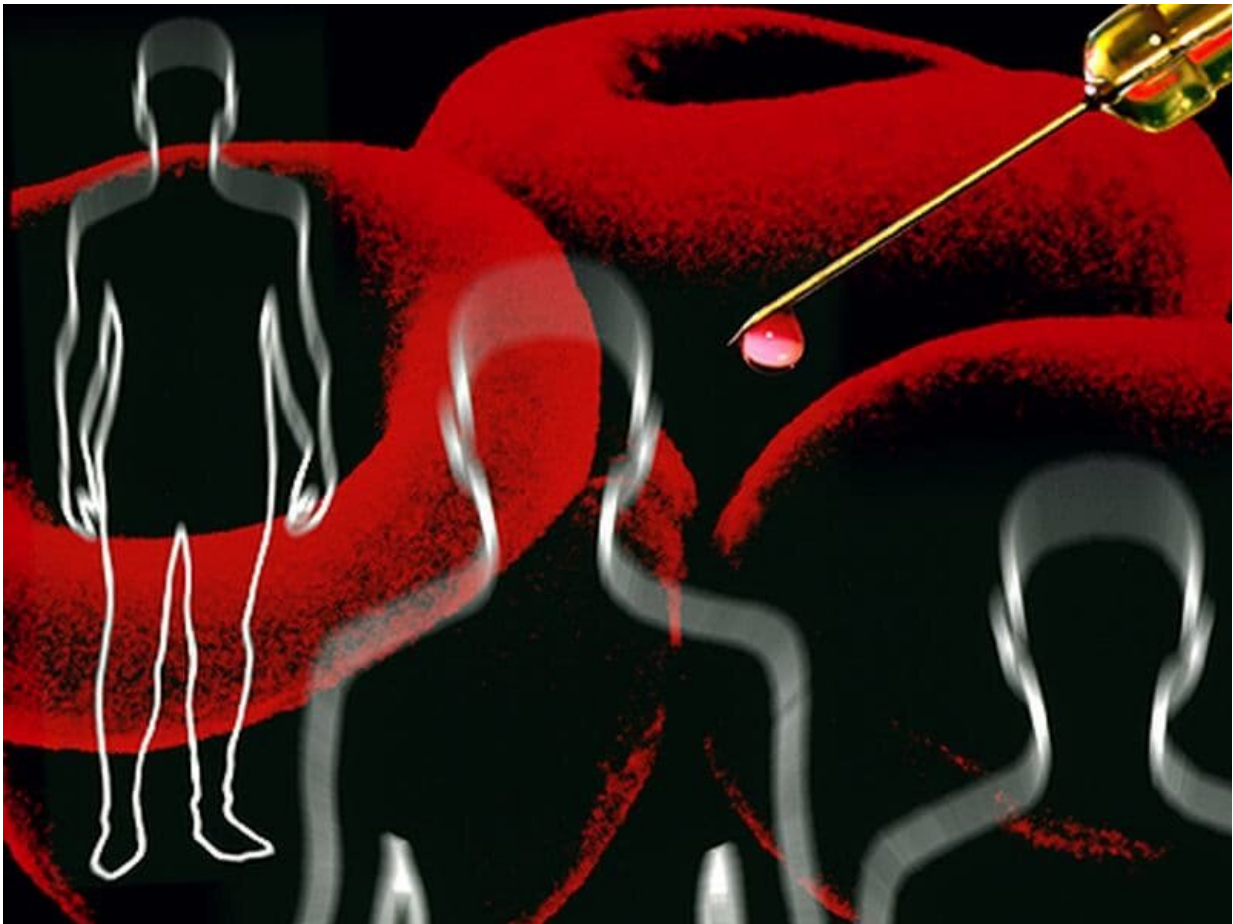


# Recommendations issued for HSCT in multiple myeloma

March 20 2019

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(HealthDay)—A consensus statement for the use of hematopoietic stem

cell transplantation (HSCT) in the treatment of multiple myeloma (MM) has been developed by Mayo Clinic physicians; the recommendations were published in the March issue of *Bone Marrow Transplantation*.

Wilson I. Gonsalves, M.D., from the Mayo Clinic in Rochester, Minnesota, and colleagues developed a [consensus statement](#) and provided evidence-based recommendations on the use of HSCT in MM.

The authors note that autologous stem cell transplant (ASCT) remains an essential component of MM [therapy](#) in eligible patients in the era of novel agent induction therapy regimens. A delayed ASCT is safe and feasible upon first relapse, but an upfront ASCT remains the standard of care in eligible MM patients, especially those with high-risk disease. Performance status and comorbidities should be considered for ASCT eligibility in contrast to strict chronologic age cutoffs; depth of response to induction therapy should not dictate ASCT eligibility. Stem cells should be collected within six months of initiating therapy for all ASCT-eligible MM patients. A tandem ASCT within six months of the first ASCT should be considered in select patients with high-risk disease and good performance status. Routine use of a myeloablative or reduced-intensity conditioning allogeneic stem cell transplant is not recommended as upfront therapy except in the setting of a clinical trial or special circumstances.

"ASCT remains an integral part of the management plan of all newly diagnosed MM [patients](#) who are otherwise eligible," the authors write.

Several authors disclosed financial ties to the pharmaceutical industry.

**More information:** [Abstract/Full Text](#)

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