

# A prospective, multicenter study on hematopoietic stem-cell mobilization with cyclophosphamide plus granulocyte colony-stimulating factor and ‘on-demand’ plerixafor in multiple myeloma patients treated with novel agents

Roberto Mina,<sup>1</sup> Maria Teresa Petrucci,<sup>2</sup> Francesca Bonello,<sup>3</sup> Velia Bongarzone,<sup>4</sup> Riccardo Saccardi,<sup>5</sup> Giuseppe Bertuglia,<sup>1</sup> Andrea Mengarelli,<sup>6</sup> Andrea Spadaro,<sup>7</sup> Chiara Lisi,<sup>2</sup> Paola Curci,<sup>8</sup> Roberto Massimo Lemoli,<sup>9,10</sup> Stelvio Ballanti,<sup>11</sup> Rita Floris,<sup>12</sup> Luca Cupelli,<sup>13</sup> Patrizia Tosi,<sup>14</sup> Attilio Olivieri,<sup>15</sup> Delia Rota-Scalabrini,<sup>3</sup> Clotilde Cangialosi,<sup>16</sup> Chiara Nozzoli,<sup>5</sup> Barbara Anaclerico,<sup>4</sup> Francesca Fazio,<sup>2</sup> Benedetto Bruno,<sup>1</sup> Katia Mancuso,<sup>17,18</sup> Paolo Corradini,<sup>19</sup> Giuseppe Milone<sup>7</sup> and Mario Boccardo<sup>20</sup>

<sup>1</sup>Division of Hematology, AOU Città della Salute e della Scienza di Torino, University of Torino and Department of Molecular Biotechnology and Health Sciences, University of Torino, Torino; <sup>2</sup>Hematology, Department of Translational and Precision Medicine, Azienda Ospedaliera Policlinico Umberto I, Sapienza University of Rome, Rome; <sup>3</sup>Medical Oncology Department, Candiolo Cancer Institute, FPO-IRCCS, Candiolo; <sup>4</sup>U.O.C. Ematologia, Azienda Ospedaliera “San Giovanni/Addolorata”, Roma; <sup>5</sup>Cellular Therapy and Transfusion Medicine Unit, Careggi University Hospital, Florence; <sup>6</sup>Hematology and Stem Cell Transplant Unit, IRCCS Regina Elena National Cancer Institute, Rome; <sup>7</sup>Division of Hematology, AOU Policlinico, University of Catania, Catania; <sup>8</sup>Unit of Hematology and Stem Cell Transplantation, AOUC Policlinico, Bari; <sup>9</sup>Clinic of Hematology, Department of Internal Medicine (DiMI), University of Genoa, Genoa; <sup>10</sup>IRCCS Policlinico San Martino, Genova; <sup>11</sup>Sezione di Ematologia e Immunologia Clinica, Ospedale Santa Maria della Misericordia, località Sant’Andrea delle Fratte, Perugia; <sup>12</sup>S.C. Ematologia e CTMO, Ospedale Oncologico “A. Businco”, Cagliari; <sup>13</sup>Department of Hematology, S. Eugenio Hospital, Rome; <sup>14</sup>Hematology Unit, Infermi Hospital, Rimini; <sup>15</sup>Clinica di Ematologia, Azienda Ospedaliero Universitaria delle Marche, Ancona; <sup>16</sup>U.O.C. Ematologia, A.O. Ospedali Riuniti Villa Sofia-Cervello, Palermo; <sup>17</sup>IRCCS Azienda Ospedaliero-Universitaria di Bologna, Istituto di Ematologia “Seràgnoli”, Bologna; <sup>18</sup>Dipartimento di Scienze Mediche e Chirurgiche, Università di Bologna, Bologna; <sup>19</sup>Fondazione IRCCS Istituto Nazionale dei Tumori Milano, Università di Milano, Milano and <sup>20</sup>Department of Molecular Biotechnology and Health Sciences, University of Torino, Torino, Italy

**Correspondence:** R. Mina  
[roberto.mina@unito.it](mailto:roberto.mina@unito.it)

**Received:** September 13, 2023.

**Accepted:** November 7, 2023.

**Early view:** November 16, 2023.

<https://doi.org/10.3324/haematol.2023.284023>

©2024 Ferrata Storti Foundation

Published under a CC BY-NC license



**A prospective, multicenter study on hematopoietic stem-cell mobilization with cyclophosphamide plus granulocyte colony-stimulating factor and 'on-demand' plerixafor in multiple myeloma patients treated with novel agents**

**Supplementary appendix**

**Table S1. Univariate model for predictors of hematopoietic stem-cell mobilization failure or plerixafor administration**

Parameters	OR (95% CI)	p-value
Age, >60 vs. ≤60 years	1.26 (0.68–2.34)	0.46
Bone marrow plasma cells at diagnosis, >60% vs. ≤60%	3.96 (2.04–7.7)	<0.001
R-ISS stage, III vs. I–II	2.88 (0.91–9.11)	0.07
Cytopenia at diagnosis, Yes vs. No	1.42 (0.63–3.2)	0.39
Bortezomib-based induction, Yes vs. No	0.19 (0.08–0.47)	0.0003
Lenalidomide-based induction, Yes vs. No	5.48 (2.43–12.36)	<0.001
Daratumumab-based induction, Yes vs. No	4.49 (1.16–17.38)	0.03
Number of induction cycles, >4 vs. ≤4	0.98 (0.53–1.81)	0.94
Response to induction, ≥VGPR vs. <VGPR	0.59 (0.31–1.13)	0.10
Grade 3–4 hematologic toxicity during induction, Yes vs. No	6.31 (2.74–14.54)	<0.001
Pre-mobilization ANC <2.5×10 <sup>9</sup> /L, Yes vs. No	2.78 (1.49–5.26)	0.001
Pre-mobilization Hb <12 g/dL, Yes vs. No	2.08 (1.09–4)	0.03
Pre-mobilization PLT <150×10 <sup>9</sup> /L, Yes vs. No	1.18 (0.26–5.44)	0.83
Time from the end of induction to Cy administration, >30 vs. ≤30 days	1.25 (0.66–2.35)	0.48
Time from the end of induction to Cy administration, >60 vs. ≤60 days	0.86 (0.32–2.35)	0.77
Cy dose, 3g/m <sup>2</sup> vs. 2g/m <sup>2</sup>	0.79 (0.36–1.76)	0.57
Cy dose, 4g/m <sup>2</sup> vs. 2g/m <sup>2</sup>	1.00 (0.49–2.06)	1.00

**Abbreviations.** ANC: absolute neutrophil count; CI: confidence interval; Cy: cyclophosphamide; Hb: hemoglobin; OR: odds ratio; PLT: platelets; R-ISS: Revised International Staging System; VGPR: very good partial response.

**Table S2. Adverse events according to plerixafor administration**

Adverse event, n (%)	No-plerixafor group (n=263)			Plerixafor group (n=38)		
	Grade 2	Grade 3	Grade 4	Grade 2	Grade 3	Grade 4
Bone pain	3 (1)	0	0	4 (10)	0	0
Nausea/vomiting	3 (1)	0	0	1 (3)	0	0
Diarrhea	1 (0)	0	0	0	0	0
Infections	0	2 (1)	0	0	0	0
Peripheral neuropathy*	2 (1)	0	0	0	0	0
<i>Overall</i>	<i>9 (3)</i>	<i>2 (1)</i>	<i>0</i>	<i>5 (13)</i>	<i>0</i>	<i>0</i>

\*Peripheral neuropathy includes both motor and sensory neuropathy.