# REAL SAFETY OF DARATUMUMAB IN MYELOMA MULTIPLE

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## BACKGROUND AND IMPORTANCE

**The overall survival of patients with multiple myeloma (MM) has changed dramatically in the last decade. Immunotherapy has emerged as a promising treatment like daratumumab. This human monoclonal IgG Kappa antibody that targets CD38 is used in monotherapy or in combination and demostrated durable responses but is really important a good clinical management of toxicities to get the goal of the therapy.**

## AIM AND OBJECTIVES

**Asses the safety of daratumumab in monotherapy and in combination with other agents used in our institution and review the clinical management of toxicities.**

## MATERIALS AND METHODS

**Retrospective and observational study in a second level hospital. We review the medical records of all patients diagnosed with MM who received at least one cycle of daratumumab in monotherapy or combination therapy in our hospital until august 2020. Collected data: sex, age, cytogenetic risk, prior line of therapy, prior autologous stem cell transplantation (ASCT), daratumumab monotherapy or combination therapy, adverse drug reaction (ADR), grade, clinical management: supportive treatments, temporary interruptions and permanent discontinuations.**

## RESULTS

**33 patients received at least one cycle of daratumumab:**

**- 24% men. Median age 64 (42-77) years old**
**- 24% (8) high cytogenetic risk abnormalities**
**- 2 (0-6) was the median of prior lines of therapy**
**- 74% (23) of patients received daratumumab in combination therapy. Average of cycles received 8 (1-38).**

- ✧ **39% (13) patients suffered infusion reactions: 92% during the first infusion and were grade 1-2.**
- ✧ **22 hematological severe ADRs (grade 3-4): most common was trombocytopenia (60%), followed by neutropenia (22%). All of them required supportive treatment and in 32% experienced temporary interruptions of treatment.**
- ✧ **28 No-hematological severe ADRs (grade 3-4): 50% severe infections, most of them respiratory that required temporary interruptions therapy and 10 (71%) needed hospital admissions.**
- ✧ **Almost one out of three patients experienced permanent discontinuations of daratumumab related to toxicity (90% combination therapy).**

## CONCLUSION AND RELEVANCE

**Most adverse reactions related to daratumumab therapy were clinically manageable, but the incidence of severe haematological toxicity and severe respiratory infections makes necessary a close monitoring side effects and a practical management strategies to reach the maximal benefit.**


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