Understanding the burdens, treatment goals, and experiences for different groups of people with multiple myeloma

The full title of this abstract is: Understanding different treatment (Tx) goals and experiences according to characteristics in relapsed/refractory multiple myeloma (RRMM)

VIEW ABSTRACT

View Scientific Abstract >

Date of summary:
September 2025

Please note this summary only contains information from the scientific abstract

KEY TAKEAWAY

What are the key takeaways from this study?

- Choosing treatment for people with multiple myeloma can be hard because people and their illnesses are different
- What people want from their multiple myeloma treatment was different depending on how easily they can afford things, their age and gender, and whether they have other medical conditions not related to multiple myeloma
- Understanding what people want from their treatment can help them and their doctors make treatment choices to suit each person. This can help people feel better about their care and build stronger relationships with their doctors

INTRODUCTION

What is multiple myeloma?

- The appendix provides more information about multiple myeloma

Why do people have different goals for treatment of their multiple myeloma?

- People with multiple myeloma can differ in many ways. How easily people can afford things, their gender and age, how long they've had multiple myeloma, and whether they have other medical conditions not related to multiple myeloma at the same time can all affect how a person feels and what they want from their treatment for multiple myeloma

INTRODUCTION

What does this summary describe?

- This summary explains the results of a global survey

Researchers wanted to find out…

- What difficulties (financial, personal, medical) do people have managing their multiple myeloma?
- What priorities do people with multiple myeloma think about when choosing a treatment?
- Are there differences in what people want from their treatment or experiences based on their financial situation, age, gender, and whether they have other medical conditions not related to their multiple myeloma?

STUDY DETAILS

Who took part in this study?

30-minute web-based surveys were given to participants in 7 countries

France, Germany, Italy, Japan, Spain, United Kingdom, United States

People participating in the surveys included

1301 people with relapsed or refractory multiple myeloma (RRMM)

983 doctors who treat people with RRMM

What were the results of this study?

- **Financial burden (how easily people can afford things), their age, whether they have other medical conditions not related to multiple myeloma, and their gender all affect what they want from and how they feel about their treatment for multiple myeloma**

What were the treatment priorities for people in different financial situations?

The effects of financial burden (how hard it is for people to afford things)

People with financial difficulties	People with better finances

Keeping their multiple myeloma from getting worse and limiting side effects and costs were more important to people with **financial difficulties** than to people with **better finances**

People with financial difficulties		People with better finances
57%	Slowing or controlling their multiple myeloma	42%
57%	Limiting treatment-related side effects	34%
40%	Limiting treatment-related costs	26%

More people with **better finances** than people with **financial difficulties** thought convenience and making sure they didn't have to switch healthcare teams were important

People with financial difficulties		People with better finances
21%	**Convenience** (how treatment is administered and the time needed for travel, receiving treatment, and follow-up visits)	38%
17%	Avoiding switching healthcare teams	27%

- More people with **financial difficulties** said that their treatment experience was worse than expected compared with people with **better finances**

What were the treatment priorities for people of different ages?

The effects of a person's age

People 65 years or older

People younger than 65 years

Limiting side effects and keeping their multiple myeloma from getting worse were more important to people who were **65 years or older** compared with **younger people**

65 years or older		Younger than 65 years
53%	Limiting treatment-related side effects	33%
53%	Slowing or controlling their multiple myeloma	40%

More people who were **65 years or older** than **younger people** said that their treatment experience was worse than expected

65 years or older		Younger than 65 years
53%	Effect on quality of life worse than expected	20%
59%	Treatment-related side effects worse than expected	19%
56%	Effect on mental health worse than expected	21%

People who were **65 years or older** faced worse physical difficulties than **younger people**. Emotional or mental difficulties was similar in both age groups

65 years or older		Younger than 65 years
78%	Physical difficulties	69%
59%	Emotional or mental difficulties	64%

What were the treatment priorities for people with other medical conditions not related to myeloma?

The effects of having other medical conditions not related to multiple myeloma at the same time (including depression, diabetes, high blood pressure, obesity, lung disease, liver disease, heart disease)

People with 3 or more other medical conditions	People with less than 3 other medical conditions

Keeping their multiple myeloma from getting worse, limiting side effects, and limiting costs were more important to people who had **3 or more other medical conditions** than for people who had **less than 3 other medical conditions**

3 or more		less than 3
55%	Slowing or controlling their multiple myeloma	47%
53%	Limiting treatment-related side effects	45%
39%	Limiting treatment-related costs	29%
30%	Ability to live longer to reach milestones	40%

More people who had **3 or more other medical conditions** than people who had **less than 3 other medical conditions** said that their treatment experience was worse than expected

3 or more		less than 3
60%	Effect on quality of life worse than expected	38%

- People who had **3 or more other medical conditions** faced worse physical and emotional difficulties than people who had **less than 3 other medical conditions**

What were the treatment priorities for people of different genders?

The effects of gender

Females | **Males**

Fewer **females** said they were in remission than **males**, which was related to **females** having more physical difficulties, their treatment outcomes being worse than expected, and having more financial difficulties than **males**

Females		Males
27%	In remission	42%
78%	Physical difficulties	73%
42%	Felt the treatment was less effective than expected	32%
52%	Effect on mental health worse than expected	39%
50%	Effect on quality of life worse than expected	37%
39%	Financial difficulties	28%
76%	Having other medical conditions	67%

How did people make treatment decisions and what did they want to discuss?

Making treatment decisions

Only **13% of people** wanted their doctor to make treatment decisions without their input

More **younger people** than older people wanted their doctor to make the treatment decision

People younger than 65 years

People 65 years or older

More **people who had 2 previous treatments for multiple myeloma** than people who had 3 or more treatments wanted their doctor to make the treatment decision

People who had 2 previous treatments

People who had 3 or more previous treatments

Doctors said they recommended a treatment without discussing a person's goals in **22%** of cases

People wanted more discussion with their doctors on a number of topics

Side effects and safety risks

Impact on mental health

Impact of side effects on everyday life

CONCLUSIONS

What were the main conclusions of this study?

- What people want from their multiple myeloma treatment was different depending on how much money they have, their age and gender, and whether they have other medical conditions not related to multiple myeloma
  - Keeping their multiple myeloma from getting worse, limiting side effects, and limiting costs were more important to people with financial difficulties than to people with better finances
  - Limiting side effects and keeping their multiple myeloma from getting worse were more important to people who were 65 years or older compared with younger people
  - Keeping their multiple myeloma from getting worse, limiting side effects, and limiting costs were more important to people who had 3 or more other medical conditions than for people who had less than 3 other medical conditions
  - Females had more physical difficulties, their treatment outcomes were worse than expected, and they had more financial difficulties than males. These results were related to fewer females saying they were in remission
- Only 13% of people wanted their doctor to make treatment decision alone, but doctors said they recommended a treatment without discussion in 22% of cases
- Knowing what people want can help when choosing a treatment that suits them. This can make people feel better about their care and build better relationships with their doctors

MORE INFORMATION

Who sponsored the study?

This study was sponsored by Pfizer Inc.

Pfizer Inc.
66 Hudson Blvd E
New York, NY 10001
Phone (United States): +1 212-733-2323

The sponsor thanks everyone who took part in this study.

Where can I find more information?

For more information on this study, please visit:

View Scientific Abstract >

Medical writing support for this summary was provided by Robyn Roth, PhD, of Nucleus Global, and was funded by Pfizer.

PHONETICS

Find out how to say medical terms used in this summary

Antibody
<AN-tee-BAH-dee>

Myeloma
<MY-eh-LOH-muh>

Refractory
<reh-FRAK-tor-ee>

Relapsed
<REE-lapst>

Remission
<reh-MIH-shun>

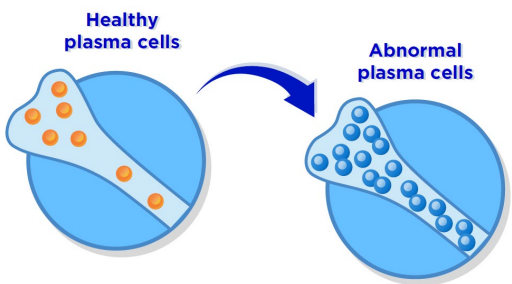
GLOSSARY

antibody: a protein the body's immune system makes to help fight infections
bone marrow: the soft, spongy tissue that is in most bones. This is where blood cells develop before moving into the bloodstream
immune system: the body's defense system. It helps fight infections and cancer
M protein: also called monoclonal protein; an antibody found in unusually large amounts in the blood or urine of people with multiple myeloma and other types of plasma cell tumors
multiple myeloma: a type of blood cancer that begins in the plasma cells
plasma cell: a type of white blood cell that makes large amounts of antibodies
refractory multiple myeloma: the state in which multiple myeloma does not respond or stops responding to treatment
relapsed multiple myeloma: the state in which the signs and symptoms of multiple myeloma reappear after a period of responding to therapy
remission: a decrease in or disappearance of signs and symptoms of cancer.
white blood cell: a type of blood cell that is made in the bone marrow and is part of the body's immune system

APPENDIX

What is multiple myeloma?

- Multiple myeloma is a blood cancer that affects a type of **white blood cell** known as a **plasma cell** in the **bone marrow**
  - Healthy plasma cells make proteins called **antibodies** that help fight infections
- Multiple myeloma leads to the buildup of abnormal plasma cells in the bone marrow, which:
  - Stop the body from making normal numbers of healthy blood cells, often causing anemia (low red blood cell count)
  - Make abnormal antibodies (also called M proteins)
  - Interfere with the normal function of kidneys and affect bone health



- At this time, there is no cure for multiple myeloma, but current treatments can help people live with the disease
- Multiple myeloma treatments can significantly reduce the number of myeloma cells, but they will eventually start to grow again in most patients. When this happens after treatment, we say the disease is **relapsed**
- In some people with multiple myeloma, the cancer does not respond to treatment at all
  - This is known as **refractory** multiple myeloma