

INTERNATIONAL MYELOMA FOUNDATION

What is Multiple Myeloma?

- Multiple myeloma is a cancer of plasma cells which attacks and destroys bone.
- In the US there are approximately 100,000 patients and over 15,000 new cases diagnosed each year. Despite this fact, there is a lack of public awareness about this disease.
- Multiple myeloma represents 1% of all cancers and accounts for 2% of cancer deaths.
- Although the causes of multiple myeloma are uncertain, certain professions have a higher risk factor. Exposure to pesticides, nuclear radiation, and petrochemicals are considered to be important trigger factors.
- Although there is no known cure, multiple myeloma is treatable and outcomes are constantly improving.

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in the US & Canada

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“Until there is a cure, there is the IMF.”

	REVLIMID[®]	THALOMID[®]
Indication/FDA Approval	Revlimid in combination with dexamethasone for patients who have received at least one prior therapy for multiple myeloma	Thalomid in combination with dexamethasone for patients with newly-diagnosed multiple myeloma
Dosage (oral)	25 mg daily in a 21 out of 28-day cycle	200 mg daily in a 28-day treatment schedule
	Dexamethasone (40 mg) on days 1–4, 9–12, and 17–20 every 28 days	
Duration of Therapy	On-going with dose reductions as necessary	On-going with dose reductions or proceed to stem cell transplant or alternate therapy
Cross Resistance	Both approved in combination and can be useful alone (before or after the other)	

Some Potential Side Effects:

Grade 3, 4 Neuropathy	Less frequent	Common depending upon dose and duration of therapy
DVTs (Deep Vein Thrombosis)	Increased risk when used in combination therapy in patients being treated with multiple myeloma Studies have shown prophylactic anticoagulation should be considered. Dependent on risk factors; options may include aspirin, Coumadin [®] , or low molecular-weight Heparin [®]	
Reduced Blood Counts	Routine monitoring of CBCs is recommended. Manage with dose adjustments and/or growth factor support	Not as common, but manage with dose adjustments as appropriate
Drowsiness and Somnolence	Less frequent	Common depending upon dose and duration of therapy
FDA-required Controlled Distribution Program	RevAssist [®]	S.T.E.P.S. [®]

NOTE: Dosage reductions may be required for reduced blood count levels with Revlimid; neuropathy or other side effects with thalidomide; and/or dexamethasone-related side effects (infections, cardiac conditions, fluid retention, dermatologic effects, endocrine effects, gastrointestinal effects, weight gain, musculoskeletal effects, ophthalmologic effects, psychiatric and neurologic effects, and allergic reactions)