

Velcade (Bortezomib): Treatment for patients diagnosed of multiple myeloma complicated by renal failure

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ABSTRACT

Renal failure is a common feature of multiple myeloma and a major management problem. Velcade is a proteasome inhibitor and some studies proved that it can be used in multiple myeloma.

Patients and methods. We evaluated 18 patients with new diagnosed or relapsed/refractory multiple myeloma and renal failure, defined as a sustained estimated creatinine clearance (CrCl) < 50ml/min, calculated by the Cockcroft-Gault formula, despite volume replacement and reversal of hypercalcemia. All patients received bortezomib-based regimens.

Results. The overall response rate (ORR) was 77.8% (14/18) including 5 CR, 2 VGPR, 4 PR, 3 MR (according to EBMT criterias). The median time to response was 55 days and it was correlated with myeloma status and myeloma response. Of the 4 nonresponding patients, 1 has SD and 3 have PD. A better quality of life with a better survival were noted after treatment. All patients witnessed a renal response: 9CRR, 3PRR and 6MRR. The median time to renal response was: 36 days. CrCl > 30 ml/min was independently correlated with a better renal response and a better time to renal response. 4 of 5 patients undergoing dialysis became dialysis independent. 88% of the adverse reactions were grade 1 and 2.

Conclusion. Bortezomib is an effective and a safe treatment for Multiple Myeloma complicated of renal failure for patients with new, refractory and relapsed disease. Bortezomib is better used as a first line therapy giving better myeloma response and a better renal response.