

Multiple myeloma is the second most common blood cancer. People with multiple myeloma have an increase in abnormal plasma cells in the bone marrow and in most cases an increase in a type of protein called monoclonal protein in the blood or urine.

You could have general symptoms of tiredness due to low blood counts, infections or pain related to the bone destruction or fractures or you may not have symptoms and may have been diagnosed by findings of low blood counts on routine testing.

Multiple myeloma is more common in those age 65 and older with the majority being diagnosed between 65 and 74 years of age. The disease is more common in men than women. African Americans are two times more likely to be diagnosed with multiple myeloma than Whites in the US.

It is not known why multiple myeloma is more likely to develop in some people rather than others. Some people with a pre-cancerous condition “smoldering multiple myeloma” may also have a higher risk of developing the disease.

Your doctor will make a diagnosis of multiple myeloma based on the presence of one or more findings in blood, bone marrow or tests for the bones.

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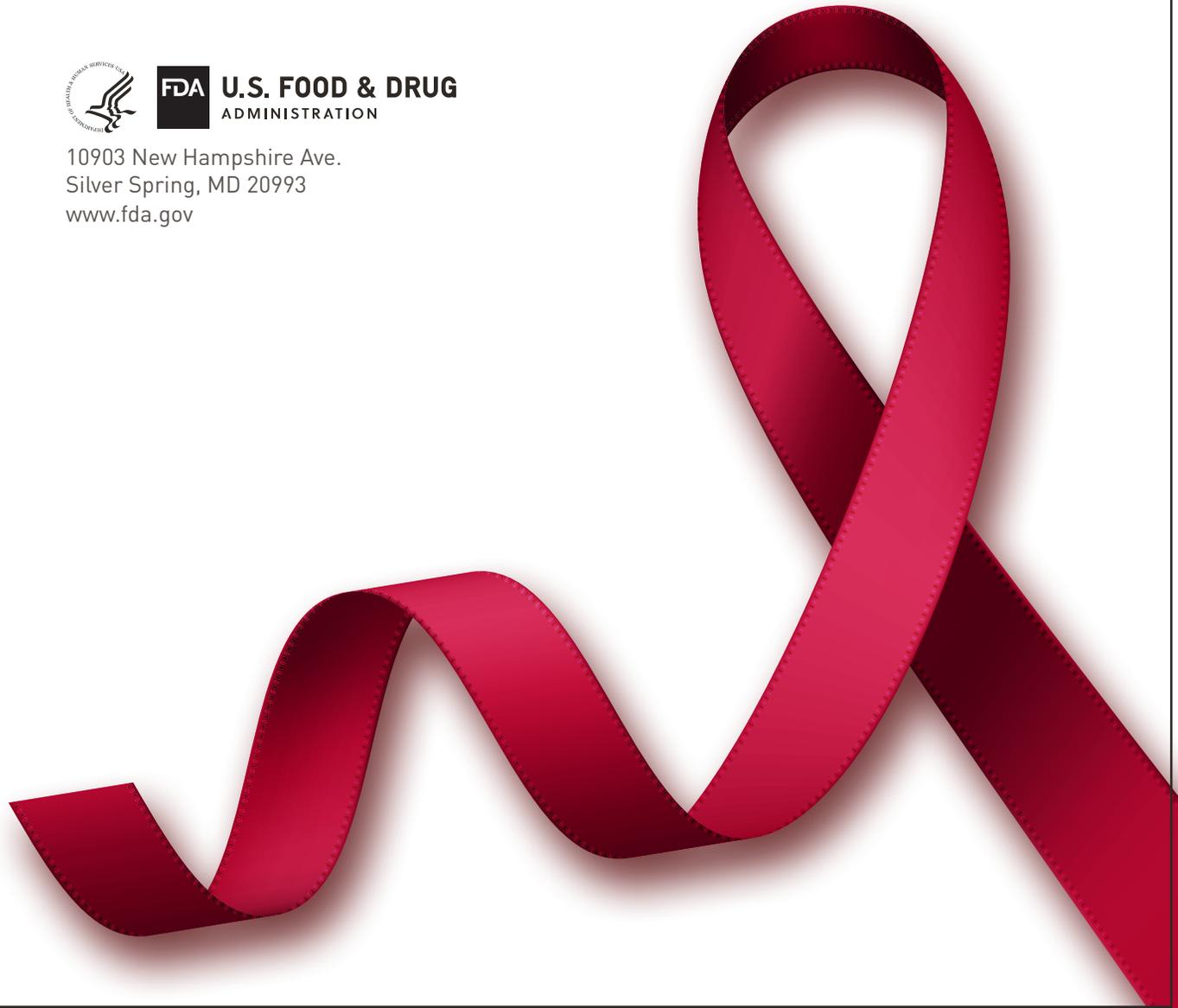


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MULTIPLE MYELOMA





If you've been diagnosed with multiple myeloma, there are reasons for hope.

Although multiple myeloma still remains incurable, people are living longer with the approval of multiple new therapies. Also, there are new drugs in development and opportunities to participate in clinical trials.

32,270

Estimated number of new cases of multiple myeloma in the United States in 2020.

71%

5-year survival rate for those diagnosed early

48%

5-year survival rate where cancer has spread to a distant part of the body.

20%

Percentage by which the 5-year survival rate for multiple myeloma improved in the United States from 1999 -2001 to 2010-2016.

What FDA approved treatment options are available for patients with multiple myeloma?

There are several medicines approved to treat multiple myeloma. Some of these drugs can be taken orally, while others are given as an injection through your veins or under the skin (subcutaneous).

Other treatment options for patients diagnosed for the first time or for patients whose disease has come back (relapsed) or not responded to prior treatments (refractory) usually includes combinations (regimen) of drugs from two or three groups usually combined with a steroid.

Your doctor may recommend specific combinations based on the consideration of a stem cell transplant for patients newly diagnosed with multiple myeloma and other aspects like side effects of the drugs. Some medicines are also approved to be given as a single drug (monotherapy) for patients who have relapsed or refractory disease.

Despite many FDA multiple myeloma treatment options available, should I still consider enrolling in a clinical trial?

Clinical trials can be an option for people with life-threatening illnesses including multiple myeloma to try new drugs in development.

Additionally, having more diverse representation in clinical trials can help

with understanding the safety and benefit of new treatments in more patients. Through your enrollment of clinical trials, you help increase knowledge of how specific genetic markers affect the drugs activity and other aspects of the multiple myeloma.

- Clinical Trial information is available through www.clinicaltrials.gov. The FDA does not conduct clinical trial research.
- Expanded Access is a program that allows patients to try an investigational drug outside of a clinical trial. It's also known as Compassionate Use. Visit www.fda.gov and search *Expanded Access for Patients* for more information.

What are the main groups of drugs used to treat multiple myeloma:

- Immunomodulatory drugs
- Proteasome Inhibitors
- Monoclonal antibodies
- Nuclear export inhibitor
- Histone deacetylase inhibitor
- Chemotherapy drugs
- Antibody drug conjugate

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