The Future of Treatment for Patients With Relapsed/Refractory Multiple Myeloma

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By Kenneth C. Anderson, MD [1]

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Multiple myeloma (MM) is the second most common hematologic malignancy in the United States, affecting slightly more men than women and twice as many African Americans as Caucasians. Despite current approaches to treatment, including more effective induction therapy, one or more autologous stem cell transplants, and consolidation/maintenance strategies, MM ultimately remains incurable. However, treatment advances in the past decade have more than doubled the survival duration for patients with MM and have led to increasing numbers of patients with relapsed and/or refractory disease who require treatment for continued disease control.

The goal of this supplement is to present a comprehensive overview of the major current and emerging treatment options for patients with relapsed and/or refractory MM, with particular focus on proteasome inhibitors and immunomodulatory drugs, along with other emerging agents (eg, histone deacetylase inhibitors, heat shock protein inhibitors, and monoclonal antibodies). As the treatment landscape has evolved, it has become readily apparent that the available therapies have different tolerability profiles depending on patient and disease characteristics. Thus, the wealth of individual patient information that factors into treatment decisions (eg, comorbidities, prior therapies, response history) is also taken into account. Consideration is given to the tolerability of therapies and therapeutic classes, as well as to measures for dealing with specific adverse effects. This supplement concludes with a perspective on the future of treatment options for relapsed and/or refractory MM, paying particular attention to the developing role of proteasome inhibitors as a backbone of therapeutic regimens.

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