

STUDY**Isatuximab, carfilzomib, and dexamethasone in relapsed multiple myeloma: updated analysis from the phase 3 IKEMA trial**Population:
N = 302

Primary endpoint: Progression-free survival
R/R MM with 1–3 prior lines of therapy; no previous carfilzomib; no primary refractory MM; ECOG ≤2

Eligibility: Not refractory to anti-CD38 therapy;
ECOG ≤2

TRIAL DESIGN

Randomization in a 3:2 ratio

Treatment arm, n = 179 (Isatuximab + Carfilzomib + Dexamethasone)

Control arm, n = 123 (Carfilzomib + Dexamethasone)



Isatuximab

10 mg/kg

Cycle 1 days

1 8 15 22

Subsequent cycle days

1 15



Carfilzomib

Cycle 1 days

1 2 8 9 15 16

20 mg/m² 56 mg/m²

Subsequent cycle days

1 2 8 9 15 16

56 mg/m²



Dexamethasone

20 mg

All cycles days

1 2 8 9

15 16 22 23



28-day cycles; to PD or unacceptable toxicity

EFFICACY**Median progression-free survival**

NR vs 19.15 months

HR, 0.53; 99% CI, 0.32–0.89;
one-sided p = 0.0007**2-year progression-free survival rate**

Treatment arm 68.9%

Control arm 45.7%

Very good PR or better
p = 0.0011

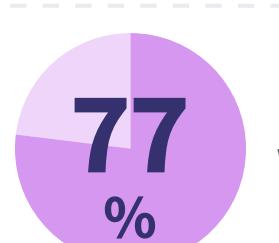
73%
56%

MRD negativity by NGS at 10^{-5}
p = 0.0004

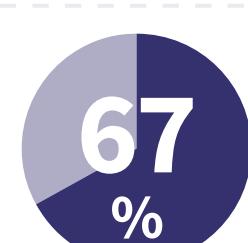
30%
13%

Complete renal response

52%
31%

Treatment arm

Patients with Grade ≥ 3 TAEs

**Control arm****Patients with TAEs leading to treatment discontinuation**

8% 14%

Most common TEAEs (any grade):

83%	Respiratory infection	74%
46%	Infusion-related reactions	3%
37%	Hypertension	31%
36%	Diarrhea	29%

Grade ≥3 hematologic AEs:

22%	Anemia	20%
19%	Neutropenia	7%
30%	Thrombocytopenia	24%