

What's New in Blood Cancer Treatment?

Read about new research from Fred Hutch Cancer Center, Dana-Farber Cancer Institute and more.

March 10, 2025 By [Liz Highleyman](#)

The [American Society of Hematology](#) (ASH) annual meeting in December focused on advances in blood cancer care. For chronic lymphocytic leukemia (CLL), the most common type in adults, the Phase III AMPLIFY trial found that a fixed-duration combination of two pills—the BTK inhibitor Calquence (acalabrutinib) and the BCL-2 inhibitor Venclexta (venetoclax)—led to durable remission and improved survival for patients without high-risk gene mutations. Further back in the pipeline, a laboratory study showed that Venclexta may boost response to CAR-T immunotherapy by improving the fitness of T cells. “This could be an exciting way to repair the immune system in patients with CLL,” says Matthew Cortese, MD, MPH, of Roswell Park Comprehensive Cancer Center.

Another study found that among people with acute myeloid leukemia, those who live in ZIP codes with lower education and higher poverty levels were less likely to receive donor stem cell transplants, but patients who did get the procedure were equally likely to benefit. “We need to focus on addressing financial barriers, improving health literacy and enhancing support systems to ensure equitable access to treatments,” says Mohamed Sorrow, MD, of Fred Hutch Cancer Center.

Treatment for people with precursor conditions known as monoclonal gammopathy of undetermined significance and smoldering multiple myeloma is controversial. Researchers at Dana-Farber Cancer Institute reported that a new scoring system based on genomic markers can help predict which of these patients are more likely to experience disease progression and could benefit from early treatment. Another small study showed that a plant-based high-fiber diet may delay progression in people with these conditions.

In the Phase III AQUILA trial, people with smoldering multiple myeloma who received monthly Darzalex Faspro (daratumumab) injections for up to three years were half as likely to experience progression as those randomized to active monitoring. Finally, the DREAMM-7 trial showed that Blenrep (belantamab mafodotin) demonstrated a significant overall survival benefit for relapsed or

refractory multiple myeloma compared with Darzalex at three years. This antibody-drug conjugate previously lost its accelerated approval status after a failed confirmatory trial, but these new results could pave the way for its reintroduction.

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