

Treating Relapsed Multiple Myeloma After Prior Treatments

Relapsed Multiple Myeloma

If your tests no longer show signs of cancer after you've been treated for multiple myeloma, you're in remission. Relapsed (or recurrent) multiple myeloma means cancer has come back after treatment and remission. Most people with multiple myeloma can relapse, and relapse can happen once or a few times.

Treatment Options After Prior Treatments

There are treatments -- and combinations of treatments -- for relapsed multiple myeloma after prior treatments. Some are used after 2 to 5 prior treatments have been used. Which next treatments your doctor recommends will depend on how long you were in remission, your overall health, other conditions you have, what treatment you had before, and your wishes and preferences.

Medicines your doctor may recommend after you've had prior treatment may include:

- Chemotherapy, such as cyclophosphamide, doxorubicin, etoposide, cisplatin, or bendamustine
- Targeted therapy, such as:
 - Proteasome inhibitors bortezomib, carfilzomib, or ixazomib
 - Immunomodulators lenalidomide, pomalidomide, or thalidomide
 - Monoclonal antibodies daratumumab, elotuzumab, or isatuximab
 - Antibody-drug conjugate (a monoclonal antibody linked to a chemotherapy medicine) belantamab mafodotin
 - Histone deacetylase inhibitor panobinostat
 - Selective inhibitor of nuclear export selinexor
 - BCL2 inhibitor venetoclax
- Steroids such as dexamethasone or prednisone



Side Effects From Treatment

All medicines can have side effects. Some can go away on their own over time, but others may last longer and can be managed. During treatment, your doctor will do tests to check on side effects. Talk with your doctor before treatment about when you should call your doctor or go to the emergency room because of side effects.

Side effects that may happen with chemotherapy include:

- Fatigue (tiredness, weakness)
- Nausea and vomiting
- Diarrhea
- Bruising or bleeding
- Hair loss
- Infections
- Loss of appetite or weight
- Mouth sores
- Decreases in certain blood cell levels

Side effects that may happen with steroids include:

- Nausea
- Increased appetite and weight gain
- Mood changes and sleep problems
- Weak bones (osteoporosis)

Side effects that may happen with targeted therapy can include:

- Fatigue (tiredness, weakness)
- Nausea and/or vomiting
- Diarrhea or constipation
- Decreases in certain blood cell levels
- Numbness or tingling in the hands or feet (with certain medicines)

Other side effects that may happen with targeted therapy include:

- Fever, weight loss, or infections in your upper respiratory tract (nose, mouth, and throat) with the medicine selinexor
- Back pain or fever with monoclonal antibodies. Some people may also have a reaction when they get these medicines as an infusion into a vein. Symptoms of this reaction can include dizziness or throat tightness, trouble breathing, wheezing, or coughing
- If you have problems with your eyes during treatment with belantamab mafodotin -- such as vision changes or loss, blurriness, or dry eyes -- be sure to tell your doctor

Not all side effects are listed here. Ask your doctor, healthcare team, or pharmacist for a complete list.



Working With Your Doctor to Manage Side Effects

There are ways to manage certain side effects. Your doctor may recommend changing treatment or adding a medicine before, during, or after treatment to help. Nausea and vomiting and reactions from infusions are examples of side effects that can be helped by taking medicine before treatment.

Talk to your doctor before you start treatment about what side effects can happen. And be sure tell them about any side effects you have during treatment and how they affect your daily life. Together, you can discuss ways to manage them. You can record your symptoms and side effects in a journal or on a tablet. This can be especially helpful when talking to your doctor.