



More Options Lead to Better Outcomes with Clinical Trial Advances

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DR. S. VINCENT RAJKUMAR, MYELOMA EXPERT

“Clinical trials represent the way forward in myeloma therapy,” says

Dr. S. Vincent Rajkumar, Professor of Medicine in the Division of Hematology at the Mayo Clinic in Rochester, Minnesota. Dr. Rajkumar will be the featured speaker during The Leukemia & Lymphoma Society’s free telephone education program on Thursday, January 10, 2008, when he will discuss emerging therapies in myeloma.

“There are so many trials available for patients with myeloma today at academic centers across the United States, for every stage of the disease,” says Dr. Rajkumar. More than 300 clinical trials are currently being conducted worldwide that are studying new therapies for myeloma, new strategies to prevent and manage side effects, and ways to improve quality of life. Clinical trials often lead to exciting and encouraging news. Recently, interim results were announced of a large international clinical trial in patients newly diagnosed with myeloma that compared melphalan-prednisone with melphalan-prednisone plus bortezomib (Velcade®). Dr. Rajkumar says, “This trial is significant because decades have gone by with melphalan-prednisone being the standard of care. The first promising news came when clinical trials showed that adding thalidomide to melphalan-prednisone led to a significant survival benefit for patients. Now this trial is showing that adding bortezomib also improves outcomes. These trials have created more treatment options for patients.”

“Patients on clinical trials receive the best possible care,” emphasizes Dr. Rajkumar. “Their progress on therapy and any side effects are monitored very carefully, and the physicians who treat them are likely to be experts in the field. These patients have the opportunity to do better than what is currently the standard and also have access to drugs that are just not available outside of the trial setting.”

Dr. Rajkumar advises patients to ask questions about clinical trials so that they can be fully comfortable with the decisions they make. “Patients need to know the purpose of the trial, the potential benefits and side effects, and the track record of the treatment they will receive.” Patients also need to find out if their healthcare insurance will pay for the costs of the trial and who on the medical team can help with insurance or financial questions.

“Because of clinical trials, we are on a steady path of new therapies for myeloma,” says Dr. Rajkumar.

“In the past few years, there have been four new drugs approved for myeloma, and many other new drugs are in development.” This month, he will meet with the world’s myeloma experts at the American Society of Hematology’s 49th Annual Meeting. There he will learn about new therapies being studied, share his research findings, and plan the future direction of myeloma clinical trials with other leaders in the field. **Dr. Rajkumar will share these advances on Thursday, January 10, 2008, from 1:00 PM to 2:30 PM ET during the Society’s free telephone education program, *Emerging Therapies in Myeloma: News from the American Society of Hematology (ASH)*.** ■

FREE TELEPHONE EDUCATION SERIES

OUTLOOK on
MYELOMA



Extended
Time for
Questions
and Answers

UPCOMING PROGRAM

JANUARY 10, 2008 • 1:00 PM – 2:30 PM ET

*Emerging Therapies in Myeloma:
News from the American Society of Hematology (ASH)*

Speaker: S. Vincent Rajkumar, MD

Two easy ways to register:

Call our toll-free number (866) 992-9950 (x304)
or visit www.LLS.org/myelomaeducation.



Making Progress for Future Generations

MICHAEL TIJAN: MYELOMA SURVIVOR AND CLINICAL TRIAL PARTICIPANT

When Michael Tijan was diagnosed with myeloma 3 years ago he wanted to make sure that he did everything in his power to fight this disease. Michael had lost his father to myeloma 20 years ago, which made him even more determined to look for a myeloma expert and cutting edge therapy. A community oncologist recommended a clinical trial. After carefully considering his options, Michael agreed that a clinical trial would give him the most hope for a remission and a healthy future. "I knew the best thing I could do was to participate in a clinical trial. I wanted to be a part of something that was breaking new ground," he said.

When Michael was enrolled in the trial, he quickly discovered that he would be closely monitored by a team of doctors and nurses. It also meant that initially he would need to travel 260 miles from his home in Wisconsin to the Mayo Clinic in Rochester, Minnesota, each month for treatment and testing. "It feels good knowing that I have a whole team of people taking a careful interest in my treatment and progress. It has been well

worth the time it takes to travel," he explains. Michael now only has to travel every 3 months to receive his treatment and has monthly laboratory tests done near his home. Clinical trials are now more widely available than ever before. Today, many large academic centers partner with community oncologists to offer clinical trials closer to patients' homes.

Michael is enrolled in a Phase II myeloma trial studying the effectiveness of the combination of three oral drugs: lenalidomide, melphalan, and prednisone. He is aware that many people have concerns about clinical trials, including the fear of being given a placebo (or a "dummy" pill). When he enrolled in the trial, he was told that it did not involve a placebo and that it is extremely rare for a placebo to be used in a cancer clinical trial. He tells other patients who are considering clinical trials to "ask questions, and don't be afraid of it."

One of Michael's main concerns was getting back to work, but he says, "I'm happy to say that I was able to return to my job as a machinist 3 months after I started treatment." Patients also often have concerns about insurance covering the routine

costs of care received as part of a clinical trial. It is important to discuss these questions with a social worker or trial coordinator. The Leukemia & Lymphoma Society's Information Resource Center (IRC), which can be reached by calling (800) 955-4572, can also provide information about clinical trials and available financial assistance programs.

"Ask questions, and don't be afraid of it."

Michael is aware of the progress that has been made in myeloma therapy over the past several years. He says, "When my dad was treated for myeloma in the 1980s there weren't the clinical trials and the treatment options available. I thought about him a lot when I was looking at my options. If I can help someone else down the road by taking part in this trial, then I feel like I have made my own little mark on this disease." Nationwide, patients like Michael, along with physicians and researchers, are making progress to provide even more myeloma treatment options for future generations. ■



Co-Pay Assistance Program

The Leukemia & Lymphoma Society offers financial support for eligible patients toward the cost of insurance co-pays and/or insurance premiums. For more information, call (877) LLS-COPAY [(877) 577-2672] or visit www.LLS.org/copay.

The Leukemia & Lymphoma Society's Clinical Trial Service

The Leukemia & Lymphoma Society's Information Resource Center (IRC) is staffed by master's level oncology social workers and health educators skilled in providing assistance to people searching for information about clinical trials. You can reach the IRC by calling (800) 955-4572, Monday through Friday, 9 AM to 6 PM ET, or visit www.LLS.org from 10 AM to 5 PM ET to access LIVE PATIENT HELP online.

The Society's Outlook on Myeloma program includes:

* Myeloma News* * Outlook on Myeloma Telephone Education Series * New Directions in Myeloma Therapy Education Program * First Connection * Myeloma Booklet** * Facts About Myeloma Easy-to-Read Booklet * Myeloma: A Guide for Patients and Caregivers Easy-to-Read Booklet** * Co-Pay Assistance Program

*Volume 1, Issue 2, is available in English and Spanish. **Available in English and Spanish.

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For more information, contact the Society's Information Resource Center at (800) 955-4572.