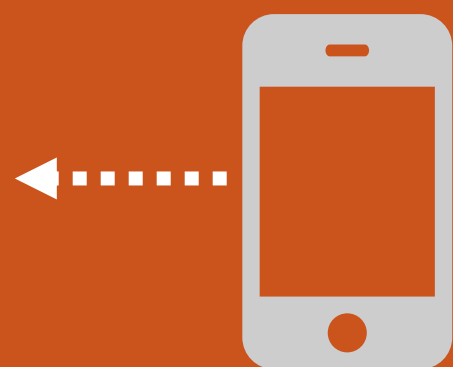


CMV seropositive myeloma patients respond better to CD38-targeting monoclonal antibodies in a single-center retrospective study.

	CMV seropositive (n=64)	CMV seronegative (n=39)	Odds ratio (95% CI)
≥ PR*	43 (67.2%)	17 (43.6%)	2.65 (1.17–6.02)
≥ VGPR**	29 (45.3%)	13 (33.3%)	1.66 (0.72–3.79)

*PR = partial response; ** VGPR = very good partial response according to International Myeloma Working Group criteria¹

1. Kumar S, Paiva B, Anderson KC, et al. International Myeloma Working Group consensus criteria for response and minimal residual disease assessment in multiple myeloma. The Lancet Oncology. 2016;17(8):e328–e346. doi:10.1016/S1470-2045(16)30206-6



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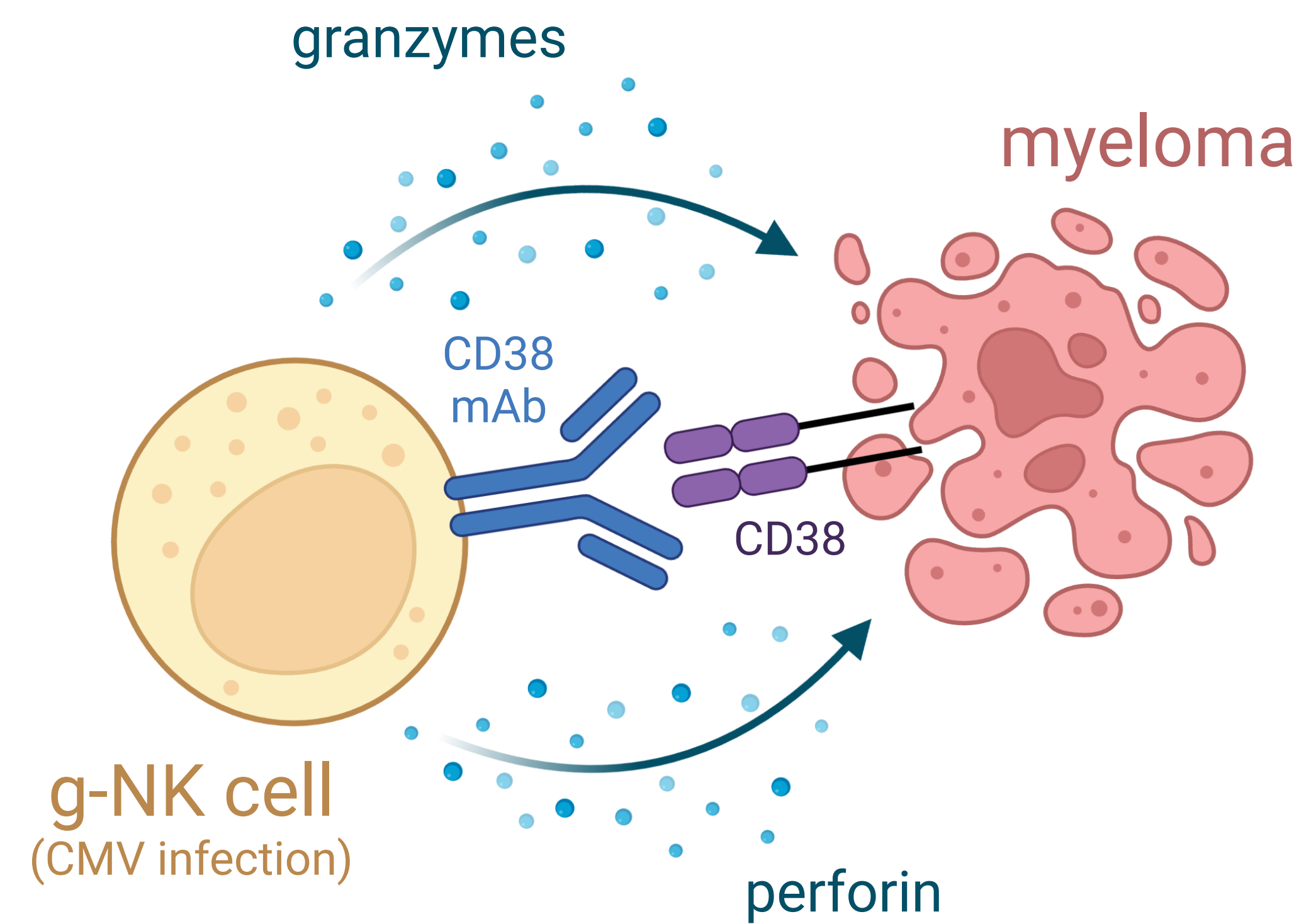
CMV seropositivity is associated with improved responses to CD38 monoclonal antibody therapies in multiple myeloma: A single-center retrospective study

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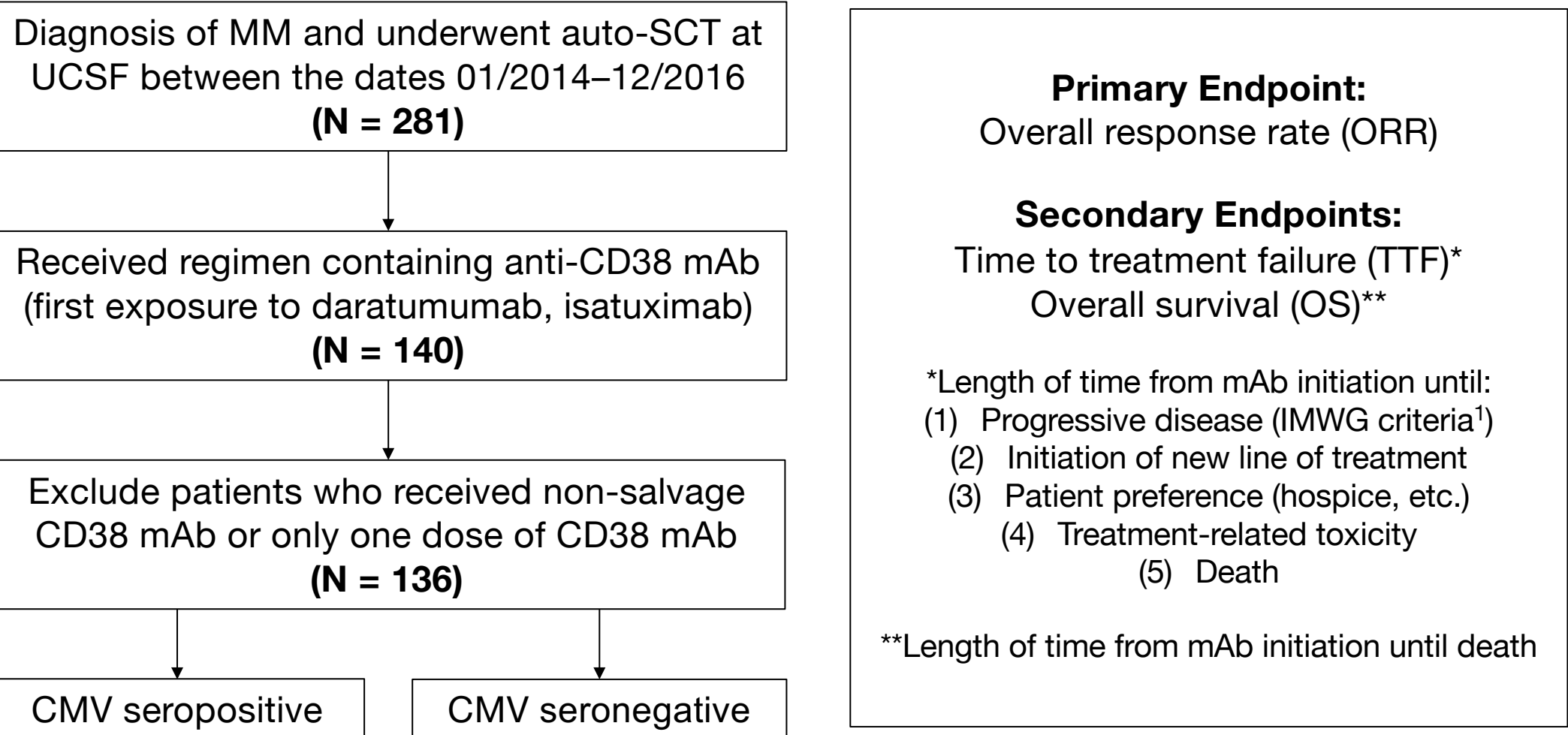
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Background

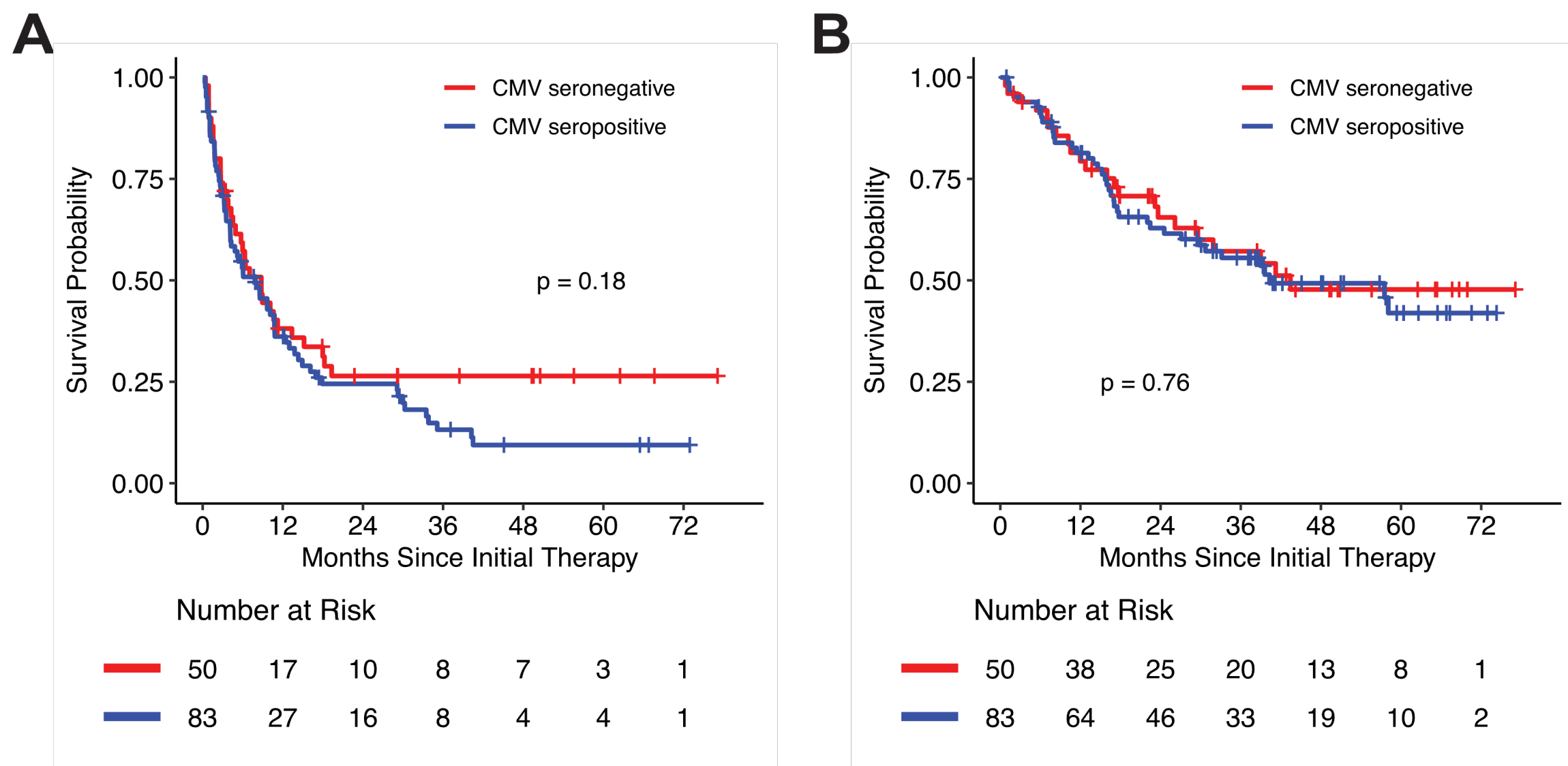


Methods



Results

- CMV serostatus was associated with improved overall response to CD38 mAbs (adjusted OR 2.66, 95% CI 1.02–7.22) after adjusting for the number of prior lines of therapy, treatment regimen, age at CD38 mAb exposure, and time between transplant and CD38 mAb.
- CMV serostatus was associated with shorter TTF in a multivariate Cox model (7.8 vs. 8.8 months in the CMV seropositive vs. CMV seronegative groups, respectively, hazard ratio 1.98, 95% CI 1.25–3.12).
- CMV serostatus was not a significant predictor of OS.



Discussion

- While unable to be directly examined in this study, we hypothesize that the improved response rates seen in CMV seropositive patients are related to these patients having greater proportions of g-NK cells.
- These findings help inform ongoing efforts to develop off-the-shelf g-NK cell therapies that can be administered with CD38 mAbs in the treatment of MM.
- Limitations of our study include a small sample size and a heterogeneous variety of treatment combinations.
- Larger, prospective studies which directly assess for g-NK cells are needed to fully determine the impact of g-NK cells on outcomes related to MM.

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