

Age and organ damage correlate with poor survival in myeloma patients: meta-analysis of 1435 individual patient data from 4 randomized trials

Sara Brinthen,¹ Maria Victoria Mateos,² Sonja Zweegman,³ Alessandra Larocca,¹ Antonietta Pia Falcone,⁴ Albert Oriol,⁵ Davide Rossi,⁶ Maide Cavalli,⁷ Pierre Wijermans,⁸ Roberto Ria,⁹ Massimo Offidani,¹⁰ Juan Jose Lahuerta,¹¹ Anna Marina Liberati,¹² Roberto Mina,¹ Vincenzo Callea,¹³ Martijn Schaafsma,¹⁴ Chiara Cerrato,¹ Roberto Marasca,¹⁵ Luca Franceschini,¹⁶ Andrea Evangelista,¹⁷ Ana-Isabel Teruel,¹⁸ Bronno van der Holt,¹⁹ Vittorio Montefusco,²⁰ Giovannino Ciccone,¹⁷ Mario Boccadoro,¹ Jesus San Miguel,² Pieter Sonneveld,¹⁹ and Antonio Palumbo¹

¹Myeloma Unit, Division of Hematology, University of Torino, Azienda Ospedaliera Città della Salute e della Scienza di Torino, Torino, Italy; ²Servicio de Hematología, Hospital Universitario de Salamanca, IBSAL, IBMCC (USAL-CSIC), Spain; ³Department of Hematology VU University Medical Center, Amsterdam, The Netherlands; ⁴IRCCS Casa Sollievo della Sofferenza, San Giovanni Rotondo, Unità di Ematologia, San Giovanni Rotondo, Italy; ⁵Català d'Oncologia, Hospital Germans Trias i Pujol, Badalona, Spain; ⁶Division of Hematology, Department of Clinical and Experimental Medicine, Amedeo Avogadro University of Eastern Piedmont, Novara, Italy; ⁷Divisione di Ematologia, Ospedale Ferrarotto, Università di Catania, Catania, Italy; ⁸Department of Hematology, Haga Hospital, The Hague, The Netherlands; ⁹University of Bari "Aldo Moro" Medical School Department of Biomedical Sciences and Human Oncology, Section of Internal Medicine and Clinical Oncology, Policlinico, Bari, Italy; ¹⁰Azienda Ospedaliero-Universitaria Ospedali Riuniti di Ancona, Ancona, Italy; ¹¹Hospital 12 de Octubre, Madrid, Spain; ¹²Dipartimento di Medicina Clinica e Sperimentale, Università degli Studi di Perugia, Perugia, Italy; ¹³U.O. Ematologia, Azienda Ospedaliera "Bianchi-Melacrino-Morelli", Reggio Calabria, Italy; ¹⁴Medical Spectrum Twente, Enschede, The Netherlands; ¹⁵Department of Oncology and Hematology, University of Modena and Reggio Emilia, Modena, Italy; ¹⁶Hematology, Tor Vergata University Hospital, Roma, Italy; ¹⁷Unità di Epidemiologia dei Tumori, A.O.U. San Giovanni Battista e CPO, Piemonte, Torino, Italy; ¹⁸Hospital Clinico de Valencia, Valencia, Spain; ¹⁹HOVON Data Center, Erasmus MC-Daniel den Hoed Cancer Center, Rotterdam, The Netherlands; and ²⁰Ematologia, Fondazione IRCCS Istituto Tumori, Milano, Italy

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Supplementary Appendix

Treatment regimens

In the GISMM-2001 trial, 331 patients were randomly assigned to receive 6 courses of MP or MPT followed by maintenance with thalidomide until progression.^{1,2} In the HOVON 49 trial, 333 were randomly assigned to receive 8 courses of MP or MPT followed by maintenance with thalidomide until progression.³ In the GEM05MAS, 260 were randomly assigned to receive 6 cycles of VMP or VTP followed by maintenance with bortezomib-prednisone or borte-

zomib-thalidomide.⁴ In the GIMEMA MM0305 trial, 511 were randomly assigned to receive 9 cycles of VMP or VMPT followed by continuous bortezomib-thalidomide as maintenance.⁵ All patients treated with thalidomide received prophylactic anticoagulation with aspirin, low molecular weight heparin or warfarin, according to the protocol or at the physician's discretion. Treatment was withheld on withdrawal of the patient's consent, disease progression, or the occurrence of any severe hematologic or non-hematologic toxic effects; less serious AEs were managed with the use of established dose modifications.

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