Addition of elotuzumab ups PFS in refractory multiple myeloma

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(HealthDay)—For patients with multiple myeloma in whom treatment with lenalidomide and a proteasome inhibitor has failed, progression-free survival (PFS) is longer in those receiving the immunostimulatory monoclonal antibody elotuzumab in addition to pomalidomide and dexamethasone versus pomalidomide and dexamethasone alone, according to a study published in the Nov. 8 issue of the *New England Journal of Medicine*.

Meletios A. Dimopoulos, M.D., from the National and Kapodistrian University of Athens in Greece, and colleagues randomly assigned 117 patients with multiple myeloma that was refractory or relapsed and refractory to lenalidomide and a proteasome inhibitor to receive either elotuzumab plus pomalidomide and dexamethasone (elotuzumab group, 60 patients) or pomalidomide and dexamethasone alone (control, 57 patients).

The researchers found that median progression-free survival was 10.3 and 4.7 months in the elotuzumab and control groups, respectively, after a minimum follow-up period of 9.1 months. Compared with the control group, the hazard ratio for disease progression or death was 0.54 in the elotuzumab group. The overall response rate was 53 and 26 percent in the elotuzumab and control groups, respectively (odds ratio, 3.25). Neutropenia, anemia, and hyperglycemia were the most common grade 3 or 4 adverse events.

"The results thus far are encouraging, but extended follow-up is warranted to determine long-term efficacy and safety outcomes, including the final analysis of overall survival," the authors write.

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