



What do these results mean for individuals with multiple myeloma?

People living with multiple myeloma who could not have a stem cell transplant lived longer without their disease getting worse when treated with DVRd (a 4-drug combination that includes daratumumab) compared with those who got VRd (a 3-drug combination without daratumumab). These results further support DVRd as an effective option for people newly diagnosed with multiple myeloma who are not eligible for a stem cell transplant.



What was the purpose of this study?

- To understand if adding daratumumab to a standard treatment (VRd) helped people newly diagnosed with multiple myeloma who could not get a stem cell transplant live longer without their cancer worsening



Who was in the study and how was the study carried out?

- There were 289 participants with newly diagnosed multiple myeloma not eligible for stem cell transplant
- People were randomly assigned to get DVRd or VRd
- The main goal was to see how many people had no signs of cancer left in their bone marrow (this is called MRD negativity) and how long this lasted

Primary objective:	Secondary objectives:
Overall MRD negativity (complete response or better)	Progression-free survival Sustained MRD negativity Complete response rate Overall survival



People newly diagnosed with multiple myeloma who are not eligible for a stem cell transplant

Daratumumab + VRd → DRd

144

participants



VRd → Rd

145

participants



Daratumumab Plus Bortezomib, Lenalidomide, and Dexamethasone (DVRd) in Patients With Newly Diagnosed Multiple Myeloma: Subgroup Analysis of Transplant-Ineligible Patients in the Phase 3 CEPHEUS Study

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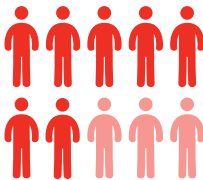
What were the results?

How many people consistently had no signs of cancer and stayed that way over time?

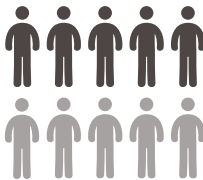
After DVRd treatment, more than half had no myeloma cells in their bone marrow and had a complete response



How many people were alive without their cancer worsening at 4.5 years?

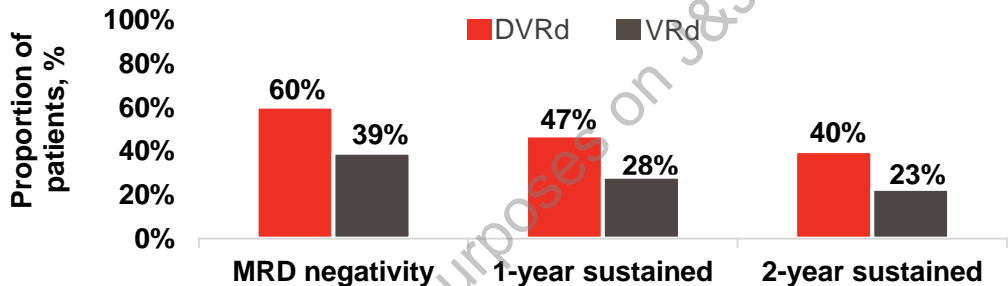


69%
On DVRd, 7 out of 10 people were alive, and their cancer had not gotten worse



48%
On VRd, 5 out of 10 people were alive, and their cancer had not gotten worse

DVRd lowered risk of death or their cancer getting worse by 49%



These results are based on a test that measured whether cancer cells could be detected at a sensitivity of 10⁻⁵. A more stringent sensitive test (10⁻⁶) also showed similar trends. Sustained MRD negativity means no cancer was found in two tests taken about 1 year or 2 years apart, with no cancer detected in between.

Did people on DVRd live longer?

DVRd 45% lower risk of death with DVRd



Time patients remained alive

People on DVRd were less likely to die during the study, especially when COVID-19–related deaths were excluded

Most common grade 3 or 4 treatment-emergent adverse events

DVRd
VRd

Low white blood cell count

44%
32%

Low blood platelet count

31%
23%

Lung infection

14%
12%

Low red blood cell count

13%
13%

Loose stools

12%
10%

Pain or tingling in hands or feet

10%
9%

Feeling very tired

9%
11%

Side effects with DVRd were similar to VRd. No new safety concerns were found.

Glossary of terms

Multiple myeloma	A type of blood cancer that affects plasma cells in the bone marrow	MRD negativity at 10 ⁻⁵ with complete response	No signs of myeloma found in bone marrow after checking 100,000 bone marrow cells. This was seen in people who had a complete response, meaning all signs of myeloma were gone after treatment	DVRd	A combination of 4 medicines: daratumumab, bortezomib, lenalidomide, and dexamethasone
Autologous stem cell transplant	A treatment where damaged bone marrow is replaced with healthy cells	Grade 3 or 4 treatment-emergent adverse events	Serious or severe side effects that happened during or after treatment. Grade 3 = severe; Grade 4 = life threatening	VRd	A combination of 3 medicines: bortezomib, lenalidomide, and dexamethasone



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