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Efficacy of First-Line Treatment with DARA-VTD and VRD in Multiple Myeloma Patients Eligible for Autologous Stem Cell Transplantation

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INTRODUCTION

Multiple myeloma is the second most frequent hematological neoplasm. Although patient survival has improved over the past 20 years, only 10% to 15% achieve an expected survival similar to the general population. Treatment has improved with new agents and combinations, but choosing the right treatment has become complex.

AIM

Determine **the strict complete remission rate at 100 days post bone marrow transplant** (CRs +100) in patients with recently diagnosed multiple myeloma treated with D-VTd and VRd. Also to know the response rates, progression-free survival rate, overall survival rate, minimal residual disease rate and toxicity.

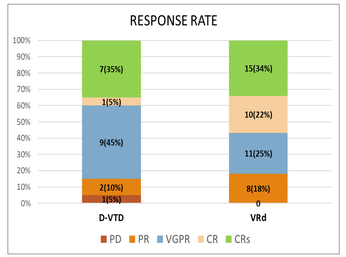
METHOD

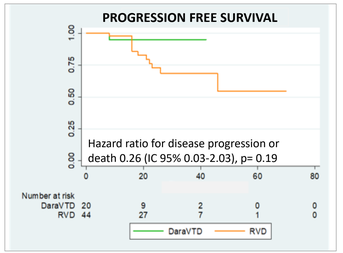
- Retrospective observational study was conducted at the Hospital Italiano de Buenos Aires, including patients from July 2016 to June 2021, comparing two treatment schemes: Daratumumab-VTD (20 patients) and VRd (44 patients).
- Responses were evaluated according to IMWG criteria

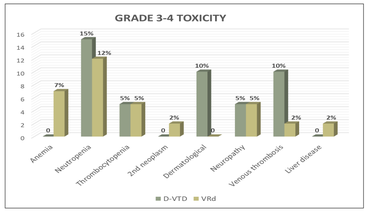
RESULTS

- **35% of the Dara-VTD group and 34% of theVRd group achieved (sCR) on day +100 SCT,** with no statistically significant difference (p=0.9).
- Median PFS and OS were not reached in either group, although the **24-month PFS was 95% for Dara-VTD and 72% for VRD.**
- MRD negative: similar proportion in both arms (30%).
- Toxicity: A higher rate of thromboembolic disease and dermatological reactions was observed in the D-VTD arm.

	D-VTD n (%)	VRd n (%)	Total n(%)	P
Age Median (range), years	55(40-71)	58(39-71)	58 (39-71)	0,7
Male (n,%)	9(45)	29(66)	38 (59)	0,11
ISS-R				
1	10(50)	21 (48)	31 (48)	0,55
2	7(35)	11(25)	18(28)	
3	3(15)	9(20)	12(18)	
Cytogenetic profile				0,75
Standard risk	17(85)	36(82)	53(83)	
High risk	3(15)	8(18)	11(17)	
Type of MM				0,9
IGG	13(65)	25(57)	38(59)	
IGA	4(20)	10(23)	14(22)	
FLC	3(15)	7(16)	10(16)	
Non-secretory	0(0)	2(4)	2(3)	
LDH				0,32
Normal	20(100)	40(95)	60(95)	
Elevada	0(0)	2(5)	2(5)	







CONCLUSIONS

The results suggest that both treatment schemes are beneficial, with a trend favoring the use of daratumumab in PFS, although without statistically significant differences, partly due to the small sample size of the study. Continuous follow-up of the study is expected to provide more data on the long-term effects of consolidation and maintenance.

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