Original Study



Outcome of Patients With Nonsecretory Multiple Myeloma After Autologous Hematopoietic Stem Cell Transplantation

Ryan W. Jacobs, ¹ Rima M. Saliba, ¹ Koji Sasaki, ¹ Shatha Farhan, ¹ Aristides Armas, ¹ Nina D. Shah, ¹ Qaiser Bashir, ¹ Sofia Qureshi, ¹ Gabriela Rondon, ¹ Chitra Hosing, ¹ Uday Popat, ¹ Simrit Parmar, ¹ Jatin J. Shah, ² Michael Wang, ² Donna M. Weber, ² Sheeba K. Thomas, ² Robert Z. Orlowski, ² Richard E. Champlin, ¹ Muzaffar H. Qazilbash ¹

Abstract

We report the outcomes of patients with nonsecretory multiple myeloma (NSM) who were treated with autologous hematopoietic stem cell transplantation (auto-HCT) compared with a matched cohort with secretory myeloma (SM). Our results showed that auto-HCT is an effective intervention for NSM patients with comparable outcomes in patients with SM.

Introduction: Fewer than 5% of patients have nonsecretory multiple myeloma (NSM), which is characterized by the absence of monoclonal protein in immunofixation in serum and urine. There are limited data on the outcome of NSM after autologous hematopoietic stem cell transplantation (auto-HCT). **Patients and Methods:** Between 1988 and December 2010, we identified 31 patients with NSM, and compared their outcome with 124 patients with secretory myeloma (SM) who were matched for age, disease stage, year of auto-HCT, and disease status and received auto-HCT at our institution. The primary end points were time to progression (TTP), progression-free survival (PFS), and overall survival (OS). **Results:** Nonrelapse mortality at 4 years was 4% and 4% in the NSM and SM patients, respectively (P = .612). Median follow-up was 102 and 74 months for NSM and SM patients, respectively. Median PFS was 37 (95% confidence interval [CI], 12-62) and 22 (95% CI, 18-26) months for NSM and SM patients, respectively (P = .527). Median OS was 51 (95% CI, 7-95) and 73 (95% CI, 59-86) months for NSM and SM patients, respectively (P = .740). In multivariate analyses, age >55 years, and relapsed disease were associated with a shorter TTP. Similarly, age >55 years, and relapsed or refractory disease at the time of auto-HCT were associated with a shorter OS. **Conclusion:** Auto-HCT is associated with durable remission in NSM. There was no significant difference in transplant-related mortality, TTP, and PFS in patients with NSM compared with patients with SM after high-dose therapy and auto-HCT.

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Address for correspondence: Muzaffar H. Qazilbash, MD, The University of Texas M.D. Anderson Cancer Center, 1515 Holcombe Blvd, Unit 423 (FC5.2006), Houston, TX 77030

Fax: 713-794-4902; e-mail contact: mqazilba@mdanderson.org

Introduction

Nonsecretory multiple myeloma (NSM) is a rare variant of multiple myeloma (MM) and comprises approximately <5% of all patients. ¹⁻⁵ NSM is defined as the presence of a monoclonal plasma cell population in bone marrow (BM) biopsy, presence of end-organ damage due to underlying plasma cell disorder, and the absence of a detectable serum or urine monoclonal protein in immunofixation electrophoresis. In approximately 70% of patients previously diagnosed with NSM, a monoclonal free light chain (FLC) can be detected in the serum using the FLC assay. ⁶ With this advancement

Department of Stem Cell Transplantation

²Department of Lymphoma and Myeloma, The University of Texas M.D. Anderson Cancer Center, Houston, TX

Characteristic	NSM (n = 31)	SM (n = 124)	P
Male Sex	19 (61)	83 (67)	.553
At Diagnosis, Median (Range)	. ,	, ,	
Bone marrow plasma cell, % ^a	25 (0-98)	33.5 (0-100)	.477
Lactate dehydrogenase, IU/L	213 (96-552)	342.5 (44-2740)	.312
Lactate dehydrogenase unknown, %	18 (58)	64 (52)	.520
Creatinine, mg/dL	1.0 (0.5-2.7)	1.1 (0.5-7.0)	.187
β-2-microglobulin, mg/L	2.5 (1-12)	3.1 (1-19)	.243
β-2-microglobulin unknown, %	15 (48)	35 (28)	.032
Durie-Salmon Stage at Time of Diagnosi		35 (25)	.002
	3 (10)	12 (10)	1.000
1	13 (42)	52 (42)	1.000
	15 (48)	60 (48)	
International Staging System Classificati		[00 (40)	
		22 (27)	101
	8 (26)	33 (27)	.181
	3 (10)	22 (18)	
	3 (10)	25 (20)	
Unknown	17 (55)	44 (36)	000
Creatinine > 2 mg/dL at Time of Diagnosis, n (%)	2 (8)	14 (12)	.609
Median Months From Time of Diagnosis to Auto-HCT	7.1 (2.7-138.3)	8.1 (2.5-122.5)	.918
Cytogenetic Risk at the Time of Diagnos	is, n (%)		
Standard risk	17 (55)	80 (65)	.193
High risk	2 (7)	15 (12)	
Unknown	12 (39)	29 (23)	
Induction Chemotherapy, n (%)			
Proteasome inhibitor-based	4 (13)	34 (27)	.093
Immunomodulatory drug-based	11 (36)	59 (48)	.226
Median Age at Time of Auto-HCT	52 (34-68)	52.5 (32-71)	.929
Disease Status, n (%)			
First remission consolidation	19 (61)	78 (63)	.493
Primary refractory	4 (13)	24 (19)	
Relapse	8 (26)	22 (18)	
KPS ≥ 70% at Time of Auto-HCT	15 (100)	78 (99)	.661
Missing KPS at Time of Auto-HCT	16 (52)	45 (36)	
Median Number of Previous Regimens at Time of Auto-SCT	1 (0-8)	1 (0-9)	.555
Response to Previous Therapy at Time of	f Auto-HCT, n (%)		
CR + sCR	8 (26)	19 (15)	.372
VGPR	N/A	6 (5)	
PR	12 (39)	63 (51)	
< PR	12 (39)	63 (51)	
PD	4 (13)	8 (7)	
Preparative Regimen, n (%)	· -/	- 17	
Melphalan alone	17 (55)	71 (57)	.808
Year of Auto-HCT, n (%)	(50)	(8.)	
Before 1995	17 (55)	42 (34)	.052
1995-2002	10 (32)	70 (57)	,002
2003-2010	4 (13)	12 (10)	

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