



# Visiting Professors

A case-based discussion on the management of multiple myeloma

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Featuring clinical investigators' perspectives on a day spent visiting patients with multiple myeloma in the clinics of general oncologists

## CONTENTS

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UPDATE

# Visiting Professors: A case-based discussion on the management of multiple myeloma

## OVERVIEW OF ACTIVITY

Multiple myeloma (MM) is a plasma cell neoplasm that accounts for approximately 10% of all hematologic cancers. It is estimated that 24,050 new cases will be diagnosed and 11,090 deaths will occur in the United States in 2014. The introduction of new agents with substantial activity has improved outcomes and allowed patients to experience longer periods of remission. Both novel proteasome inhibitors and immunomodulatory (IMiD) agents have effectively transformed the standard treatment for patients with newly diagnosed and relapsed/refractory MM. Thus, the current challenge facing the oncology community is identifying those patients who will obtain the greatest benefit from a specific regimen while incurring the least toxicity. For this reason, hematologic oncologists must be apprised of the unique risks and benefits accompanying each evidence-based treatment strategy and of the acceptable monitoring and supportive management techniques that enable early recognition of safety concerns and effective interventions to address side effects.

To provide clinicians with therapeutic strategies to address the disparate needs of patients with MM, the *Visiting Professors* audio series employs an innovative case-based approach that unites the perspectives of leading hematology-oncology investigators and general oncologists as they explore the intricacies of making treatment decisions. Upon completion of this CME activity, medical oncologists should be able to formulate an up-to-date and more complete approach to the care of patients with MM.

## LEARNING OBJECTIVES

- Apply case-based learning, innovative communication strategies and shared clinical insight to provide comprehensive and compassionate oncology care for patients with MM.
- Integrate recent clinical research findings with proteasome inhibitors and IMiDs into the development of individualized induction and maintenance treatment strategies for patients with MM.
- Develop an understanding of emerging efficacy and side effect data with novel agents and combination regimens under evaluation for MM.
- Evaluate the benefits and risks of lenalidomide maintenance therapy after stem cell transplantation for patients with active MM.
- Assess the use of bone-targeted therapy in patients with newly diagnosed MM regardless of the presence of bone disease.
- Develop a risk-adapted treatment plan for patients with smoldering MM.
- Assess the ongoing clinical trials evaluating therapeutic approaches for MM, and counsel appropriately selected patients for study participation.

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*This activity is supported by educational grants from Celgene Corporation, Millennium: The Takeda Oncology Company and Onyx Pharmaceuticals Inc.*

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### Discussion with Sagar Lonial, MD and Warren Brenner, MD

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| <p>TRACK 1 <b>CASE DISCUSSION:</b> A 69-year-old patient received RVD for multiple myeloma (MM) but experienced an asymptomatic relapse 3 years later and achieved a complete response after reinduction with RVD</p> <p>TRACK 2 Efficacy of pomalidomide in combination with low-dose dexamethasone for patients with relapsed or refractory MM with 17p deletion</p> <p>TRACK 3 Emerging clinical data with the monoclonal antibodies elotuzumab and daratumumab in MM</p> <p>TRACK 4 Tailoring maintenance therapy regimens based on risk</p> | <p>TRACK 5 Duration of bisphosphonate therapy for patients with MM with and without bone disease</p> <p>TRACK 6 <b>CASE DISCUSSION:</b> A 74-year-old patient with severe back pain, hypercalcemia and renal failure is diagnosed with ISS Stage III t(11;14) MM</p> <p>TRACK 7 Management of bone pain in patients with MM</p> <p>TRACK 8 Lenalidomide maintenance therapy for patients with MM</p> <p>TRACK 9 Therapeutic approach for patients with MM and renal failure</p> <p>TRACK 10 Role of transplant for elderly patients with MM</p> |
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### Discussion with Morie A Gertz, MD, MACP and Erik Rupard, MD

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| <p>TRACK 11 <b>CASE DISCUSSION:</b> A 72-year-old patient with anemia, renal failure and IgG kappa MM achieves a near-complete response with RVD → autologous stem cell transplant (ASCT)</p> <p>TRACK 12 Clinical benefits and risks of maintenance therapy in MM</p> | <p>TRACK 13 Post-transplant consolidation therapy to improve outcomes in patients with MM</p> <p>TRACK 14 <b>CASE DISCUSSION:</b> A 63-year-old patient with MM and multiple lytic bone lesions undergoes treatment with RVD with a delay in zoledronic acid treatment due to unrelated surgery</p> |
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### Discussion with Drs Lonial and Brenner (continued)

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| <p>TRACK 15 <b>CASE DISCUSSION:</b> A 76-year-old patient with a history of slowly progressive MM presents with multiple new bone lesions</p> <p>TRACK 16 Perspective on the use of proteasome inhibitors for relapsed or refractory MM</p> <p>TRACK 17 <b>CASE DISCUSSION:</b> A 64-year-old patient with MM and normal cytogenetics whose disease progresses through multiple lines of therapy</p> <p>TRACK 18 Clinical experience, tolerability and side effects of carfilzomib</p> <p>TRACK 19 ClaPD (clarithromycin, pomalidomide and dexamethasone) therapy for relapsed or refractory MM</p> <p>TRACK 20 Therapeutic options for patients with MM in the late-line setting</p> | <p>TRACK 21 <b>CASE DISCUSSION:</b> A 78-year-old patient with fatigue and mild anemia is diagnosed with smoldering MM</p> <p>TRACK 22 Evolving clinical trial data on the management of smoldering MM</p> <p>TRACK 23 ECOG-E3A06: A Phase III trial of lenalidomide versus observation for asymptomatic high-risk smoldering MM</p> <p>TRACK 24 <b>CASE DISCUSSION:</b> A 76-year-old patient with multiple comorbidities, including diabetes and nephrotic syndrome, is diagnosed with monoclonal gammopathy</p> <p>TRACK 25 <b>CASE DISCUSSION:</b> A 71-year-old patient with ISS Stage I MM achieves a very good partial response with bendamustine/melphalan → ASCT</p> |
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**Discussion with Drs Lonial and Brenner (continued)**

- TRACK 26 Critical appraisal of studies investigating the benefit of maintenance therapy for patients with MM
- TRACK 27 Risk of second primary cancers with lenalidomide maintenance therapy
- TRACK 28 **CASE DISCUSSION:** A 62-year-old patient whose disease progresses after 2 transplants achieves a good response to pomalidomide/bortezomib/dexamethasone
- TRACK 29 Activity of oral proteasome inhibitors in MM
- TRACK 30 Sequencing of pomalidomide and carfilzomib in the relapsed/refractory setting
- TRACK 31 Carfilzomib, lenalidomide and dexamethasone for newly diagnosed MM

**Discussion with Drs Gertz and Rupard (continued)**

- TRACK 32 **CASE DISCUSSION:** A 67-year-old patient with a compression fracture in T11 and multiple lytic bone lesions is diagnosed with IgA lambda MM
- TRACK 33 Role of transplant in the era of novel agents
- TRACK 34 Subcutaneous versus intravenous administration of bortezomib in MM
- TRACK 35 Dose reduction of dexamethasone to mitigate side effects
- TRACK 36 **CASE DISCUSSION:** A 47-year-old patient achieves a complete remission with RVD → ASCT for MM but develops peripheral neuropathy
- TRACK 37 Peripheral neuropathy associated with bortezomib
- TRACK 38 Viewpoint on carfilzomib for newly diagnosed MM
- TRACK 39 Efficacy and tolerability of carfilzomib versus bortezomib
- TRACK 40 **CASE DISCUSSION:** An 84-year-old patient with a long-standing history of monoclonal gammopathy of undetermined significance experiences progression to MM
- TRACK 41 Therapeutic options for initial therapy in elderly patients with newly diagnosed MM
- TRACK 42 Initial results of the Phase III FIRST trial of lenalidomide/dexamethasone (Rd) versus melphalan/prednisone/thalidomide (MPT) for transplant-ineligible patients with newly diagnosed MM
- TRACK 43 **CASE DISCUSSION:** A 76-year-old patient with a poor performance status presents with a 6-cm abdominal mass and a lesion in the left femur that is diagnosed as IgA lambda MM
- TRACK 44 **CASE DISCUSSION:** A 65-year-old patient previously treated for IgG kappa MM receives carfilzomib/dexamethasone on relapse with high-risk, kappa light chain-only MM
- TRACK 45 Use of carfilzomib/pomalidomide/dexamethasone for relapsed or refractory MM
- TRACK 46 Counseling patients with advanced MM
- TRACK 47 Promising novel anti-CD38 monoclonal antibodies in MM
- TRACK 48 Induction regimens for patients with newly diagnosed MM
- TRACK 49 Monitoring patients with MM
- TRACK 50 Perspective on the management of high-risk smoldering MM

## SELECT PUBLICATIONS

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Leleu X et al. **Pomalidomide plus low-dose dexamethasone in relapsed or refractory multiple myeloma (RRMM) with deletion (del)17p and/or translocation t(4;14).** *Proc ASH* 2013;**Abstract 689.**

Lonial S et al. **Phase (Ph) I/II study of elotuzumab (Elo) plus lenalidomide/dexamethasone (Len/dex) in relapsed/refractory multiple myeloma (RR MM): Updated Ph II results and Ph I/II long-term safety.** *Proc ASCO* 2013;**Abstract 8542.**

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**Randomized Phase III trial of lenalidomide versus observation alone in patients with asymptomatic high-risk smoldering multiple myeloma.** **NCT01169337**

Shah JJ et al. **Phase I/II dose expansion of a multi-center trial of carfilzomib and pomalidomide with dexamethasone (Car-Pom-d) in patients with relapsed/refractory multiple myeloma.** *Proc ASH* 2013;**Abstract 690.**

QUESTIONS (PLEASE CIRCLE ANSWER):

1. Which of the following is an anti-CD38 antibody shown to have promise in MM?
  - a. Elotuzumab
  - b. Daratumumab
  - c. Onartuzumab
  - d. Both a and b
2. Vorinostat is a histone deacetylase inhibitor that is approved for use in combination with bortezomib for the treatment of relapsed/refractory MM.
  - a. True
  - b. False
3. The MRC Myeloma IX trial demonstrated improved overall survival with the use of zoledronic acid versus clodronate in patients with newly diagnosed MM who had preexisting bone disease.
  - a. True
  - b. False
4. The French IFM 2005-02 trial investigating the benefit of lenalidomide maintenance therapy after stem cell transplantation for patients with MM reported a significant improvement in \_\_\_\_\_.
  - a. Progression-free survival
  - b. Overall survival
  - c. Both a and b
5. \_\_\_\_\_ is a novel, oral proteasome inhibitor that is currently under investigation for the treatment of MM.
  - a. Oprozomib
  - b. Ixazomib (MLN9708)
  - c. Carfilzomib
  - d. Elotuzumab
  - e. Both a and b
  - f. All of the above
6. Which of the following statements is true regarding ixazomib?
  - a. It has shown activity in the relapsed/refractory setting for MM
  - b. It has not shown activity in newly diagnosed MM
  - c. Neither a nor b
7. An ongoing ECOG trial (E3A06) is evaluating whether early therapy is of benefit to patients with asymptomatic smoldering myeloma by comparing treatment with lenalidomide to observation for these patients.
  - a. True
  - b. False
8. The FIRST trial of continuous Rd versus Rd for 18 cycles or MPT for transplant-ineligible patients with newly diagnosed myeloma demonstrated that continuous Rd was statistically superior to MPT in terms of progression-free survival.
  - a. True
  - b. False
9. Which of the following statements is true regarding pomalidomide for the treatment of MM?
  - a. Pomalidomide is generally well tolerated
  - b. It was recently FDA approved for the treatment of MM after 2 prior therapies, including lenalidomide and bortezomib
  - c. In combination with dexamethasone, it is effective for patients with 17p deletion
  - d. All of the above
10. Carfilzomib is associated with a high incidence of peripheral neuropathy.
  - a. True
  - b. False

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**PART 1 — Please tell us about your experience with this educational activity**

**How would you characterize your level of knowledge on the following topics?**

	4 = Excellent	3 = Good	2 = Adequate	1 = Suboptimal
	<b>BEFORE</b>		<b>AFTER</b>	
Oral proteasome inhibitors under active investigation for the treatment of MM (ixazomib, oprozomib)	4	3	2	1
Efficacy of pomalidomide in combination with low-dose dexamethasone in patients with relapsed or refractory MM and 17p deletion	4	3	2	1
Survival advantage with lenalidomide versus observation for high-risk smoldering MM	4	3	2	1
FIRST: Initial results of the Phase III trial of Rd continuously administered until disease progression or for 18 cycles versus MPT in transplant-ineligible patients with newly diagnosed MM	4	3	2	1
Deep and rapid responses with carfilzomib/lenalidomide/dexamethasone for newly diagnosed MM	4	3	2	1

**Practice Setting:**

- Academic center/medical school       Community cancer center/hospital       Group practice  
 Solo practice     Government (eg, VA)     Other (please specify) .....

**Approximately how many new patients with MM do you see per year?** ..... patients

**Was the activity evidence based, fair, balanced and free from commercial bias?**

- Yes       No

If no, please explain: .....

**Please identify how you will change your practice as a result of completing this activity (select all that apply).**

- This activity validated my current practice  
 Create/revise protocols, policies and/or procedures  
 Change the management and/or treatment of my patients  
 Other (please explain): .....

**If you intend to implement any changes in your practice, please provide 1 or more examples:**

.....  
 .....

**The content of this activity matched my current (or potential) scope of practice.**

- Yes       No

If no, please explain: .....

**Please respond to the following learning objectives (LOs) by circling the appropriate selection:**

4 = Yes    3 = Will consider    2 = No    1 = Already doing    N/M = LO not met    N/A = Not applicable

**As a result of this activity, I will be able to:**

- Apply case-based learning, innovative communication strategies and shared clinical insight to provide comprehensive and compassionate oncology care for patients with MM. . . . . 4 3 2 1 N/M N/A
- Integrate recent clinical research findings with proteasome inhibitors and IMiDs into the development of individualized induction and maintenance treatment strategies for patients with MM. . . . . 4 3 2 1 N/M N/A
- Develop an understanding of emerging efficacy and side effect data with novel agents and combination regimens under evaluation for MM. . . . . 4 3 2 1 N/M N/A
- Evaluate the benefits and risks of lenalidomide maintenance therapy after stem cell transplantation for patients with active MM. . . . . 4 3 2 1 N/M N/A
- Assess the use of bone-targeted therapy in patients with newly diagnosed MM regardless of the presence of bone disease. . . . . 4 3 2 1 N/M N/A

**EDUCATIONAL ASSESSMENT AND CREDIT FORM (continued)**

- Develop a risk-adapted treatment plan for patients with smoldering MM. . . . . 4 3 2 1 N/M N/A
- Assess the ongoing clinical trials evaluating therapeutic approaches for MM, and counsel appropriately selected patients for study participation. . . . . 4 3 2 1 N/M N/A

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**Would you recommend this activity to a colleague?**

Yes       No

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- No, I am not willing to participate in a follow-up survey.

**PART 2 — Please tell us about the faculty and editor for this educational activity**

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<b>Faculty</b>	<b>Knowledge of subject matter</b>				<b>Effectiveness as an educator</b>			
Sagar Lonial, MD	4	3	2	1	4	3	2	1
Warren Brenner, MD	4	3	2	1	4	3	2	1
Morie A Gertz, MD, MACP	4	3	2	1	4	3	2	1
Erik Rupard, MD	4	3	2	1	4	3	2	1
<b>Editor</b>	<b>Knowledge of subject matter</b>				<b>Effectiveness as an educator</b>			
Neil Love, MD	4	3	2	1	4	3	2	1

**Please recommend additional faculty for future activities:**

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Name: ..... Specialty: .....

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Release date: July 2014  
Expiration date: July 2015  
Estimated time to complete: 2.75 hours

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