

What's New in Blood Cancer Treatment?

Advances in the treatment of blood cancers, with a focus on targeted therapies

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The annual meeting of the American Society of Hematology featured advances in the treatment of blood cancers, with a focus on targeted therapies.

In the Phase III PERSEUS trial, 709 participants with newly diagnosed multiple myeloma were randomly assigned to standard therapy consisting of Velcade (bortezomib), Revlimid (lenalidomide) and dexamethasone or the same regimen plus Darzalex Faspro (daratumumab). After four years, the progression-free survival rate was 84% with the four-drug combination versus 68% with standard therapy, or a 58% reduction in the risk of disease progression or death. People in the four-drug combo group were also more likely to be negative for minimal residual disease (MRD), meaning they had undetectable malignant cells using highly sensitive tests.

The Phase I/II AUGMENT-101 trial is testing revumenib, an oral menin inhibitor, for acute leukemias with specific mutations. In an analysis of 57 previously treated adults and children with acute myeloid leukemia or acute lymphocytic leukemia with a KMT2A gene rearrangement, 63% achieved remission, including 23% with complete remission. Ten of the 13 complete responders assessed for MRD status had no evidence of residual cancer. In many cases, the treatment enabled participants to receive a curative stem cell transplant.

Two studies showed that combining Imbruvica (ibrutinib) and Venclexta (venetoclax)—two drugs that target different pathways involved in blood cancer proliferation—led to better outcomes for people with chronic lymphocytic leukemia or mantle cell lymphoma. “This combination allowed us to attack the cancer cells in two ways, which made it harder for the tumor to find resistance,” says Michael Wang, MD, of the University of Texas MD Anderson Cancer Center.
