EVOLVING MYELOMA TREATMENT OPTIONS: HOW YOU CAN ACCESS CUTTING-EDGE CARE

Program Resource Guide

Patient Empowerment Network

New Myeloma Treatment Options

CAR (Chimeric Antigen Receptor) T-Cell Therapy: 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.

Bispecific Antibodies (Bispecific T-cell engagers or BiTEs): Class of bispecific monoclonal antibodies that harness the power of the immune system to treat myeloma by binding to two different antigens at the same time.

CAR T-Cell Therapies for Myeloma

- Idecabtagene Vicleucel (Abecma) or Ide-cel
- Ciltacabtagene Autoleucel (Carvykti) or Cilta-cel

Bispecific Antibodies for Myeloma

- Teclistamab (Tecvayli)
- Elranatamab (Elrexfio)
- Talquetamab (Talvey)

Common Classes of Myeloma Therapy

Monoclonal antibodies (mAb) are proteins made in a laboratory meant to stimulate your immune system to fight a particular disease or infection.

Immunomodulatory therapies (iMiDs) are a group of drugs that treat myeloma by modifying the response of the immune system by increasing or decreasing the production of serum antibodies.

Proteasome inhibitors target cancer cells by blocking the breakdown of proteins by the proteasome. Without functioning proteasomes, proteins build up and kill the myeloma cells.

Monoclonal Antibodies	Immunomodulatory Therapy (IMiDs)	Proteasome Inhibitors
▪ Daratumumab (Darzalex)	▪ Thalomid (thalidomide)	▪ Velcade (bortezomib)
▪ Isatuximab (Sarclisa)	▪ Revlimid (lenalidomide)	▪ Kyprolis (carfilzomib)
▪ Elotuzumab (Empliciti)	▪ Pomalyst (pomalidomide)	▪ Ninlaro (ixazomib)

Next-Generation Myeloma Agents: CELMoD Drugs

CELMoDs (Cereblon E3 Ligase Modulatory Drugs): Designed to attack myeloma, not only killing myeloma cells directly but also by engaging other immune cells.

CELMoDs in Development:

- Iberdomide
- Mezigdomide

THANK YOU

- CancerGRACE: cancergrace.org
- Cure: curetoday.com
- Cancer Support Community: cancersupportcommunity.org

Visit powerfulpatients.org/myeloma for more resources.

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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.

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

Induction therapy: The first phase of treatment for myeloma. The goal of induction therapy is to reduce the number of myeloma cells in the bone marrow and the proteins that these cells produce.

Maintenance therapy: Refers to treatment given to myeloma patients after initial therapy that is meant to maintain a remission or prevent return of the disease.

MRD (minimal residual disease): Measurement of the number of myeloma cells found in the bone marrow of patients in remission after a clinical response to treatment. MRD is relevant as the residual myeloma cells may indicate progression or relapse.

Neuropathy: A condition that can affect many different types of nerves and is usually a gradual onset of numbness, pain, burning or tingling in the feet or hands, but can spread upward to the arms and legs.

Smoldering Myeloma: A very slow-growing type of myeloma where abnormal plasma cells make too much of a single type of monoclonal antibody, and it builds up in the blood or is passed in the urine.

Standard of Care: An established guideline that is consensus among experts as the most appropriate and/or effective treatment for a specific type and stage of cancer.

Teclistamab (Tecvayli): Bispecific T-cell engager antibody that targets both CD3 expressed on the surface of T cells and B-cell maturation antigen (BCMA) expressed on the surface of myeloma cells.

Venetoclax (Venclexta): Inhibitor therapy that targets the Bcl-2 protein.

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