Three-drug tx ups survival in light-chain amyloidosis

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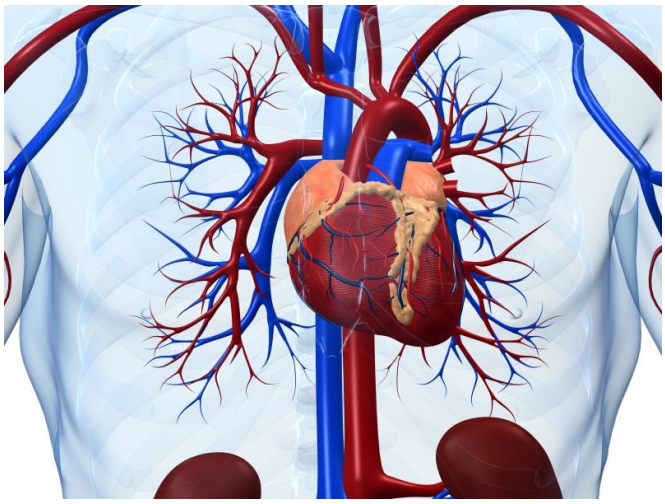

(HealthDay)—For patients with heart failure due to light-chain amyloidosis (AL), three-drug therapy with bortezomib, dexamethasone, and an alkylating agent (BDex+AA) is associated with improved survival, according to a study published in the June 28 issue of the *Journal of the American College of Cardiology*.

In a retrospective study, Brett W. Sperry, M.D., from the Cleveland Clinic Foundation, and colleagues examined the effect of BDex+AA as a first-line treatment strategy in patients with symptomatic heart failure from AL cardiac amyloidosis. Data were included for 106 treated patients, 40 of whom received the three-drug regimen and 66 of whom received other regimens. Survival was assessed after adjustment for the propensity score for receiving treatment, age, New York Heart Association functional class, and ejection fraction.

The researchers found that mortality was 65, 48, and 76 percent, respectively, overall, in the BDex+AA cohort, and in patients receiving other regimens. After multivariable adjustment, initial treatment with BDex+AA correlated with decreased mortality (hazard ratio, 0.209; P = 0.006). After further adjustment for components of the Mayo Stage the association persisted.

"Use of BDex+AA in the treatment of AL amyloidosis in patients presenting with symptomatic heart failure is associated with improved survival after adjusting for clinical variables," the authors write.

Two authors disclosed financial ties to pharmaceutical companies, including Takeda, the manufacturer of bortezomib.

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