# Optimizing the Implementation of New Therapies in Multiple Myeloma

A Mixed-Methods Approach to Identifying and Closing Knowledge and Practice Gaps Among Providers Caring for Patients with Multiple Myeloma



Kirollos Hanna<sup>1</sup>, Craig Emmitt Cole<sup>2</sup>, David Vesole<sup>3</sup>, Mary K. Stanley<sup>4</sup>, Kimberly Demirhan<sup>4</sup>, Latha Shivakumar<sup>4</sup>, Elana Plotkin<sup>4</sup>

<sup>1</sup>Minnesota Oncology, St. Paul, MN; <sup>2</sup>Michigan State University - Karmanos Cancer Institute, Lansing, MI; <sup>3</sup>John Theurer Cancer Center at Hackensack UMC, Hackensack, NJ; <sup>4</sup>Association of Cancer Care Centers (ACCC), Rockville, MD

## BACKGROUND

Treatment regimens for multiple myeloma have expanded significantly over the last decade and have improved outcomes in patients.

This expansion has created knowledge and practice gaps among community oncology providers in administration protocol and adverse event (AE) management.

The goal of this project was to assess practice patterns, monitoring and management of treatment-related AEs, supportive care services, and barriers to treatment for patients with multiple myeloma.

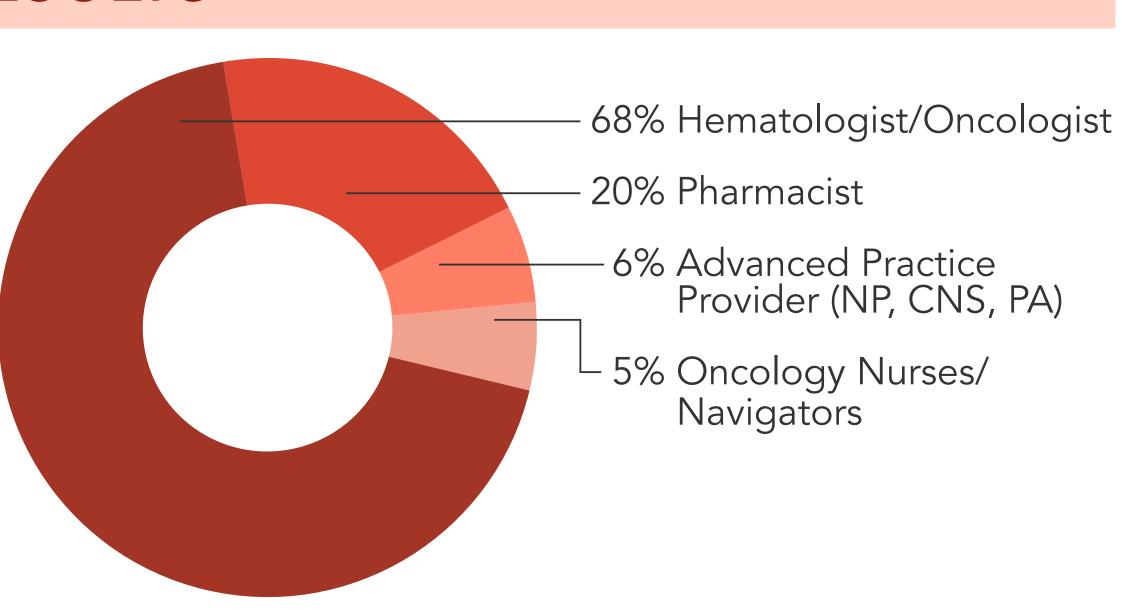
#### METHODS

In 2023, ACCC administered an online survey focused on assessing practice patterns related to diagnosis and treatment of patients with multiple myeloma.

Results from the survey were further explored and affirmed in two provider focus groups comprised of seven survey respondents.

#### RESULTS

Survey respondents (n=114) included multidisciplinary oncology providers who treat patients with multiple myeloma, including hematologists oncologists (68%), pharmacists (20%), advanced practice providers (6%), and oncology nurses/navigators (5%).



Under half (49%) of the respondents reported being "familiar" or "very familiar" with updated clinical practice guidelines.

Respondents reported a need for additional resources, including multiple myelomaspecific educational materials (45%), guidance/information regarding clinical trial availability (44%), recommendations on sequencing therapies (41%), increased availability of social workers/mental health providers (40%), and information on managing AEs (32%).

# Barriers to Care in Subsequent Lines of Therapy (in order of reported significance)

Multiple comorbidities complicating clinical decision-making



Concern about patient fitness (e.g., patients with ECOG PS score  $\geq 2$ )



(\$) Cost of care/insurance premiums and limitations on coverage



Supply issues (e.g., limited slots/long waiting list for CAR T-cell manufacturing)

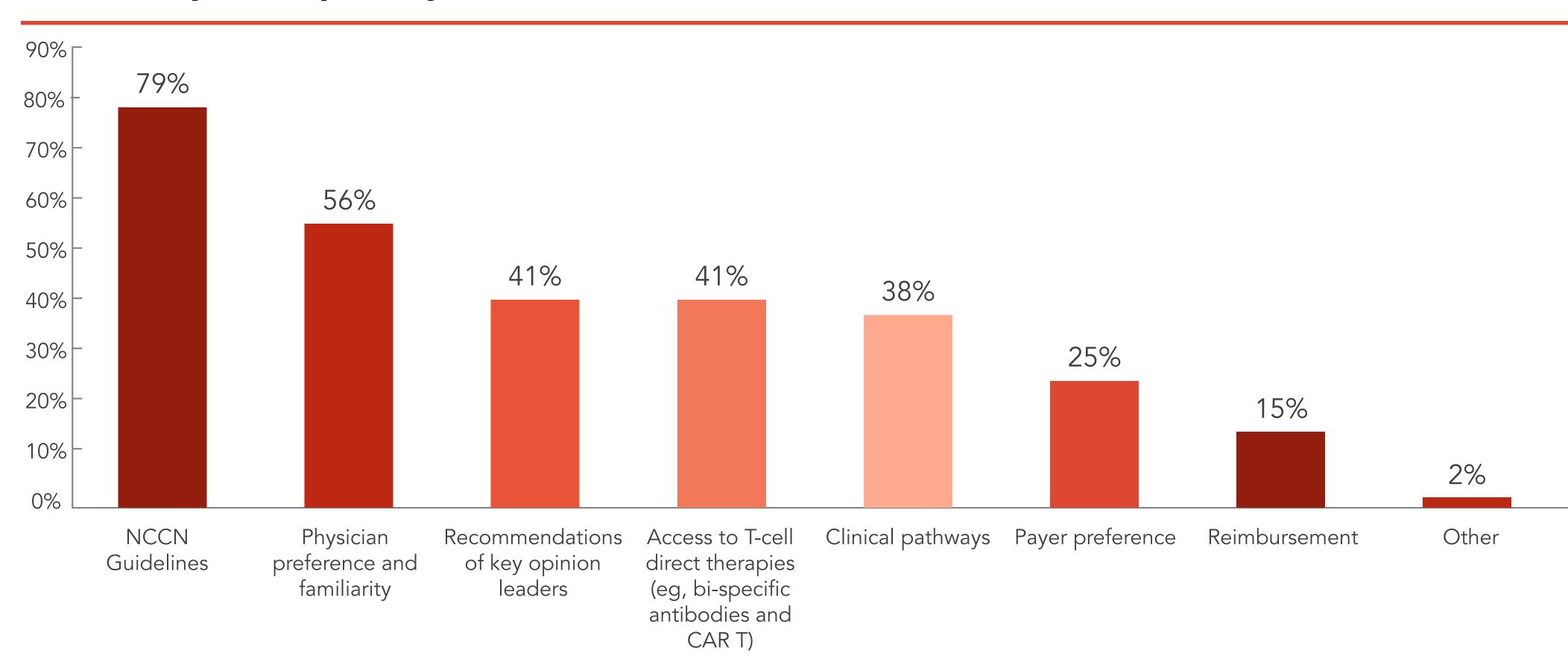


Concern about managing treatment-related adverse events



Lack of access to treatment (distance to receive treatment, restrictive institutional pathways) institutional pathways)

# Variables Considered when Selecting Treatment Options for Relapsed/ Refractory Multiple Myeloma



### Management of Adverse Events

On average, community providers reported being less confident managing adverse events than academic providers for CAR-T-associated AEs (academic, 3.60; community, 3.07), as well as AEs associated with bispecific agents (academic, 3.60; community, 3.19). (Likert: 1=not at all confident, 5=very confident).

Just 50% reported that patients are monitored weekly for AEs.

#### Survivorship

62% Most respondents indicated that a survivorship discussion is initiated upon diagnosis.

The remainder indicated that survivorship planning occurs only by patient request.

# CONCLUSIONS

This study highlighted ways to improve the care of patients with multiple myeloma:



Provider education continues to be important to operationalize novel therapeutic classes.



Patient education can be optimized for the unique disease and treatment features of multiple myeloma compared with other cancers.



Support for programs that facilitate communication between academic and community practices may help more patients access new therapies such as CAR T-cells and bispecific agents.



Continued support for financial assistance programs will also ensure that Continued support for financial assistance programs will also ensured the support for financial assistance programs are support for financial assistance programs.



Scan this QR code for more information on this project and to download the poster. Or visit accc-cancer.org/knowledgegaps-in-multiple-myeloma-treatment

Copies of this poster obtained through Quick Response (QR) Code are for personal use only and may not be reproduced without permission from the author of this poster.

#### **AUTHOR CONTACT INFORMATION**

Mary K. Stanley, LMSW, PMP Association of Cancer Care Centers mstanley@accc-cancer.org