Teclistamab in relapsed refractory multiple myeloma: a multi-institutional real-world study from the French early access program

Authors

Aurore Perrot,[1] Cyrille Hulin,[2] Ariane Boumendil,[3] Hamza Manjra,[4] Antoine Leveque,[5] Carolyne Croizier,[6] Arthur Dony,[7] Mohamad Mohty,[8] Murielle Roussel,[9] Salomon Manier,[10] Frédérique Orsini-Piocelle,[11] Loic Bauschert,[12] Arthur Bobin,[13] Laurent Frenzel,[14] Laure Vincent,[15] Claire Breal,[16] Jean Richard Eveillard,[17] Thomas Gerome,[18] Mourad Tiab,[19] Emilie Chalayer,[20] Rakiba Belkhir,[21] Clara Mariette,[22] Perrine Moyer,[23] Thomas Chalopin,[24] Brieuc Cherel,[25] Lydia Montes,[26] Arthur Coste,[27] Reza Tabrizi,[28] Lionel Karlin,[29] Daniella Robu,[30] Amandine Huguet,[3] Stéphanie Harel[31] and Philippe Moreau[23]

[1]Hématologie, CHU de Toulouse, IUCT Oncopole, Toulouse; [2]Hématologie, CHU Hôpital Haut Leveque, Bordeaux ; [3]Intergroupe Francophone du Myélome, Paris; [4]Hématologie, Institut Paoli Calmettes, Marseille; [5]Hématologie, Institut Cancerologie Strasbourg Europe, Strasbourg; [6]Hématologie, CHU de Clermont Ferrand, Clermont Ferrand; [7]Hématologie, CH Métropole Savoie, Chambéry; [8]Hématologie, APHP St Antoine, Paris; [9]Hématologie, CHU de Limoges, Limoges; [10]Hématologie, CHU de Lille, Lille; [11]Hématologie, CH d'Annecy, Annecy; [12]Hématologie, Hôpital Saint Vincent, Lille; [13]Hématologie CHU La Milétrie, Poitiers; [14]Hématologie, APHP Necker, Paris; [15]Hématologie, CHU de Montpellier, Montpellier; [16]Hématologie, CH de Lorient, Lorient; [17]Hématologie, CHU de Brest, Brest; [18]Hématologie, CHU de Caen, Caen; [19]Hématologie, CH de Vendée, La Roche sur Yon; [20]Hématologie, CHU de Saint Etienne, Saint Etienne; [21]Hématologie, APHP Bicetre, Paris; [22]Hématologie, CHU de Grenoble, Grenoble; [23]Hématologie, CHU de Nantes, Nantes; [24]Hématologie, CHRU de Tours, Tours; [25]Hématologie, Hôpital de Vannes, Vannes; [26]Hématologie, CHU d'Amiens, Amiens; [27]Hématologie, CHU de Reims, Reims; [28]Hématologie, Hopital de Mont de Marsan, Mont-de-Marsan; [29]Hématologie, CHU de Lyon Sud, Lyon; [30]Hématologie, Hopital de Lens, Lens and [31]Hématologie, APHP St Louis, Paris, France

Correspondence:
A. PERROT - Perrot.Aurore@iuct-oncopole.fr

https://doi.org/10.3324/haematol.2024.286118

Received: July 20, 2024.
Accepted: November 11, 2024.
Early view: November 21, 2024.

Supplemental table 1: Subgroups analysis of progression-free survival in IFM 2024-09 study.
(NA= not achieved)

Subgroups	**Median PFS (95% CI)**	
Age < 75	9.1 months (6.3-13)	p = 0.007
Age 75 or more	16.4 months (10.7-NR)	
EXTRA MEDULLARY DISEASE	3.7 months (2-NR)	
No EXTRA MEDULLARY DISEASE	11.3 months (8.8-16.2)	p = 0.057
PARAMEDULLAR DISEASE	16.2 months (9.3-NR)	
No PARAMEDULLAR DISEASE	9.2 months (7.3-13.3)	p = 0.103
CIRCULATING PLASMACYTOSIS	4.7 months (1.7-10.5)	
No CIRCULATING PLASMACYTOSIS	12.6 months (9.7-16.4)	p = 0.001
del(17p) or TP53 mutation	5.2 months (2.9-9.1)	
No del(17p), no mutation TP53	16.4 months (4.1-NR)	p = 0.009
INELIGIBILITY TO MAJESTEC-1	6.6 months (3.15-10.9)	
ELIGIBILITY TO MAJESTEC-1	16.5 months (13.9-NR)	p < 0.001
SEVERE RENAL IMPAIRMENT	3.5 months (1.3-10.3)	
NO SEVERE RENAL IMPAIRMENT	13 months (9.3-16.5)	p = 0.001
ANTI-BCMA AGENTS in previous lines	7.1 months (3.5-NA)	
No ANTI-BCMA AGENTS in previous lines	12.6 months (9.3-16.4)	p = 0.09
No AUTOLOGOUS TRANSPLANT in previous	12.5 months (9.7-NR)	
AUTOLOGOUS TRANSPLANT in previous lines	9.1 months (6.3-16.2)	p = 0.357

Supplemental Figure 1: Progression-free survival according the extramedullary disease status.