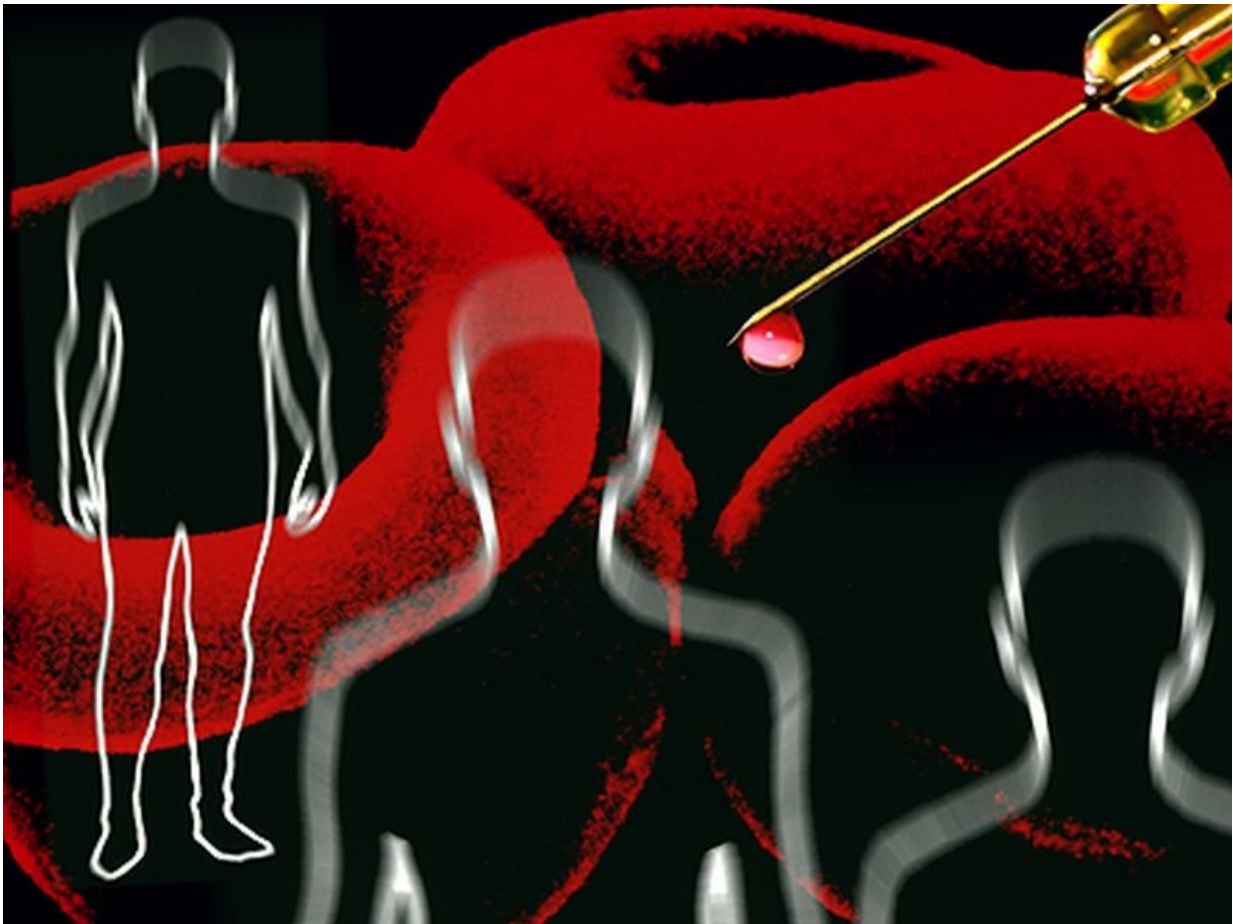


VDT PACE effective in relapsed, refractory multiple myeloma

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(HealthDay)—For heavily pre-treated patients with relapsed/refractory

multiple myeloma (RRMM), bortezomib, dexamethasone, thalidomide, cisplatin, doxorubicin, cyclophosphamide and etoposide (VDT PACE) regimen and its modifications (VDT PACE-like regimens [VPLRs]) are effective, according to a study published online Oct. 25 in the *American Journal of Hematology*.

Arjun Lakshman, M.D., from the Mayo Clinic in Rochester, Minn., and colleagues analyzed outcomes of 141 patients with RRMM who received VPLRs between 2006 and 2017. Patients had received a median of four prior therapies, including [stem cell transplant](#) (SCT) in 66.7 percent. Overall, 67.4 percent of patients received VDT PACE, 14.2 percent received VD PACE, and 18.4 percent received other VPLRs. A median of one cycle of VPLR was received by patients.

The researchers observed \geq minimal [response](#), \geq partial response (PR), and \geq very good PR in 68.4, 54.4, and 10.3 percent of patients, respectively. Median progression-free and overall survival was 3.1 and 8.1 months, respectively. Overall, 82.3 percent of patients received some therapy after VPLR: 61.2 percent received systemic chemotherapy and 38.8 percent underwent SCT. For those who received SCT after VPLR, median overall survival was 15.1 months. For patients receiving VPLRs, age ≥ 60 years and revised international staging system III stage predicted shorter overall survival (hazard ratios, 2.3 and 2.4, respectively).

"VPLRs are effective in heavily pre-treated RRMM," the authors write. "In fit [patients](#), SCT can be used to consolidate the response to VPLR."

Several authors disclosed financial ties to the pharmaceutical industry.

More information: [Abstract](#)
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