

WHERE CLINICAL TRIALS FIT IN THE SEQUENCE OF MYELOMA CARE

- **Induction:** Clinical trials may be used to test the efficacy and safety of new drug combinations or novel agents as part of the initial treatment regimen.
- **Consolidation:** Clinical trials help determine the optimal timing and procedure for ASCT, or investigate the effectiveness of continued induction therapy for ineligible patients. They can also test the benefits of adding novel agents to treatment.
- **Maintenance:** Clinical trials compare the effectiveness and side effects of different maintenance therapy options. They also explore the optimal duration and potential benefits of adding novel agents to this phase.
- **Relapsed/Refractory:** Clinical trials are particularly important in this phase, as they can identify new treatments for MM that is resistant to current therapies. They can also help tailor treatments to individual patients based on their prior treatment history.

[Sources: 1, 2, 3, 4]

RESOURCES FOR YOUR PATIENTS

- Newly Diagnosed
- Testing
- Treatments and Clinical Trials
- Access and Affordability
- Whole Patient Support



TIP

“We bring that [understanding sequence] discussion up with all of our patients about the potential of a clinical trial from the start. And so we’re all versed on that, we all look to what clinical trial could be available for this patient.” - Charise Gleason, MSN, NP-BC, AOCNP

STRATEGIES FOR INITIATING CLINICAL TRIAL CONVERSATIONS

- **Start early.** Don't wait until standard treatment options are exhausted. Discuss clinical trials as soon as a diagnosis is confirmed, even if that is not the immediate plan.
- **Educate.** Help patients develop understanding and build trust towards research participation over time.
- **Align expectations.** Manage potential misconceptions and set realistic hopes from the beginning.
- **Facilitate timely enrollment.** Early discussion prepares patients when trials align with their needs and eligibility.
- **Normalize the conversation.** Frame clinical trials as part of the treatment spectrum, not a last resort.
- **Patient-centered approach.** Understand individual concerns, goals, and priorities. Discuss patients’ comfort levels with research participation.
- **Shared decision-making.** Collaboratively explore available trials, discuss eligibility criteria, and address potential risks and benefits together.
- **Emphasize patient autonomy.** Respect patients’ decisions, whether they choose, decline, or remain undecided.

[Sources: 1, 2, 3, 4]

MANAGING CONCERNS REGARDING CLINICAL TRIALS

Concerns Stemming From Fear of the Unknown:

- Be transparent. Provide clear, factual information about the trial design, potential risks and benefits, and participant protections. Utilize visuals like diagrams and flowcharts to enhance understanding.
- Address misconceptions. Actively dispel myths and inaccurate portrayals of clinical trials often found online. Emphasize rigorous ethical standards and safety protocols.
- Share personal stories. Invite former trial participants or patients to share their experiences to offer hope and inspiration.

Concerns About Accessibility and Logistics:

- Proximity. Discuss available trials within their geographic area or trials that offer travel assistance programs. Highlight virtual trial options where applicable.
- Financial burden. Explore financial aid programs and patient advocacy groups offering support.
- Time commitment. Provide realistic expectations about time demands, including clinic visits, procedures, and data collection.

Concerns Related to Hope and Realistic Expectations:

- Manage expectations. Communicate the primary research objectives and potential outcomes. Differentiate between curative intent and exploratory goals.
- Focus on the individual. Acknowledge each patient’s unique hopes and fears. Discuss how the trial aligns with their personal treatment goals and priorities.
- Celebrate milestones. Recognize and celebrate positive developments throughout the trial journey, reinforcing their valuable contribution to research.

[Sources: 1, 2, 3]

TIP

“Myeloma trials are incredibly competitive, and that competition does a fantastic thing for patients because what we see in the clinical trial portfolio are drugs that are safer and safer and safer, and drugs that are more effective and more effective.” - Craig Cole, MD

TIP

“So I tell patients that their fears that they have are absolutely justified. And one thing we teach the fellows, the residents, and the medical students is that you validate those concerns, and you listen to those concerns and you don't ignore it or blow through it.” - Craig Cole, MD

TIP

“You might have a patient who’s starting to have a biochemical progression. It’s not time to change their therapy yet, but we’re already thinking about what’s that next line of therapy. So we start to approach that with clinical trials and standard of care, and opening that dialogue.” - Charise Gleason, MSN, NP-BC, AOCNP