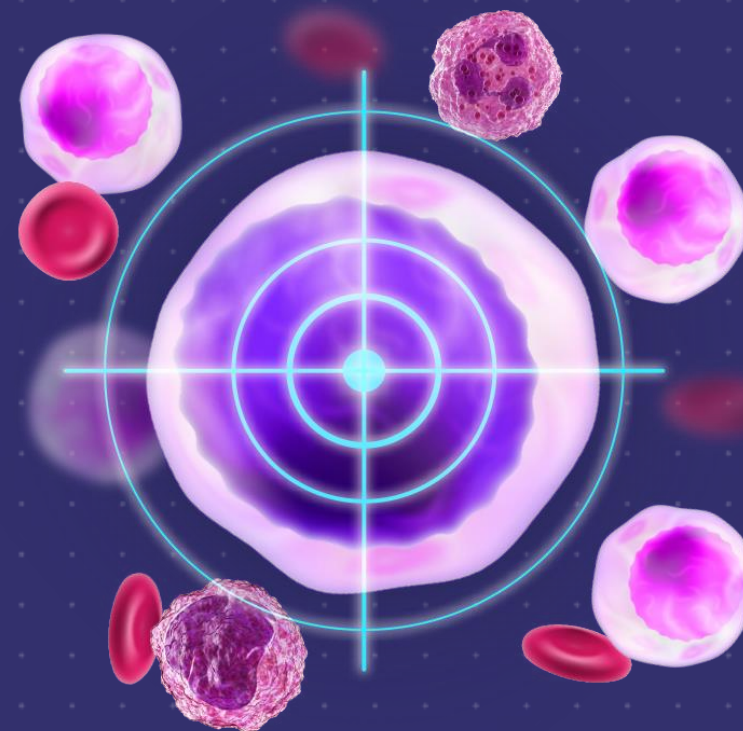


Should *cure* be the goal
for multiple myeloma?



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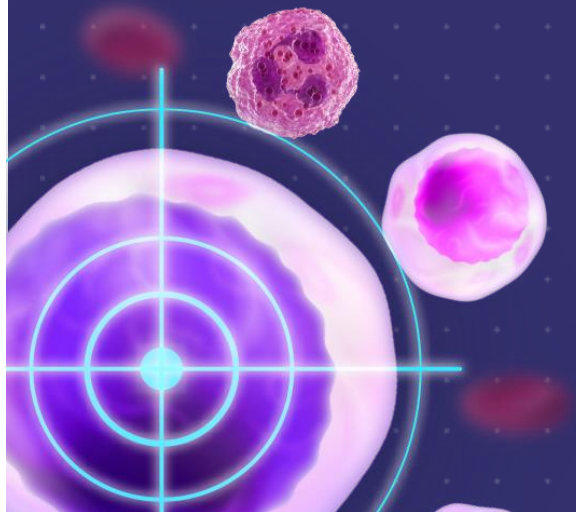
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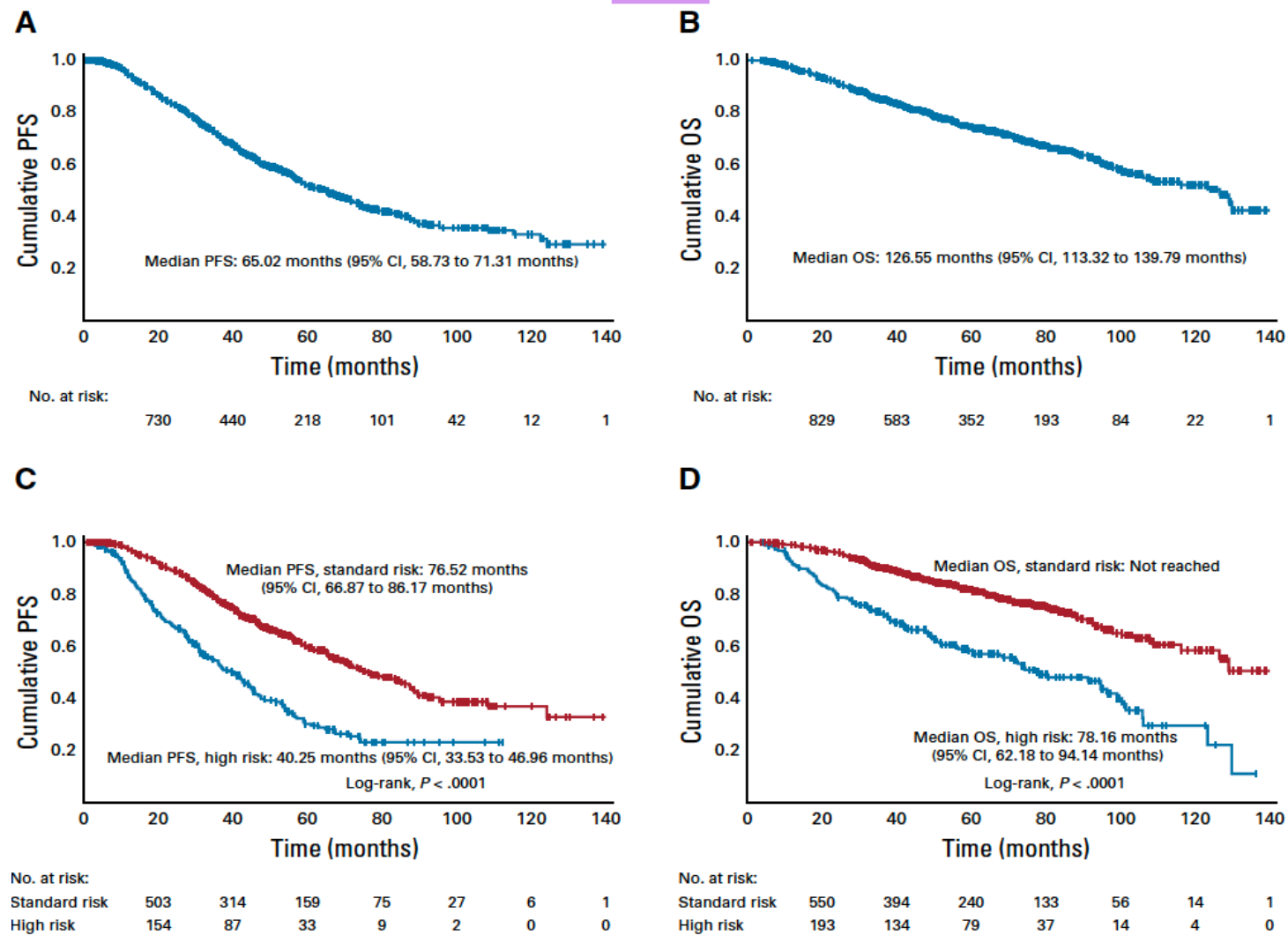
Summary and conclusions

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Experience from the RVD 1000 series: a new benchmark for PFS and OS

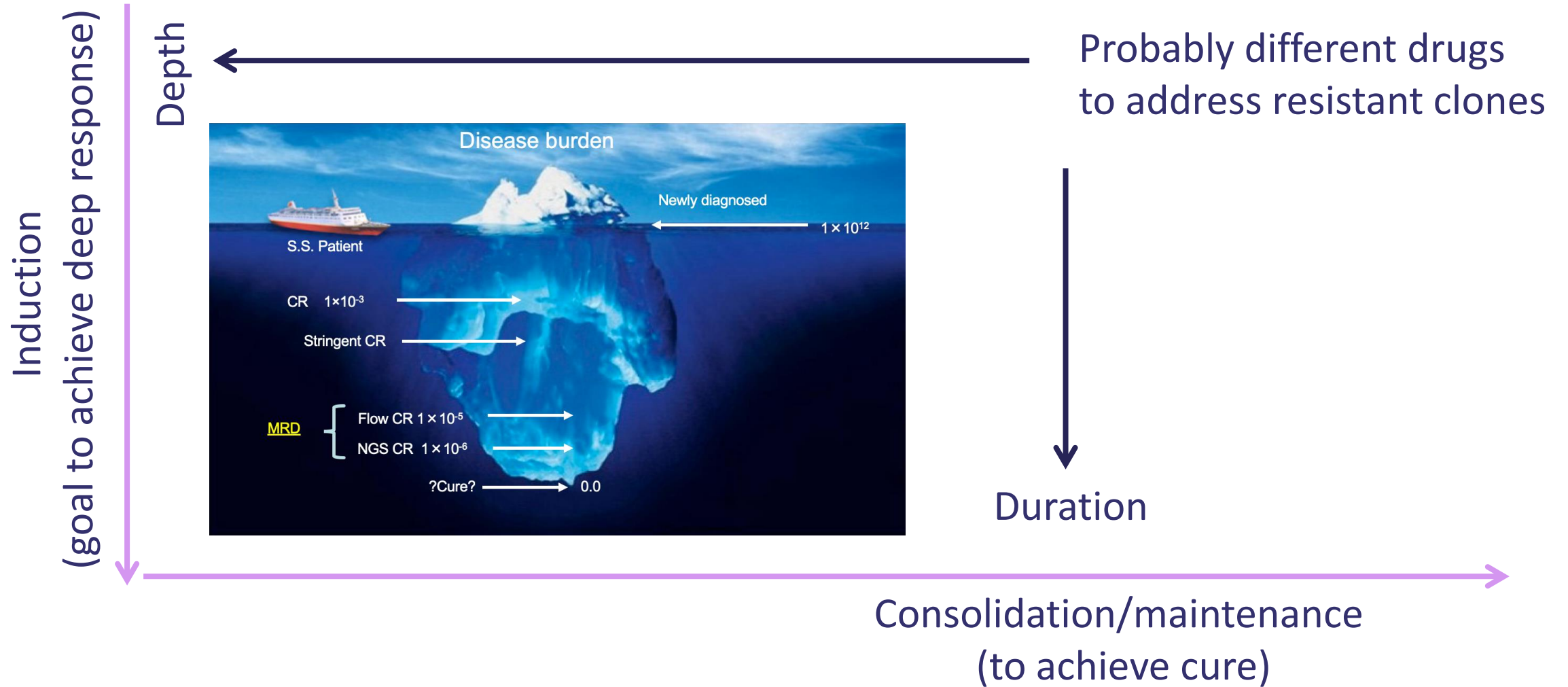


CI, confidence interval; No, number; OS, overall survival; PFS, progression-free survival; RVD, lenalidomide, bortezomib, dexamethasone. Joseph NS, et al. *J Clin Oncol*. 2020;38(17):1928-1937

'Cure' is in the eye of the beholder

- A complicated disease like MM is going to have many different definitions of cure.
- These may not fully identify with existing definitions, as this is not HL, testicular CA, DLBCL, or ALL.
- While it is the hope that early intervention with precursor conditions may increase the cure rate, this is not proven, and evidence suggests this may not be the case.
- The use of MRD as a surrogate for cure may not be ready for prime time;
 - Sustained MRD negativity may be more meaningful.
- Need to distinguish operational or functional cure from old definitions or standards for cure.
- Do not de-escalate therapy till we are clear that outcomes are BETTER (the same is not a step forward).
- While surrogates are great, they must be demonstrated to have better PFS and OS to be meaningful.

Model for elimination of the malignant clone



Thank you



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