

DARATUMUMAB-BASED REGIMENS IN PATIENTS AGED ≥ 80 YEARS WITH NEWLY DIAGNOSED MULTIPLE MYELOMA: REAL-WORLD OUTCOMES

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BACKGROUND AND IMPORTANCE | AIM AND OBJECTIVES

Multiple Myeloma (MM) is the 2nd most common hematologic malignancy, with increasing incidence in patients >75 years. The addition of Daratumumab (D) (in Frail individuals) to standard first-line regimens –VMP and Rd– has shown improved progression-free survival (PFS) and overall survival (OS).

 A retrospective, observational study evaluating real-world effectiveness and safety of Daratumumab-based regimens in **33 patients** ≥ 80 years (mean age **84.1 \pm 3.7 yrs**, 51.5% female) with **NDMM**, followed for a median of **5.4 years**.

MATERIAL AND METHODS

Baseline variables included ISS/R-ISS stage, cytogenetics, renal function, albumin, and $\beta 2$ -microglobulin.

- ✓ Effectiveness was assessed by PFS, OS, and progression rate using Kaplan-Meier analysis.
- ✓ Safety was evaluated according to CTCAE v5.0 and treatment modifications.

RESULTS

Regimens
(with D):



60.6 % D-VMP
30.3 % D-Rd
9.10 % D-VCP

CTCAE v5.0



Hematologics **32.7%**
Anemia (20%)

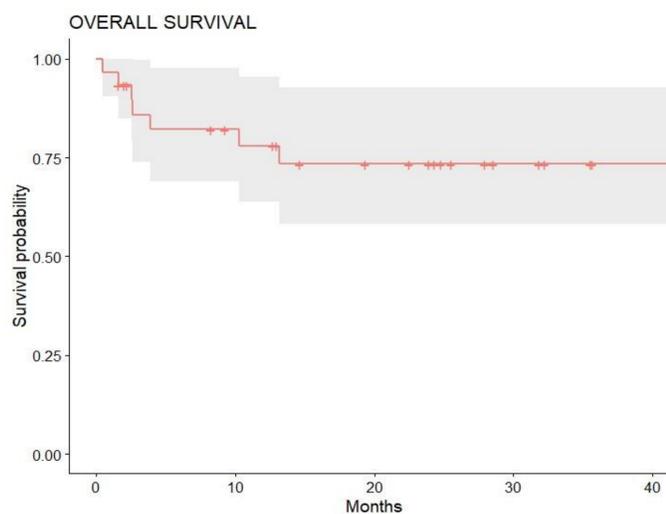
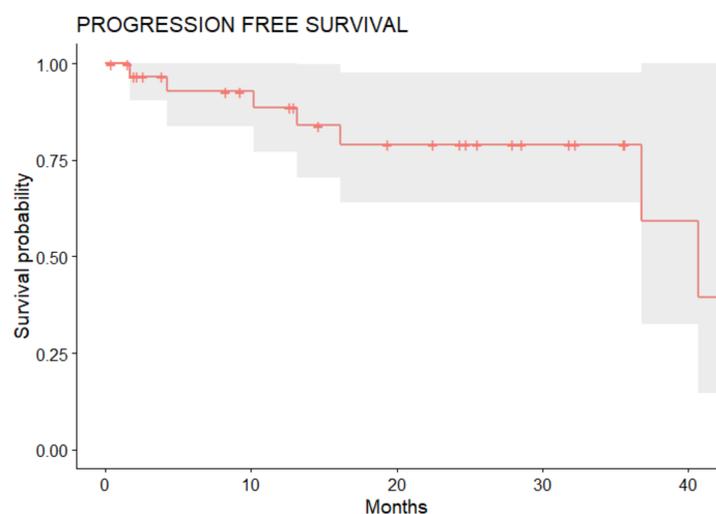


Infectious **29,1%**
Pneumonia (16.4%)



Neurological **18.2%**
Sensorial neuropathy (18.1%)

- ✓ Median treatment duration = 16.8 \pm 14.4m.
- ✓ 7 patients (21.2%) progressed.
- ✓ 7 (21.2%) died (3 due to disease progression).
- ✓ 53.8% required treatment adjustments



40.7m

Median PFS

95% CI: 36.8–NA

88.6%

1-Year PFS

79% at 2-years

78%

1-Year OS

Median OS not reached

85.8%

Any EA

87,3% grade 1-2

CONCLUSION AND RELEVANCE

Daratumumab-based regimens demonstrated favourable effectiveness and largely mild-to-moderate toxicity in octogenarians with NDMM.

Outcomes align with pivotal trials, supporting their use in this vulnerable population.

