

Young Fellow and Best Abstract Presentations

Title: Multiple myeloma in elderly patients – Real world local data

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Background: The incidence of multiple myeloma (MM) increases with age. The number of older myeloma patients is growing. However, elderly MM patients are often under-represented in clinical trials. The aim of this community-based study is to describe the disease characteristic, measure clinical outcome and identify the factors that are associated with survival in elderly MM patients.

Patients and method: We retrospectively reviewed 123 patients who were aged 65 years or above, had newly diagnosed multiple myeloma and were treated in Queen Elizabeth Hospital from 1st January, 2012 to 31st December, 2017. We analyzed the clinical characteristics, response to first line treatment, clinical outcome and factors affecting survival.

Results: The median age of diagnosis was 77 years. Among the 123 patients, 35% of the patients were 80 years old or above, 59.3% were male patients, 50% had a Charlson Comorbid Index (CCI) of 2 or above and 52.9% had Stage III disease. Majority of our patients received thalidomide-based treatment and doublets regimen. The overall response rate was 62.6%. The complete remission rate was 3.3%; the very good partial response rate was 26.8%; the PR rate was 32%. Around 5% of patients had progressive disease. The median progression free survival (PFS) was 16 months. The presence of high-risk cytogenetics was independently associated with PFS. The median overall survival (OS) was 32.5 months. CCI ≥ 2 , hypercalcemia and failed response to first line treatment were independently associated with poor OS.

Conclusion: In elderly myeloma patients who were aged 65 years or above, patients' age and comorbidity with the use of CCI as assessment tool, were found to be an important factor associated with survival, and should be considered in formulating the treatment plan.