

Reirradiation rarely required in focal radiation therapy for multiple myeloma

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For patients with multiple myeloma receiving focal radiation therapy

(RT) for symptomatic plasmacytoma, reirradiation is rarely required, according to a letter to the editor published online Jan. 9 in *Haematologica*.

Adnan Elhammali, M.D., from the University of Texas MD Anderson Cancer Center in Houston, and colleagues identified all patients aged ≥ 18 years with a diagnosis of multiple myeloma who were treated with RT from 1999 through 2017. A total of 772 patients treated with RT to 1,513 sites were included; patients were followed for a median of 65.6 months.

The researchers found that the most commonly treated site was the spine (39.4 percent); most [patients](#) were treated at a single site (55.9 percent), while 22.9 and 21.4 percent were treated at two sites and three or more sites, respectively. The median biologically effective dose (BED) was 28.8 Gy₁₀. Overall, 2.6 percent of the 1,513 sites treated underwent reirradiation, with the most common reasons being persistent pain and radiographic progression (90 and 80 percent, respectively). A small but statistically significant increase in reirradiation rates was seen for a BED ≤ 28 Gy₁₀ (3.25 versus 1.83 percent; hazard ratio, 6.16). After completion of the first course of RT, the [median overall survival](#) was 25.6 months, and the one-, three-, and five-year overall survival rates were 66.5, 42.0, and 33.5 percent, respectively.

"Dose escalation to a BED of at least 28 Gy is recommended when durable [local control](#) is desired," the authors write.

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