CONSIDERING CAR T-CELL THERAPY FOR MYELOMA? WHAT YOU SHOULD KNOW

Program Resource Guide

Patient Empowerment Network

About CAR T-Cell Therapy

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.

FDA-Approved CAR T-Cell Therapies for Myeloma

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

Planning for CAR T-Cell Therapy	The Multidisciplinary Care Team
- Have at least three prior lines of therapy. - Locate a center that specializes in CAR T-cell therapy. - Meet with a specialist. - Undergo consultations for overall physical health, financial coordination, etc. - Obtain approval to undergo CAR T-cell therapy.	- Care partners such as family members or friends - Physician/oncologist - Social workers - Nurses - Nurse practitioners - Pharmacists - Other specialists

CAR T-Cell Therapy | Key Considerations

- **Physical component:** Finding the right medication in the right dose that is most tolerable for you.
- **Financial component:** Confirming insurance coverage or financial support to cover the cost of therapy.
- **Social component:** Ensuring you have a care partner or support system throughout the process.

Questions to Ask Your Healthcare Team About CAR T-Cell Therapy

- How long will I be sick?
- What are the side effects of the medication I should be concerned about?
- Ensure that your care team is aware of prior health concerns.
- How long will I have to take medication after the CAR T-cell therapy?
- What vaccinations should I have to protect against infection following the CAR T-cell process?

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.

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.

KarMMa study: Randomized clinical trial to evaluate the CAR T-cell therapy Ide-cel (Abecma) as compared with standard regimens in patients with triple-class–exposed relapsed and refractory multiple myeloma who had received two to four lines of prior therapy.

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

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.

Shared Decision-Making (SDM): Process of communication by which patients and clinicians collaborate to make healthcare decisions. The process encourages patients to take a more active role in their care and treatment.

Thank You to Our Program Collaborators	Partner Resources | LLS
CancerGRACE **Cancer Support Community** **CURE** **The Leukemia & Lymphoma Society** **MyHealthTeam**	CAR T-Cell Therapy: Side Effects (Video) The CAR T-Cell Therapy Process (Download) FACT SHEET | Chimeric Antigen Receptor (CAR) T-Cell Therapy (Download) Let's Talk About CAR T-Cell Therapy as a Treatment Option: Blood Cancers (Webcast)

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