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LENALIDOMIDE-INDUCED CUTANEOUS ADVERSE REACTIONS IN MULTIPLE MYELOMA: PREVALENCE IN REAL-WORLD CLINICAL PRACTICE

Moutmir. Y, El Barrichi. A, Chajai. I, Abdelmoula. O, El Faria. W, Ababou. M, Hammani. A, Jennane. S, Mahtat. EM, El Maaroufi. H

Clinical Hematology Department of the Mohamed V Military Teaching Hospital - Rabat - Morocco

INTRODUCTION

Lenalidomide is a widely used therapeutic agent in the management of multiple myeloma, both in frontline and relapsed settings. Cutaneous adverse reactions are common and may lead to treatment discontinuation. However, the actual prevalence and clinical characteristics of lenalidomide-induced cutaneous reactions remain insufficiently described in real-world practice.

The aim of this study was to assess the prevalence of lenalidomide-induced cutaneous adverse reactions in patients with multiple myeloma.

METHODS

We performed a retrospective observational study including patients with multiple myeloma who received lenalidomide, at the Clinical Hematology Department of the Military Hospital of Rabat between 2011 and 2025. Demographic, clinical, and treatment data were collected from medical records.

RESULTS

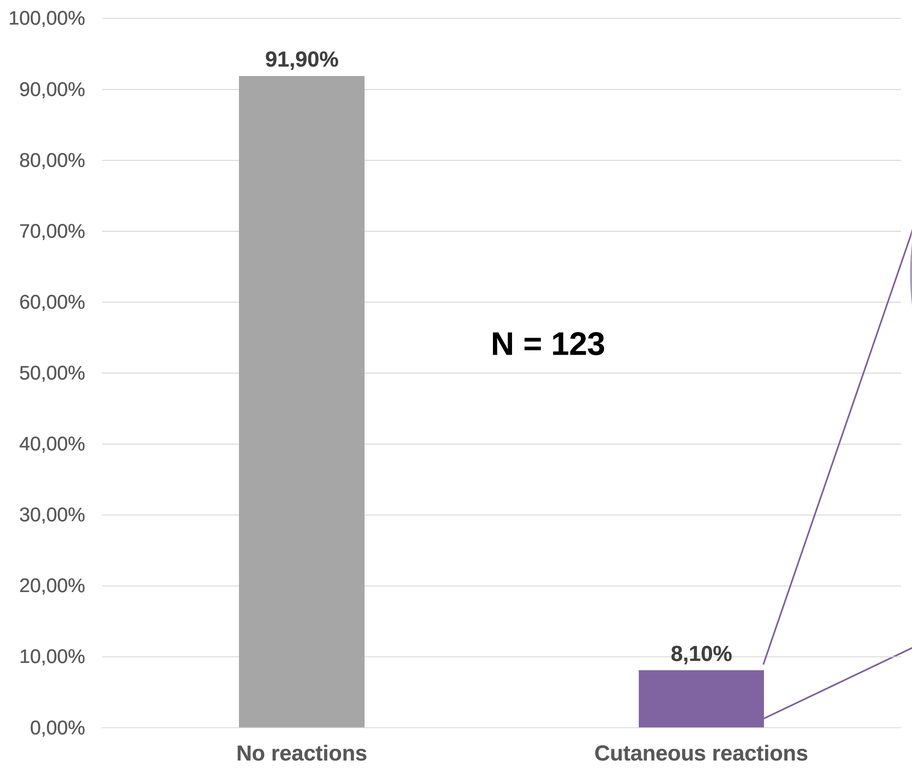

Figure 1: Prevalence of lenalidomide-induced cutaneous reactions

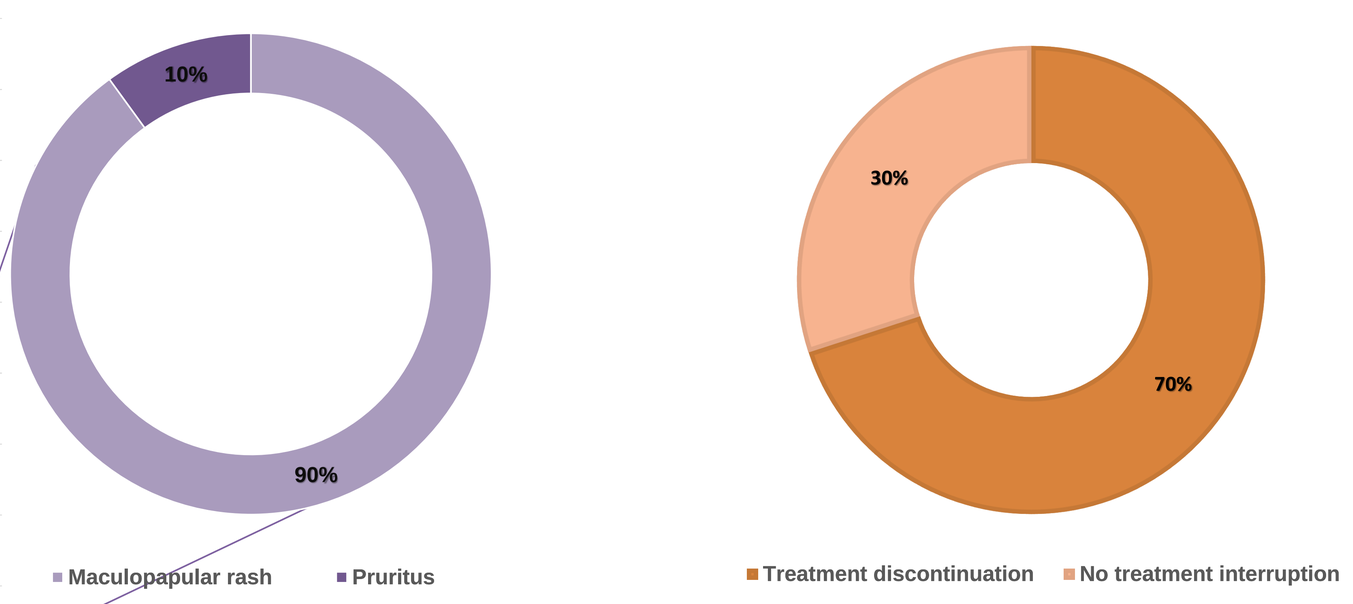

Figure 2 & 3: Clinical presentation and management outcomes

In all cases, reactions were **mild** and managed with antihistamines

Median time to onset of skin reactions: **17.5 [12.5 – 38.8] days** after treatment initiation.

CONCLUSION

Cutaneous adverse reactions are a relatively common complication of lenalidomide therapy in patients with multiple myeloma. The prevalence of these reactions observed in our cohort is broadly consistent with published data, where the incidence of lenalidomide-related rash ranges from 10% to 30% across clinical trials and real-world studies

Although mostly mild, cutaneous reactions frequently led to treatment discontinuation. Early recognition and appropriate management may help optimize patient care and maintain effective therapy.

Recent recommendations from the International Myeloma Working Group emphasize the importance of appropriate management, including symptomatic treatment and, in selected cases, cautious lenalidomide reintroduction after symptom resolution, to avoid unnecessary treatment interruption that could compromise therapeutic outcomes.

Overall, our findings highlight the need for increased clinician awareness regarding the management of lenalidomide-induced cutaneous toxicity, balancing treatment tolerability with maintenance of therapeutic efficacy.

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CONTACT

Presenting author contact: Dr. MOUTMIR Yasmine

E-mail: yasminemoutmir@gmail.com

Phone number: +33 7 59 14 98 15

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