



Appendix 33 - MULTIPLE MYELOMA

Approved settings/ treatment line

Protocols	Drugs in abbreviation	Evidence level
Primary therapy (Transplant-candidate)		
Bortezomib/ Lenalidomide/ Dexamethasone.		Category 1, Preferred
Bortezomib/ Cyclophosphamide/ Dexamethasone.		Category 2A, Preferred
Carfilzomib/ Lenalidomide/ Dexamethasone.		Category 2A
Ixazomib/ Lenalidomide/ Dexamethasone.		Category 2B
Bortezomib/ Thalidomide/ Dexamethasone.		Category 1
Bortezomib/ Doxorubicin/ Dexamethasone.		Category 2A
Carfilzomib/ Cyclophosphamide/ Dexamethasone.		Category 2A
Ixazomib/ Cyclophosphamide/ Dexamethasone.		Category 2A
Cyclophosphamide/ Lenalidomide/ Dexamethasone.		Category 2A
Daratumumab/ Bortezomib/ Thalidomide/ Dexamethasone		Category 2A
VTD-PACE	Dexamethasone/ Thalidomide/ Cisplatin/ Doxorubicin/ Cyclophosphamide/ Etoposide/ Bortezomib	Category 2A
VRD-PACE	Dexamethasone/ Lenalidomide/ Cisplatin/ Doxorubicin/ Cyclophosphamide/ Etoposide/ Bortezomib	
Maintenance therapy (transplant-candidate)		
Lenalidomide		Category 1, Preferred
Ixazomib		Category1
Bortezomib		Category 2A



Primary therapy (non-Transplant-candidate)		
Bortezomib/ Lenalidomide/ Dexamethasone.		Category 1, Preferred
Daratumumab/ Lenalidomide/ Dexamethasone.		Category 1, Preferred
Lenalidomide/ Low-dose Dexamethasone.		Category 1, Preferred
Bortezomib/ Cyclophosphamide/ Dexamethasone.		Category 2A
Carfilzomib/ Lenalidomide/ Dexamethasone.		Category 2A
Ixazomib/ Lenalidomide/ Dexamethasone.		Category 2A
Daratumumab/ Bortezomib/ Melphalan/ Prednisone.		Category 1
Bortezomib/ Dexamethasone.		Category 2A
Cyclophosphamide/ Lenalidomide/ Dexamethasone.		Category 2A
Carfilzomib/ Cyclophosphamide/ Dexamethasone.		Category 2A
Maintenance therapy (non-Transplant-candidate)		
Lenalidomide		Category 1, Preferred
Bortezomib		Category 2A



2nd line therapy

Daratumumab/ Lenalidomide/ Dexamethasone.		Category 1, Preferred
Daratumumab/ Bortezomib/ Dexamethasone.		Category 1, Preferred
Ixazomib/ Lenalidomide/ Dexamethasone.		Category 1, Preferred
Carfilzomib/ Lenalidomide/ Dexamethasone.		Category 1, Preferred
Carfilzomib (Bi-weekly)/ Dexamethasone.		Category 1, Preferred
Elotuzumab/ Lenalidomide/ Dexamethasone.		Category 1, Preferred
Carfilzomib (Weekly)/ Dexamethasone.		Category 2A, Preferred
Bortezomib/ Lenalidomide/ Dexamethasone		Category 2A, Preferred
Bendamustine/ Bortezomib/ Dexamethasone.		Category 2A
Bendamustine/ Lenalidomide/ Dexamethasone.		Category 2A
Bortezomib/ Cyclophosphamide/ Dexamethasone.		Category 2A
Bortezomib/ Liposomal-doxorubicin/ Dexamethasone.		Category 2A
Bortezomib/ Dexamethasone.		Category 1
Carfilzomib/ Cyclophosphamide/ Dexamethasone.		Category 2A
Cyclophosphamide/ Lenalidomide/ Dexamethasone.		Category 2A
Elotuzumab/ Bortezomib/ Dexamethasone		Category 2A
Elotuzumab/ Pomalidomide/ Dexamethasone		Category 2A
Daratumumab.		Category 2A
Daratumumab/ Carfilzomib/ Dexamethasone.		Category 2A
Daratumumab/ Pomalidomide/ Dexamethasone.		Category 2A
Ixazomib/ Cyclophosphamide/ Dexamethasone.		Category 2A
Ixazomib/ Dexamethasone.		Category 2A
Ixazomib/ Pomalidomide/ Dexamethasone.		Category 2A



Lenalidomide/ Dexamethasone.		Category 1
Pomalidomide/ Cyclophosphamide/ Dexamethasone.		Category 2A
Pomalidomide/ Bortezomib/ Dexamethasone.		Category 1
Pomalidomide/ Carfilzomib/ Dexamethasone.		Category 2A
Pomalidomide/ Dexamethasone.		Category 1
Bendamustine.		Category 2A
Carfilzomib/Thalidomide/cyclophosphamide / Dexamethasone.		Category 2A
DCEP	Dexamethasone/ Cyclophosphamide/ Cisplatin/ Etoposide	Category 2A
DT-PACE ± Bortezomib	Dexamethasone/Thalidomide/Cisplatin/Doxorubicin / Cyclophosphamide/ Etoposide	Category 2A
High dose Cyclophosphamide		Category 2A