Treatment of multiple myeloma in Germany – an update of a representative multicentre health care survey

2004-2011

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**Objective**

The current survey was undertaken to gain insights into the changes of disease management of multiple myeloma (MM) over time and the implementation of new guidelines in clinical routine in Germany.

**Patients and methods**

817 centres involved in the treatment of MM including university hospitals (UH), community hospitals (CH), and oncologists in practice (OP) were contacted. 15% of identified centres provided information on 1787 pts. corresponding to 13% of the expected national prevalence. Detailed data on 478 unselcted patients with treatment decisions in the first and second quarters of 2011 (start, change or end of therapy) in 58 representative centres (10 UH, 37 CH, and 11 OP) were included in this analysis. The distribution of patients by institution was 20% UH, 40% CH and 40% OP. Data was verified by central monitoring. For all comparisons a p-value of less than 0.05 was considered statistically significant. The results were compared to similar published surveys in 2004, 2006 and 2009.

**Results**

The Durie-Salmon-Staging System has been used for more than 30 years. At the time of first diagnosis most patients (~60%) were already in stage III (Durie-Salmon). A simpler staging system, the International Staging System (ISS), has been shown to be very sensitive in predicting prognosis and, therefore, guiding treatment of multiple myeloma. The risk assessment has become well established (75% in 2011 vs. 19% in 2009).

Since Bortezomib was approved for first line treatment, the number of patients treated with Bortezomib in the second line has decreased. Lenalidomide has been administered to an increasing number of patients in the second line. Melphan + VD or VAD/I have almost disappeared from the second line, too.

**Conclusions**

Over time, diagnostic procedures as well as therapeutic interventions have been used according to guideline recommendations in an increasing number of patients. Nevertheless, stem cell transplantation has not been performed in all patients considered eligible. Novel agents, however, have been integrated rapidly into the treatment of newly diagnosed patients with Multiple Myeloma. In older patients (>75 y) the use of drugs could be increased on the basis of more study results.

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