RECURRENT MULTIPLE MYELOMA: STRATEGIES TO IMPROVE TREATMENT

Multiple myeloma (MM), for patients and their loved ones, can be a challenging illness to live with.

To see loved ones in pain and suffering brings emotional challenges and oftentimes leaves them with many questions.

Treatment options and what to do if the cancer returns are often two of those questions.

There is currently no cure for multiple myeloma. This means that it is likely for multiple myeloma to return after treatment or a period of remission. When a patient experiences a relapse, the condition is then referred to as relapsed, or recurrent, multiple myeloma (RMM).

Immediate treatment is mandatory in the case of a relapse, according to the University of New Mexico Comprehensive Cancer Center (UNMCCC).

The UNMCCC informs readers about the different treatment options that are offered. Some of those treatments include targeted therapy, chemotherapy, stem cell transplants, among others.

Targeted Therapy: Targeted therapies are treatment methods that involve drugs and/or other substances that work to block the growth and the spread of cancer by interfering with certain molecules that are essential to the survival of the cancer cell.
Chemotherapy: When using chemotherapy as a treatment option, high doses are more effective at killing cancer cells. However, there is a down side to the usage of high dose chemotherapy. It also destroys many other healthy cells in the body. One of the most critical cells that are destroyed are the cells in the bone marrow stem cells.

Stem Cell Transplant: Stem cells once they mature become blood cells. Without these stem cells, the body is not able to produce red blood cells, white blood cells, or platelets, which are all essential to fighting off infection and supplying oxygen. Therefore, stem cell transplants are also a treatment option. The source of the stem cells used for transplantation can be collected from the patient prior to undergoing high dose therapy. This is referred to as an *autologous* stem cell transplant. The stem cells can also be collected from a donor. This is referred to as an *allogenic* stem cell transplant.
Bisphosphonates: Bisphosphonates are medicines that are used to treat multiple myeloma and are typically used in conjunction with other treatment methods. The Multiple Myeloma Research Foundation describes some of the results of bisphosphonates usage: slow the advancement of bone disease, reduce fractures, decrease bone pain and improve overall survival of patients.
Clinical Trials: As it is known, medicine is constantly evolving. New cures are being discovered, new medicines are being engineered, and treatment methods are being improved. To evaluate the effectiveness of the new drugs and methods clinical trials are conducted. According to the UNMCCC, “Future progress in the treatment of recurrent multiple myeloma will result from the continued evaluation

of new treatments in clinical trials.” Before participating in a clinical trial, patients should discuss the benefits and risks with their doctor.

Per the US National Library of Medicine, other modern therapies such as the use of new oral PI’s, monoclonal antibodies, and improvements in transplant methods have been proven to have increased the outcomes for patients. The treatment for multiple myeloma has become increasingly complex, but those living with MM should work with their doctor to decide the appropriate combination.