

# WHAT SHOULD YOU KNOW ABOUT EMERGING MYELOMA TREATMENT OPTIONS?

Program Resource Guide

## Questions to Ask Your Doctor When Making Treatment Decisions

- What are my treatment options?
- Is there a clinical trial that might work for me?
- What are the new or emerging therapies?
- What are the standard therapies?
- What are the pros and cons of each treatment option?
- How experienced are you in treating myeloma?

## Myeloma Treatment Options

### Immunomodulatory Therapies (IMiDs)

- Lenalidomide (Revlimid)
- Pomalidomide (Pomalyst)
- Thalidomide (Thalomid)

### Proteasome Inhibitors

- Bortezomib (Velcade)
- Carfilzomib (Kyprolis)
- Ixazomib (Ninlaro)

### CD38 Targeting Monoclonal Antibodies

- Daratumumab (Darzalex)
- Isatuximab-ifrc (Sarclisa)

### CAR T-Cell Therapies

- Idecabtagene vicleucel (Abecma) or Ide-cel
- Ciltacabtagene autoleucel (Carvykti) or Cilta-cel

### Bispecific Antibodies

**Teclistamab (Tecvayli):** Bispecific T-cell engager approved for the treatment of relapsed or refractory myeloma after at least four previous lines of treatment.

## About CAR T-Cell Therapy

*CAR (Chimeric Antigen Receptor) T-cell therapy is a treatment in which the T cells (a type of immune system cell) of a patient are laboratory-altered to attack cancer cells in the body.*

### Questions to Ask Your Doctor About CAR T-Cell Therapy

- Am I a candidate?
- What are the risks and benefits?
- Are there alternatives?
- Is the timing right for me?
- Is a clinical trial more appropriate?
- What is the cost?
- What is the cancer center's experience with CAR T-cell therapy?

### Common Side Effects of CAR T-Cell Therapy

- Cytokine release syndrome (CRS)
- Neurotoxicity
- Suppressed immune system
- Low blood counts

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## About Bispecific Antibodies

*Bispecific antibodies are monoclonal antibodies that target B-cell maturation antigen (BCMA). These can attach to both a T cell and a myeloma cell concurrently, activating an immune attack on cancer cells.*

### Questions to Ask About Bispecific Antibodies

- Are there other bispecific antibodies that might work for me?
- What about combination therapy?
- Is there a clinical trial?
- How frequently will I need to come for treatment/office visits?

### Risks of Bispecific Antibody Treatment

- Cytokine release syndrome (CRS)
- Neurotoxicity
- Infection
- Low blood counts

## Glossary

**Ciltacabtagene autoleucel (Carvykti):** Also referred to as Cilta-cel, FDA-approved CAR T-cell therapy for adults with relapsed or refractory multiple myeloma who have already received four or more lines of therapy.

**Cytokine release syndrome (CRS):** Occurs when the immune system responds to infection or immunotherapy drugs more aggressively than it should. Symptoms include fever, nausea, fatigue, and body aches.

**Idecabtagene vicleucel (Abecma):** Also referred to as Ide-cel, FDA-approved CAR T-cell therapy for people with relapsed or refractory multiple myeloma who have already received four or more lines of therapy.

**Proteasome inhibitor:** Target cancer cells by blocking the breakdown of proteins by the proteasome. Without functioning proteasomes, proteins build up and kill the myeloma cells.

**Neurotoxicity:** The tendency of some treatments to cause damage to the nervous system. These neurologic adverse events may cause confusion, delirium, difficulty with communication, headache, impaired motor skills, seizure, or tremors.

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### Evolve Myeloma

**EVOLVE** Evolve Myeloma is brought to you by the Patient Empowerment Network. It is sponsored by Janssen Oncology and Legend Biotech.



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