APTITUDE HEALTH®

EPICS

EPICS CONGRESS COVERAGE: EHA 2020 – FOCUS ON MULTIPLE MYELOMA

June, 2020

MEET THE EXPERTS . . .

EPICS

CHAIR

Maria Victoria Mateos, MD, PhD
University of Salamanca
Salamanca, Spain

FACULTY

Irene Ghobrial, MD
Harvard Medical School
Dana-Farber Cancer Institute
Boston, MA

Sagar Lonial, MD, FACP
Emory University School of Medicine
Atlanta, GA

Niels van de Donk, MD, PhD
Amsterdam University Medical Center
Amsterdam, the Netherlands

Mario Boccadoro, MD
Azienda Ospedaliero-Universitaria Città della Salute
e della Scienza di Torino
Torino, Italy

Mohamad Mohty, MD, PhD
Saint-Antoine Hospital and Sorbonne University
Paris, France

AGENDA

EPICS

Time	Topic	Speaker/Moderator
16.30 – 16.35	Welcome and Introductions	Maria-Victoria Mateos, MD, PhD
16.35 – 16.40	**Smoldering Myeloma**	Irene Ghobrial, MD
16.40 – 16.55	Discussion	All
16.55 – 17.00	*Key Takeaways*	Irene Ghobrial, MD
17.00 – 17.10	**First-Line (1): Transplant-Ineligible Multiple Myeloma**	Niels van de Donk, MD, PhD
17.10 – 17.25	Discussion	All
17.25 – 17.30	*Key Takeaways*	Niels van de Donk, MD, PhD
17.30 – 17.40	**First-Line (2): Induction in Transplant-Eligible Multiple Myeloma**	Mohamad Mohty, MD, PhD
17.40 – 17.55	Discussion	All
17.55 – 18.00	*Key Takeaways*	
18.00 – 18.10	**BREAK**	All
18.10 – 18.20	**First-Line (3): Assessing Prognosis**	Sagar Lonial, MD, FACP
18.20 – 18.35	Discussion	All
18.35 – 18.40	*Key Takeaways*	Sagar Lonial, MD, FACP
18.40 – 18.55	**Relapsed/Refractory: Novel Therapies**	Mario Boccadoro, MD
18.55 – 19.20	Discussion	All
19.20 – 19.25	*Key Takeaways*	Mario Boccadoro, MD
19.25 – 19.30	Summary and Closing Remarks	Maria-Victoria Mateos, MD, PhD

APTITUDE HEALTH®

EPICS

Smoldering Myeloma

EP950: OVER TEN YEARS OF F/U FOR PHASE 3 TRIAL IN SMOLDERING MYELOMA AT HIGH RISK OF PROGRESSION TO MYELOMA: SUSTAINED TTP AND OS BENEFIT WITH RD VERSUS NO TREATMENT. M.V. Mateos, et al

EPICS

Background

> Smoldering multiple myeloma (SMM) is a heterogeneous disease in terms of risk of progression to MM, and patients at high risk may

EP946: QIP-MASS SPECTROMETRY INCLUDING FREE LIGHT CHAINS IN HIGH-RISK MYELOMA PATIENTS ENROLLED IN THE GEM-CESAR TRIAL: COMPARISON WITH CONVENTIONAL AND MRD DISEASE IMWG RESPONSE ASSESSMENT. N. Puig, et al

EPICS

Background

> The GEM-CESAR trial is a potentially curative strategy for high-risk SMM patients in which the primary endpoint is achievement of

EP870: RESPONSE TO BLOCKADE OF THE INHIBITORY IMMUNE CHECKPOINT TIGIT PROMOTES ANTI-TUMOR IMMUNITY IN MULTIPLE MYELOMA. C. Fernández De Larrea, et al

EPICS

Background

> T-cell immunoreceptor with immunoglobulin and immunoreceptor tyrosine-based inhibition motif (ITIM) domains (TIGIT) is an ITIM-

EP925: IDENTIFICATION OF CIRCULATING PLASMA CELLS IN MULTIPLE MYELOMA, MGUS AND SMOULDERING MYELOMA BFLOW CYTOMETRY, USING A SINGLE PLATFORM-QUANTITATIVE METHOD. G.M. Morocutti, et al

Background

> In previous studies, malignant circulating plasma cells (CPCs) have been isolated from the peripheral blood (PB) of some MM

DISCUSSION: SMOLDERING MYELOMA (1/2)

EPICS

- Definition of SMM
  - The experts agree the 20/20/20 model for risk-stratification endorsed by the International Myeloma Working

DISCUSSION: SMOLDERING MYELOMA (2/2)

EPICS

- Treatment (con't)
  - The ideal situation would have patients risk-stratified to elucidate their best treatment options; Len, Len-

APTITUDE HEALTH®

EPICS

First-Line Transplant-Ineligible Multiple Myeloma

S200: IXAZOMIB VS PLACEBO AS POST-INDUCTION MAINTENANCE THERAPY IN NEWLY DIAGNOSED MULTIPLE MYELOMA (NDMM) PATIENTS (PTS) NOT UNDERGOING AUTOLOGOUS STEM CELL TRANSPLANT (ASCT): PHASE 3 TOURMALINE-MM4 TRIAL. M.A. Dimopoulos, et al

EPICS

Background

> Maintenance therapy following initial treatment has been shown to delay disease progression in non-ASCT NDMM patients. A number of

maintenance option for non-ASCT NDMM patients

S201: PRIMARY ANALYSIS OF THE RANDOMIZED PHASE II TRIAL OF BORTEZOMIB, LENALIDOMIDE, DEXAMTHASONE WITH/WITHOUT ELOTUZUMAB FOR NEWLY DIAGNOSED, HIGH RISK MULTIPLE MYELOMA (SWOG-1211). S. Usmani, et al

EPICS

Background

> The introduction of immunomodulatory agents, PIs, and ASCT has improved outcomes for patients with MM, but those with high-risk

PB2185: PHASE III (IMROZ) STUDY DESIGN: ISATUXIMAB PLUS BORTEZOMIB, LENALIDOMIDE, AND DEXAMETHASONE (VRD) VERSUS VRD IN TRANSPLANT-INELIGIBLE PATIENTS WITH NEWLY DIAGNOSED MULTIPLE MYELOMA. T. Facon, et al

EPICS

Background

> Combining VRd with a mAb may further improve efficacy in NDMM. Isa is an anti-CD38 mAb that demonstrates antitumor and

EP983: UPDATES FROM A PHASE IB STUDY OF ISATUXIMAB, BORTEZOMIB AND DEXAMETHASONE PLUS CYCLOPHOSPHAMIDE OR LENALIDOMIDE IN TRANSPLANT INELIGIBLE NEWLY DIAGNOSED MULTIPLE MYELOMA. E.M. Ocio, et al

EPICS

Background

> The combination of Bort and Dex (Vd) with either cyclophosphamide (C) or lenalidomide (R) is an effective regimen in MM. Isa, a

EP961: CARFILZOMIB IN COMBINATION WITH EITHER RD OR TD OVERCOMES THE NEGATIVE IMPACT OF HR CYTOGENETICS IN NDMM. INTERIM EFFICACY ANALYSIS OF COMBINED DATA OF KRD VS KTD FOLLOWED BY K MAINTENANCE OR CONTROL. H. Ludwig, et al

EPICS

Background

> Patients with high-risk cytogenetics show inferior outcomes compared with patients with standard risk, as many drugs and/or

EP974: IFM 2012-03 FINAL ANALYSIS, CARFILZOMIB MAINTENANCE FOR NON-TRANSPLANT ELIGIBLE NEWLY DIAGNOSED MULTIPLE MYELOMA. A. Bobin, et al

EPICS

Background

> Since Bort-melphalan-prednisone (VMP) is among the best standard of care (SOC) for non–transplant-eligible (NTE) NDMM, the

EP929: EFFICACY AND TOLERABILITY OF INDUCTION TREATMENT WITH IXAZOMIB, DARATUMUMAB AND LOW-DOSE DEXAMETHASONE IN FRAIL NEWLY DIAGNOSED MULTIPLE MYELOMA PATIENTS – RESULTS OF THE PHASE II HOVON 143 TRIAL. C. Stege, et al

Background

> NTE-NDMM patients who are frail according to the International Myeloma Working Group frailty index (IMWG-FI) have inferior OS as

KEY TAKEAWAYS: FIRST-LINE TRANSPLANT-INELIGIBLE MULTIPLE MYELOMA (1/5)

EPICS

> Definition of transplant ineligible

KEY TAKEAWAYS: FIRST-LINE TRANSPLANT-INELIGIBLE MULTIPLE MYELOMA (2/5)

EPICS

- Standard-risk patients

KEY TAKEAWAYS: FIRST-LINE TRANSPLANT-INELIGIBLE MULTIPLE MYELOMA (3/5)

EPICS

> Monoclonal anti-CD38 antibodies in frontline

KEY TAKEAWAYS: FIRST-LINE TRANSPLANT-INELIGIBLE MULTIPLE MYELOMA (4/5)

EPICS

> Monoclonal anti-CD38 antibodies in the frontline (con't)

KEY TAKEAWAYS: FIRST-LINE TRANSPLANT-INELIGIBLE MULTIPLE MYELOMA (5/5)

EPICS

- PIs

APTITUDE HEALTH®

EPICS

First-Line Induction in Transplant-Eligible Multiple Myeloma

S203: BORTEZOMIB, LENALIDOMIDE AND DEXAMETHASONE WITH OR WITHOUT ELOTUZUMAB AS INDUCTION THERAPY FOR NEWLY-DIAGNOSED, TRANSPLANT-ELIGIBLE MULTIPLE MYELOMA. H. Goldschmidt, et al

EPICS

Background

> The anti-CD38 mAb Dara has become an established component of the treatment of NDMM. Comparative phase III trial data on the

ASCO LBA3: Carfilzomib, lenalidomide, and dexamethasone (KRd) versus bortezomib, lenalidomide, and dexamethasone (VRd) for initial therapy of newly diagnosed multiple myeloma (NDMM): Results of ENDURANCE (E1A11) phase III trial. S. Kumar, et al

EPICS

Background

> Carfilzomib in combination with Len-Dex (KRd) has shown higher efficacy in phase II trials. This randomized phase III trial was

S204: DEPTH OF RESPONSE TO ISATUXIMAB, CARFILZOMIB, LENALIDOMIDE AND DEXAMETHASONE (ISA-KRD) IN FRONT-LINE TREATMENT OF HIGH-RISK MULTIPLE MYELOMA: INTERIM ANALYSIS OF THE GMMG-CONCEPT TRIAL. K. Weisel, et al

EPICS

Background

> This phase II trial evaluated the anti-CD38 mAb Isa plus KRd (Isa-KRd) in NDMM high-risk patients. The authors reported results of

EP936: HOW TO DEFINE AND PREDICT UNSUSTAINED CR IN TRANSPLANT-ELIGIBLE MULTIPLE MYELOMA: A SUB ANALYSIS OF THE GEM2012MENOS65 TRIAL. A. Jiménez Ubieto, et al

Background

> Recent studies with optimized induction followed by high-dose therapy (HDT) and ASCT show CR rates above 50%. Despite

EP914: AUTOLOGOUS NK CELL-BASED IMMUNOTHERAPY FOR MAINTENANCE TREATMENT OF MULTIPLE MYELOMA. H. Nahi, et al

Background

> Few approaches have been made toward exploring the potential of autologous NK cells. Authors demonstrated the applicability of

KEY TAKEAWAYS: FIRST-LINE INDUCTION IN TRANSPLANT-ELIGIBLE MULTIPLE MYELOMA (1/2)

EPICS

- SOC for induction, and standard- and high-risk patients

KEY TAKEAWAYS: FIRST-LINE INDUCTION IN TRANSPLANT-ELIGIBLE MULTIPLE MYELOMA (2/2)

EPICS

- High-risk patients: additional data are still needed to determine if the quadruplet regimen (Dara plus

APTITUDE HEALTH®

EPICS

First-Line: Assessing Prognosis

S195: LARGE SCALE WHOLE GENOME PROFILING OF NEWLY DIAGNOSED MULTIPLE MYELOMA PATIENTS IDENTIFIES GENOMICALLY DEFINED ULTRA-LOW RISK GROUP. M. Samur, et al

Background

S207: MRD EVALUATION BY PET/CT ACCORDING TO DEAUVILLE CRITERIA COMBINED WITH BONE MARROW TECHNIQUES IN NEWLY DIAGNOSED TRANSPLANT ELIGIBLE MULTIPLE MYELOMA PATIENTS ENROLLED IN THE PHASE II FORTE TRIAL. E. Zamagni, et al

Background

EP933: A NEW RISK STRATIFICATION STRATEGY IN NEWLY DIAGNOSED MULTIPLE MYELOMA: AN ANALYSIS ON MATURE DATA FROM EUROPEAN CLINICAL TRIALS WITHIN THE HARMONY BIG DATA PLATFORM. M. D'Agostino, et al

Background

EP942: S-ERMM: A SIMPLIFIED SCORE TO PREDICT EARLY RELAPSE IN NEWLY DIAGNOSED MULTIPLE MYELOMA. ANALYSIS FROM A POOLED DATASET OF 2190 PATIENTS. G.M. Zaccaria, et al

EPICS

Background

EP960: MULTIPARAMETER FLOW CYTOMETRY (MFC) AND NEXT GENERATION SEQUENCING (NGS) FOR MINIMAL RESIDUAL DISEASE (MRD) EVALUATION: RESULTS OF THE FORTE TRIAL IN NEWLY DIAGNOSED MULTIPLE MYELOMA (MM). S. Oliva, et al

Background

KEY TAKEAWAYS: FIRST-LINE – ASSESSING PROGNOSIS (1/2)

EPICS

- Prognostic tools for risk-stratification

KEY TAKEAWAYS: FIRST-LINE – ASSESSING PROGNOSIS (2/2)

EPICS

- MRD negativity

APTITUDE HEALTH®

EPICS

Relapsed/Refractory: Novel Therapies

EP939: UPDATED RESULTS FROM BELLINI, A PHASE 3 STUDY OF VENETOCLAX OR PLACEBO IN COMBINATION WITH BORTEZOMIB AND DEXAMETHASONE IN RELAPSED/REFRACTORY MULTIPLE MYELOMA. S.K. Kumar, et al

EPICS

Background

EP957: OPTIMISMM SUBANALYSIS: POMALIDOMIDE, BORTEZOMIB, DEXAMETHASONE AFTER 1 PRIOR LINE OF THERAPY IN RELAPSED OR REFRACTORY MULTIPLE MYELOMA BY AGE, PRIOR TRANSPLANT, AND HIGH-RISK CYTOGENETICS. M. Dimopoulos, et al

EPICS

Background

EP984: EFFICACY AND SAFETY OF DARATUMUMAB WITH DEXAMETHASONE IN PATIENTS WITH RELAPSED/REFRACTORY MULTIPLE MYELOMA AND SEVERE RENAL IMPAIRMENT: PRELIMINARY RESULTS OF THE PHASE 2 DARE STUDY. E. Kastritis, et al

Background

EP945: HORIZON (OP-106): MELFLUFEN PLUS DEXAMETHASONE IN RELAPSED/REFRACTORY MULTIPLE MYELOMA (RRMM) REFRACTORY TO POMALIDOMIDE AND/OR AN ANTI-CD38 MONOCLONAL ANTIBODY – PRIMARY AND SUBGROUP ANALYSIS. P.G. Richardson, et al

EPICS

Background

EP938: CARFILZOMIB, DEXAMETHASONE (KD) AND DARATUMUMAB VERSUS KD IN RELAPSED OR REFRACTORY MULTIPLE MYELOMA: SUBGROUP ANALYSIS OF THE CANDOR STUDY BY NUMBER OF PRIOR LINES OF THERAPY AND PRIOR THERAPIES. K. Weisel, et al

EPICS

Background

PB2184: PHASE III (IKEMA) STUDY DESIGN: ISATUXIMAB PLUS CARFILZOMIB AND DEXAMETHASONE (KD) VS KD IN PATIENTS WITH RELAPSED/REFRACTORY MULTIPLE MYELOMA (RRMM). P. Moreau, et al

Background

EP1037: DREAMM-2: SINGLE-AGENT BELANTAMAB MAFODOTIN (GSK2857916) IN PATIENTS WITH RELAPSED/ REFRACTORY MULTIPLE MYELOMA (RRMM) AND HIGH-RISK (HR) CYTOGENETICS. AD Cohen, et al.

EP970: DREAMM-2: SINGLE-AGENT BELANTAMAB MAFODOTIN IN RELAPSED/REFRACTORY MULTIPLE MYELOMA REFRACTORY TO PROTEASOME INHIBITORS, IMMUNOMODULATORY AGENTS, AND REFRACTORY AND/OR INTOLERANT TO ANTI-CD38 MABS. S. Lonial, et al

EPICS

EP1048: DREAMM-2: DREAMM-2 PIVOTAL STUDY: ANALYSIS OF THE LYOPHILIZED PRESENTATION COHORT OF SINGLE-AGENT BELANTAMAB MAFODOTIN FOR RELAPSED/REFRACTORY MULTIPLE MYELOMA, PG Richardson, et al.
EP937: DREAMM-2: SINGLE-AGENT BELANTAMAB MAFODOTIN IN PATIENTS WITH RELAPSED/REFRACTORY MULTIPLE MYELOMA (RRMM) – OUTCOMES BY PRIOR THERAPIES. S. Lonial, et al

EPICS

Background

Results

Conclusions

EP955: DREAMM-4: EVALUATING SAFETY AND CLINICAL ACTIVITY OF BELANTAMAB MAFODOTIN IN COMBINATION WITH PEMBROLIZUMAB IN PATIENTS WITH RELAPSED/REFRACTORY MULTIPLE MYELOMA (RRMM), AK Nooka, et al.
EP1031: DREAMM-6: SAFETY AND TOLERABILITY OF BELANTAMAB MAFODOTIN IN COMBINATION WITH BORTEZOMIB/DEXAMETHASONE IN RELAPSED/REFRACTORY MULTIPLE MYELOMA (RRMM). R. Popat, et al

EPICS

S205: INTERIM RESULTS FROM THE FIRST PHASE 1 CLINICAL STUDY OF THE B-CELL MATURATION ANTIGEN (BCMA) 2+1 T CELL ENGAGER (TCE) CC-93269 IN PATIENTS (PTS) WITH RELAPSED/REFRACTORY MULTIPLE MYELOMA (RRMM). L.J. Costa, et al

EPICS

Background

S206: A PHASE 1 STUDY OF TECLISTAMAB, A HUMANIZED B-CELL MATURATION ANTIGEN (BCMA) X CD3 BISPECIFIC ANTIBODY, FOR THE TREATMENT OF RELAPSED AND/OR REFRACTORY MULTIPLE MYELOMA (RRMM). M.V. Mateos, et al

EPICS

Background

KEY TAKEAWAYS: RELAPSED/REFRACTORY – NOVEL THERAPIES (1/4)

- As new drugs, like PIs, IMiDs, or mAbs, and the new combinations move to frontline, the landscape

KEY TAKEAWAYS: RELAPSED/REFRACTORY – NOVEL THERAPIES (2/4)

EPICS

Choice of therapies in third line and beyond

KEY TAKEAWAYS: RELAPSED/REFRACTORY – NOVEL THERAPIES (3/4)

EPICS

Disease characteristics that may influence choice of therapies in third line and beyond

- In one expert's view, for patients who are not t(11;14) and are resistant to PIs, immunomodulatory

KEY TAKEAWAYS: RELAPSED/REFRACTORY – NOVEL THERAPIES (4/4)

- DREAMM trials (DREAMM-2, DREAMM-4, DREAMM-6)

APTITUDE HEALTH®

US Headquarters
5901-C Peachtree Dunwoody Road NE
Suite 200, Atlanta, GA 30328, US

EU Headquarters
Wilhelmina van Pruisenweg 104
2595 AN The Hague, the Netherlands

aptitude-health.com