

ADDITION OF CARFILZOMIB AS A THIRD AGENT IN LENALIDOMIDE-REFRACTORY MULTIPLE MYELOMA: SWITCHING FROM DOUBLET TO TRIPLET

Cerchione, Claudio¹; Catalano, Lucio²; Nappi, Davide³; Ronconi, Sonia⁴; Ceccolini, Michela⁴; Cangini⁴; Musuraca, Gerardo⁴; Pane, Fabrizio²; Martinelli, Giovanni⁴

¹Hematology Unit, Istituto Romagnolo per lo Studio dei Tumori "Dino Amadori" - IRST IRCCS, ²Hematology Unit, AOU Federico II - Napoli, ³Department of Hematology & CBMT, Ospedale di Bolzano, ⁴Hematology Unit, Istituto Scientifico Romagnolo per lo Studio e la Cura dei Tumori (IRST) IRCCS, Meldola, Italy

INTRODUCTION: In this retrospective observational trial, it has been evaluated efficacy and safety of carfilzomib, in combination with lenalidomide-dexamethasone (KRD) as salvage regimen in patients with rrMM, refractory to lenalidomide, where lenalidomide-based regimens have no proven efficacy.

MATERIAL AND METHODS: 41 patients (23 M/18 F), with rrMM, median age at diagnosis 63.7 years (r. 43-82), median age at start of treatment 67 years (r. 48-84) previously treated with several lines of treatments (median 3, r. 2-11), underwent to KRD regimen (ASPIRE trial schedule) for a median treatment cycles of 8 (r 2-18).

RESULTS: After a median follow-up of 9 months (r. 2-18), ORR was 68,2% (28/41: 9 CR, 12 VGPR, 7 PR) with 5 progressive diseases (PD) and 8 stable disease (SD): this can be considered as an impressive result in this subset of rrMM patients, refractory to lenalidomide. Median time to response was 1.3 months (r.1-4), median OS from diagnosis was 62 months (r. 9-170), median OS from start of Carfilzomib was 11 months (r. 2-18). Carfilzomib was well tolerated, with grade 2 anemia in 39%(16/41) of patients, successfully managed by ESAs, without necessity of blood transfusions; 29% (12/41) grade 3-4 neutropenia (pegfilgrastim in primary prophylaxis was given, no ospedalization was required, no septic shocks were observed); 34% (14/41) grade 2, 21% (9/41) grade 3 and 12% (5/41) grade 4 thrombocytopenia, without hemorrhagic events and transfusion-dependency. It was observed pneumonia in 39% (16/41) of patients, treated by common antibiotic drugs and always solved. A cardiac monitoring was performed for all patients: hypertension (grade 2-3) in 34% (14/41); fatigue in 39% (16/31).

CONCLUSIONS: Carfilzomib-Lenalidomide-Dexamethasone has shown significant efficacy in a particularly severe setting of patients, relapsed and refractory to all available therapeutic resources, also lenalidomide, and it could be considered as a bridge to a second autologous or allogenic SCT.