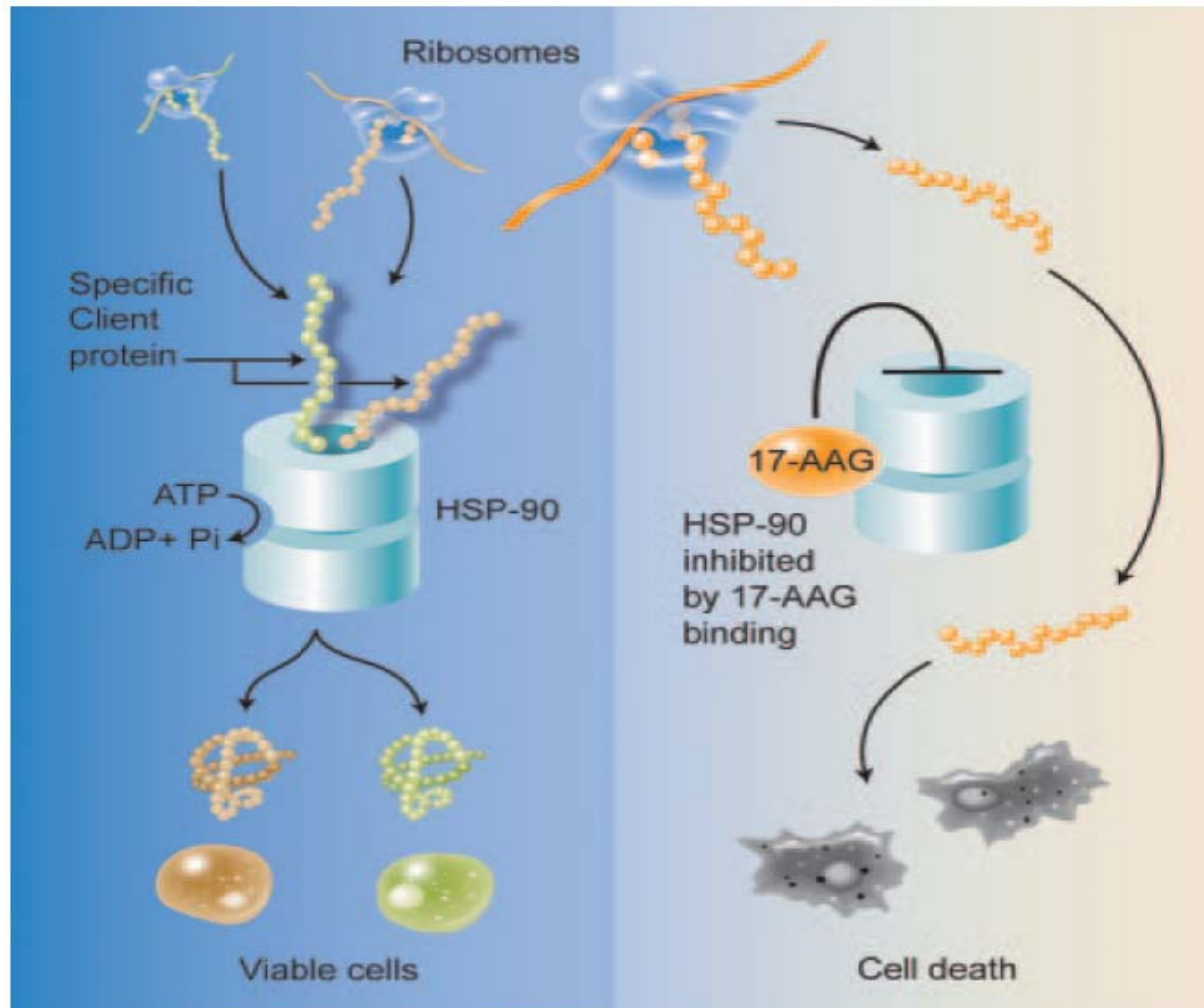
- In **Summit** and **APEX** Velcade trials  
13q- did **not** do worse

- **Conclusions**

- Velcade equally effective for 13q- patients
- Dexamethasone patients with 13q- did not do as well ( $p=0.002$ )

# Many New Drugs Are in Trials

## Heat Shock Protein 90 Inhibitors



# The Future of Myeloma Therapy

- ⊕ New Drugs
- ⊕ New Combinations
- ⊕ Longer Remissions
- ⊕ Longer and Better Survival
- ⊕ Cure!



FOLON

