The 11th World Congress on CONTROVERSIES IN MULTIPLE MYELOMA (COMy)

TALQUETAMAB IN PATIENTS WITH MULTIPLE MYELOMA: A SINGLE-CENTER CASE SERIES.

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INTRODUCTION

Talquetamab is a bispecific antibody targeting GPRC5D, approved for treating relapsed or refractory multiple myeloma (MM). However, clinical trials have excluded patients with moderate-to-severe chronic kidney disease (CKD) (eGFR <30 ml/min). We present three cases of MM patients treated with Talquetamab, two of them with CKD, to evaluate its tolerability and efficacy in this population.

PURPOSE

To describe the clinical response and adverse events in three MM patients treated with Talquetamab, highlighting its impact on those with CKD.

METHODS

Three patients with refractory MM were treated with Talquetamab in our centre and their clinical data are reported. Two of them received treatment despite CKD.

RESULTS

Patient 1: IgA Kappa MM with eGFR 10 ml/min after 4th line, received treatment achieving complete response (CR) with minimal residual disease positivity . Due to the appearance of adverse effects such as respiratory sepsis and repeated urinary tract infections, Talquetamab is currently discontinued until resolution.

Patient 2: High-risk IgG Kappa MM defined as 1q- cytogenetics, received Talquetamab as 4th line, and showed a deep partial response (DPR) attending to M component, however a PET CT disclosed disease progression, pending further studies to start a new line of treatment.

Patient 3: Lambda light chain MM with end-stage CKD on dialysis, started treatment after progression on the 6th line achieving CR. However treatment was discontinued due to severe thrombocytopenia and infectious complications until relapse or progression.

CONCLUSIONS

- Talquetamab demonstrated efficacy in MM patients with CKD, achieving deep responses in two cases with manageable adverse events.
- Despite the lack of data in this population, our findings suggest Talquetamab could be a viable option for CKD patients under close monitoring.
- Further studies are needed to confirm its safety and efficacy in this subgroup.

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