La rivoluzione terapeutica nel **linfoma** e nel **mieloma**

Napoli, Royal Hotel Continental • 14–15 Maggio 2026

Opportunità terapeutiche nei pazienti con malattia avanzata

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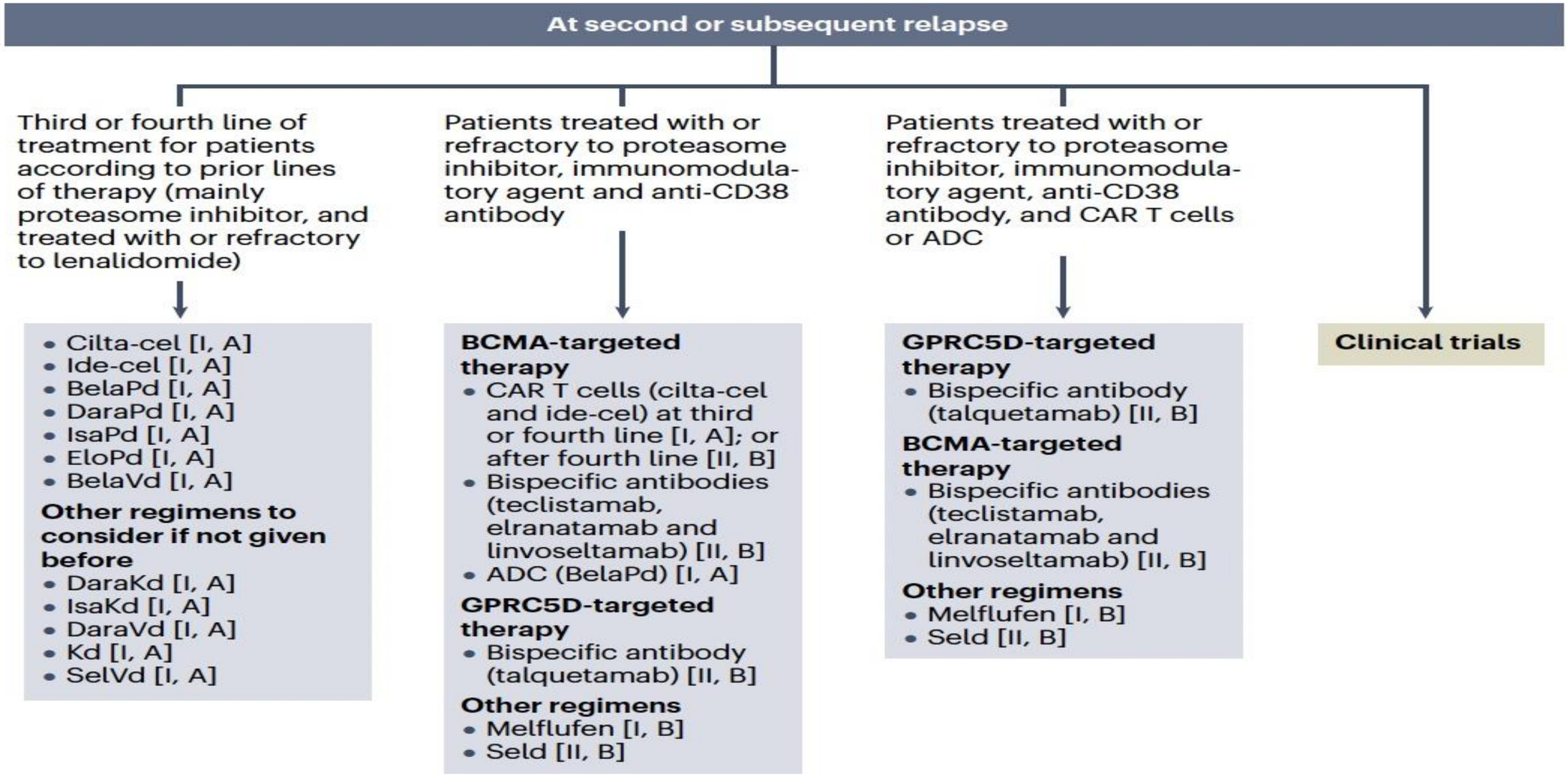
Disclosures of Marco Rossi

Company name	Research support	Employee	Consultant	Stockholder	Speakers bureau	Advisory board	Other
Sanofi						X	
Amgen						X	
Abbvie			X			X	
JnJ						X	
Astrazeneca			x			X	
Beone						X	

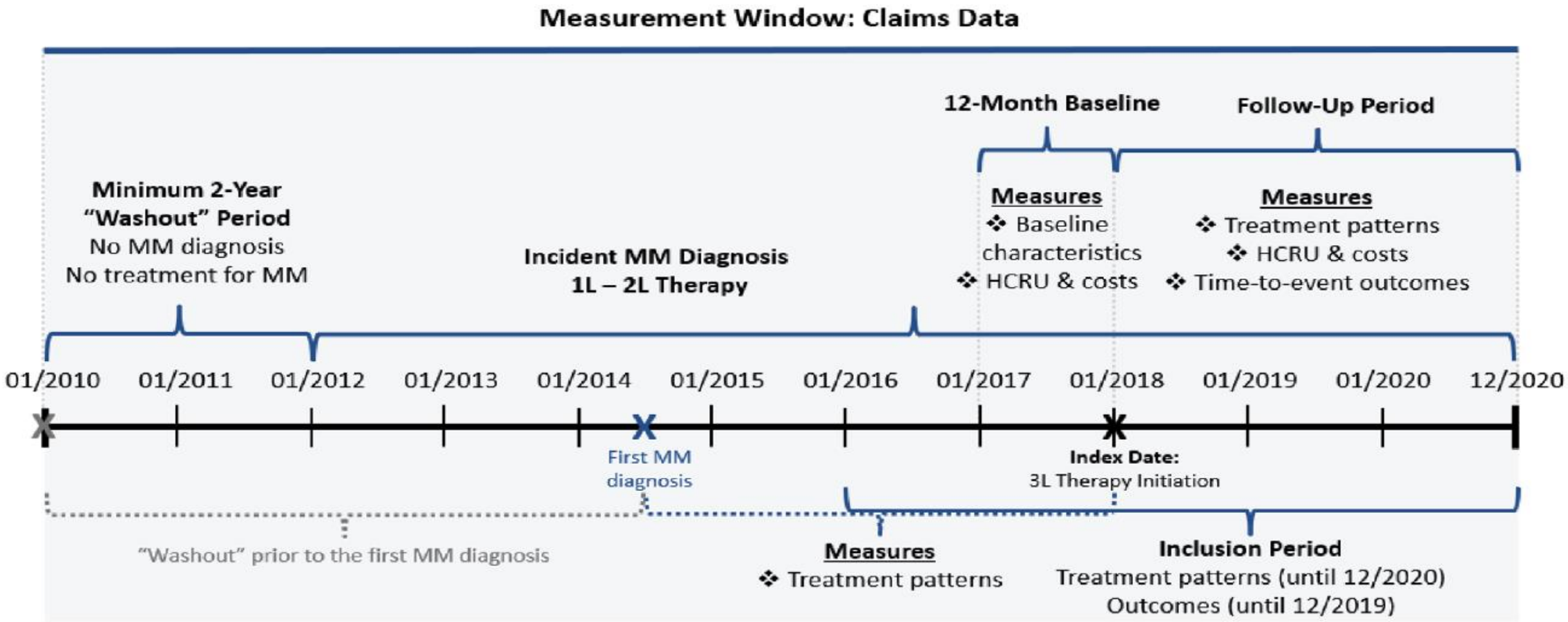
Key Issues

- Meaning of Advanced Disease in 2026
- Valuable therapeutic options from third line on



Dimopulos et al. Nat rev Clin Oncol, 2025

Third Line: to be or not to be?



Lehne et al., Eur J Hematol., 2024

Third line: pts features

	Germany (n = 276)	Italy (n = 289)	UK (n = 401)	France (n = 527)	Spain (n = 372)
Sex, *n* (%)					
Female	137 (49.6)	148 (51.2)	212 (52.9)	242 (45.9)	172 (46.2)
Age groups at index date, *n* (%)					
<65 years	69 (25.0)	66 (22.8)	123 (30.7)	129 (24.5)	107 (28.8)
65–74 years	65 (23.6)	90 (31.1)	124 (30.9)	182 (34.5)	155 (41.7)
≥75 years	142 (51.4)	133 (46.0)	154 (38.4)	216 (41.0)	110 (29.6)
Median age at index date (range), years	75 (33–91)	73 (39–95)	71 (42–88)	72 (36–93)	70 (36–102)
Median time since diagnosis (range), years[a]	2.7 (0.4–7.4)	2.1 (0.3–6.7)	3.4 (0.4–15.3)	4.9 (0.2–20.2)	3.8 (0.3–27)
Charlson Comorbidity Index score					
Median (range)	6 (2–16)	–	–	–	–
Select comorbidities, *n* (%)[b]					
Cardiovascular disease	153 (55.4)	–	–	–	–
Renal disease	149 (54.0)	–	–	–	–
Ocular diseases	132 (47.8)	–	–	–	–
Congestive heart failure	113 (40.9)	–	–	–	–
Diabetes mellitus	102 (37.0)	–	–	–	–
Polyneuropathy	72 (26.1)	–	–	–	–
Chronic pulmonary disease	65 (23.6)	–	–	–	–
Extramedullary disease	8 (2.9)	–	–	–	–
ISS stage, *n* (%)					
I	NA	NA	11 (2.7)	33 (6.3)	68 (18.3)
II	NA	NA	18 (4.5)	83 (15.7)	94 (25.3)
III	NA	NA	94 (23.4)	43 (8.2)	115 (30.9)
Unknown	NA	NA	278 (69.3)	368 (69.8)	95 (25.5)
CRAB criteria, *n* (%)[c]					
Hypercalcemia (C)	NA	NA	91 (22.7)	57 (10.8)	58 (15.6)
Renal dysfunction (R)	NA	NA	54 (13.5)	49 (9.3)	73 (19.6)
Anemia (A)	NA	NA	187 (46.6)	157 (29.8)	183 (49.2)
Bone disease (B)	NA	NA	100 (24.9)	156 (29.6)	172 (46.2)
Unknown	NA	NA	78 (19.5)	202 (38.3)	67 (18.0)
M-protein type, *n* (%)					
IgG	NA	NA	208 (51.9)	310 (58.8)	197 (53.0)
Non-IgG	NA	NA	107 (26.7)	107 (20.3)	113 (30.4)
Unknown	NA	NA	86 (21.4)	110 (20.9)	62 (16.7)
Prior MM treatments in 1L or 2L, *n* (%)[d]					
PI	264 (95.7)	151 (52.2)	392 (97.8)	467 (88.6)	348 (93.5)
Bortezomib	261 (94.6)	143 (49.5)	385 (96.0)	464 (88.0)	347 (93.3)
Carfilzomib	39 (14.1)	15 (5.2)	7 (1.7)	34 (6.5)	29 (7.8)
Ixazomib	4 (1.4)	≤3	28 (7.0)	19 (3.6)	3 (0.8)
IMiD	154 (55.8)	213 (73.7)	374 (93.3)	488 (92.6)	307 (82.5)
Lenalidomide	148 (53.6)	162 (56.1)	88 (21.9)	442 (83.9)	271 (72.8)
Pomalidomide	8 (2.9)	9 (3.1)	1 (0.2)	9 (1.7)	3 (0.8)
Thalidomide	≤3	79 (27.3)	310 (77.3)	249 (47.2)	94 (25.3)
Anti-CD38 mAb	30 (10.9)	13 (4.5)	124 (30.9)	15 (2.8)	34 (9.1)
Daratumumab	30 (10.9)	13 (4.5)	124 (30.9)	15 (2.8)	34 (9.1)

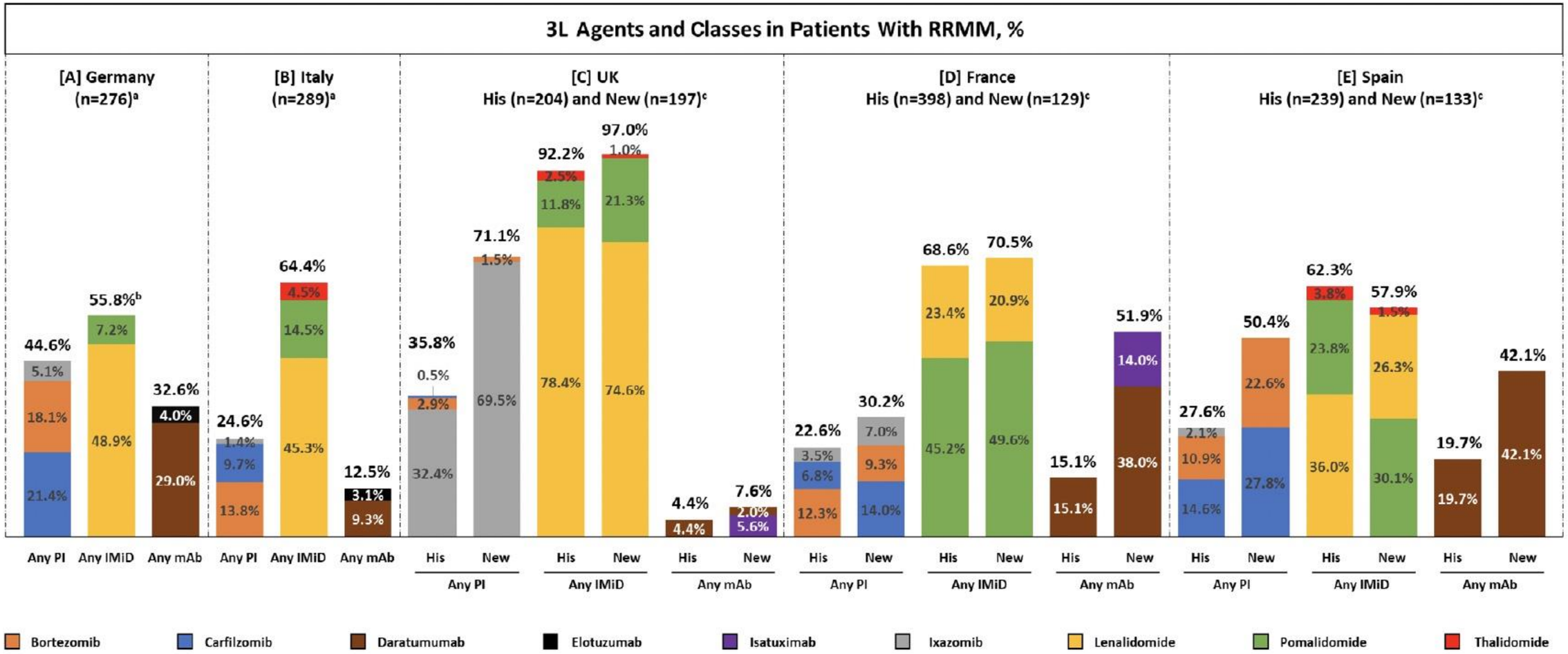
Lehne et al., Eur J Hematol., 2024

Imid exposure/refractoriness

	Germany (*n* = 276)	Italy (*n* = 289)	UK (*n* = 401)	France (*n* = 527)	Spain (*n* = 372)
LEN + PI exposed and POM naive	135 (48.9)	61 (21.1)	84 (20.9)	377 (71.5)	250 (67.2)
Double-class exposed[e]	144 (52.2)	96 (33.2)	265 (66.1)	414 (78.6)	256 (68.8)
Triple-class exposed[e]	15 (5.4)	8 (2.8)	112 (27.9)	15 (2.8)	32 (8.6)
Stem cell transplant	75 (27.2)	43 (14.9)	168 (41.9)	233 (44.2)	151 (40.6)

Lehne et al., Eur J Hematol., 2023

Imid exposure/refractoriness



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Imid exposure/refractoriness

TABLE 2 Most common 3L treatment regimens in patients with RRMM in Germany and Italy (2016–2020) and the UK, France, and Spain (2016–2018 [historical] and 2019–2021 [new]).

Most common 3L treatment regimens (≥10 patients), *n* (%)[a]															
Germany ($n = 276$)[b]		Italy ($n = 289$)[b]		UK ($n = 401$)[c]				France ($n = 527$)[c]				Spain ($n = 372$)[c]			
				His ($n = 204$)		New ($n = 197$)		His ($n = 398$)		New ($n = 129$)		His ($n = 239$)		New ($n = 133$)	
LEN-d	35 (12.7)	LEN-d	52 (18.0)	LEN-d	74 (36.3)	IXA-LEN-d	133 (67.5)	POM-d	135 (33.9)	POM-d	22 (17.1)	LEN-d	47 (19.7)	DAR-BTZ-d	20 (15.0)
CFZ-LEN (±d)[d]	27 (9.8)	POM (±d)[d]	35 (12.1)	IXA-LEN-d	64 (31.4)	POM-d	29 (14.7)	LEN-d	50 (12.6)	ISA-POM-d	16 (12.4)	POM-d	34 (14.2)	POM-CTX-d	19 (14.3)
CFZ-d	22 (8.0)	LEN	27 (9.3)	POM-d	22 (10.8)	LEN-d	12 (6.1)	POM-CTX-d	27 (6.8)	DAR-d	14 (10.9)	DAR	25 (10.5)	DAR-LEN-d	15 (11.3)
DAR-LEN (±d)[d]	22 (8.0)	MEL + steroids	27 (9.3)	CTX-LEN-d	15 (7.4)	ISA-POM-d	11 (5.6)	DAR-d	22 (5.5)	DAR-LEN-d	14 (10.9)	POM-CTX-d	18 (7.5)	CFZ-LEN-d	14 (10.5)
LEN	18 (6.5)	DAR-LEN (±d)[d]	15 (5.2)					CFZ-LEN-d	19 (4.8)			CFZ	11 (4.6)	POM-d	14 (10.5)
DAR-BTZ (±d)[d]	18 (6.5)	CFZ-LEN (±d)[d]	11 (3.8)					DAR	17 (4.3)			CFZ-LEN-d	11 (4.6)	CFZ-d	10 (7.5)
DAR	11 (4.0)	LEN + steroids[e]	10 (3.4)					BTZ-CTX-d	15 (3.8)			CFZ-d	10 (4.2)	DAR	10 (7.5)
POM (±d)[d]	11 (4.0)							BEN	13 (3.3)						
BTZ-d	10 (3.6)							BTZ-BEN-d	13 (3.3)						
								DAR-POM-d	12 (3.0)						
								BTZ-d	11 (2.8)						
								IXA-LEN-d	11 (2.8)						
								BEN-d	10 (2.5)						

Lehne et al., Eur J Hematol., 2023

The MM patient at third line: 2020-2025

- Lena refractory
- PI exposed/refractory (Bzb/K)
- Anti CD38 exposed/refractory
- BCMA targeting naive
- Valuable therapeutic options to save BCMA targeting:
  pom based regimens; selinexor

Elotuzumab-pomalidomide in RW

Table 3. Prognostic survival scoring systems

Progression risk score for daratumumab-refractory patients (PRS_{DaraR})

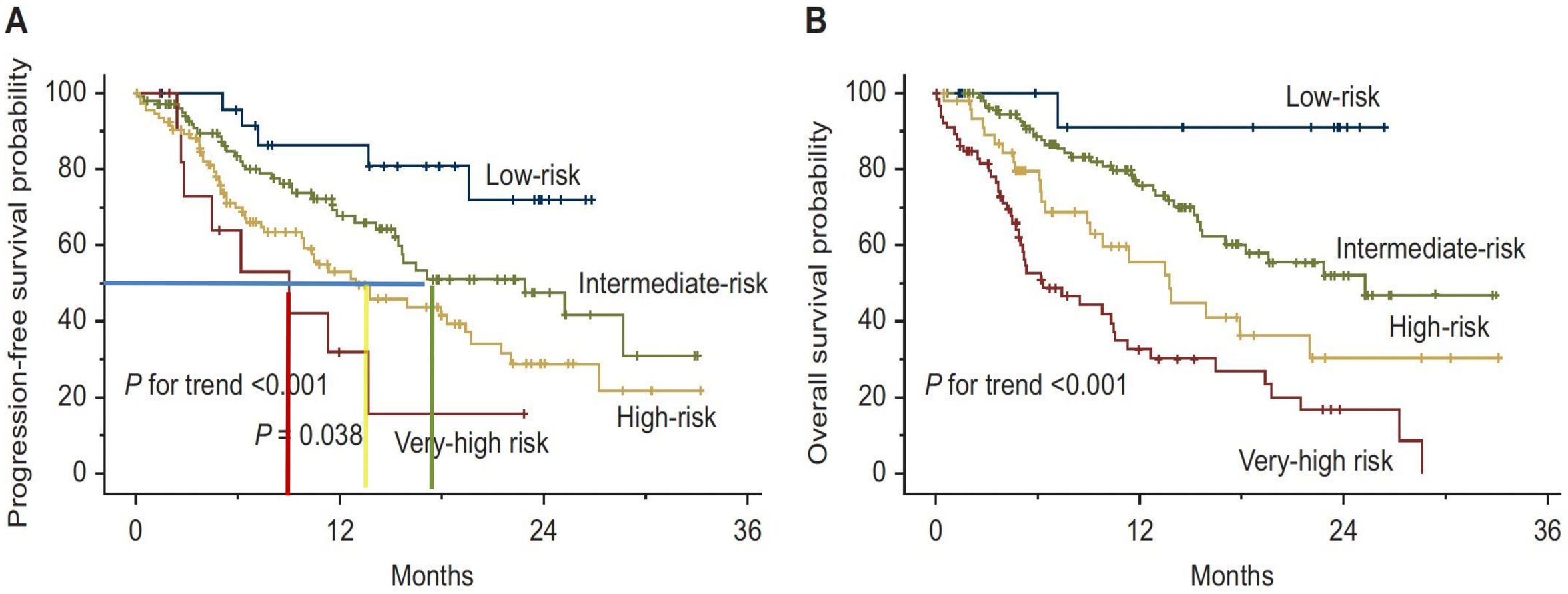
Prognostic factors	Points
ISS II-III	1
Daratumumab at last therapy	1
Symptomatic relapse	1
Low-risk: score 0; intermediate-risk: score 1; high-risk: score 2; very high-risk: score 3	

Survival risk score for daratumumab-refractory patients (SRS_{DaraR})

Prognostic factors	Points
Hb <10.6 g/dl	2
ISS II-III	2
Symptomatic relapse	3
Refractory disease	2
Low-risk: score 0; intermediate-risk: scores 2-4; high-risk: score 5; very high-risk: scores 6-7	

Martino EA et al., ESMO open, 2025

Elotuzumab-pomalidomide in RW



Martino EA et al., ESMO open, 2025

Cyclofosfamide-pomalidomide in RW

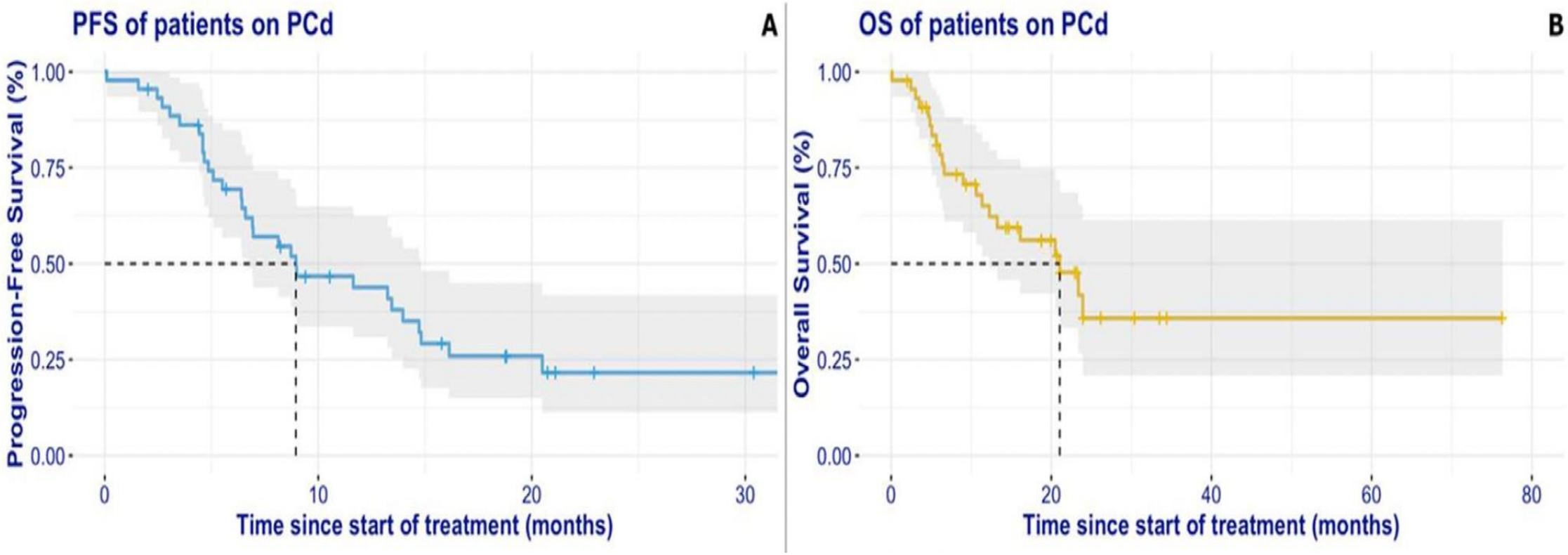
Variable	All patients (n=45)
Age at baseline – years	66 (46-88)
Age at PCd initiation – years	72 (47-91)
Gender – n (%)	
Female	17 (37.8)
Male	28 (62.2)
Prior lines of treatment – n	2 (1-5)
HDM-ASCT – n (%)	15 (33.3)
Cytogenetics at baseline – n (%)	
High-risk	7 (15.6)
Expanded high-risk	14 (31.1)

Variable	All patients (n=45)
Len-based	12 (26.7)
PI-based	7 (15.6)
Anti-CD38 mAb	7 (15.6)
Alkylating agent	1 (2.2)
Anti-BCMA	1 (2.2)
Other	3 (6.7)

First line therapy – n (%)	
PI-based	16 (35.6)
PI+Len-based	15 (33.3)
Len-based	7 (17.8)
Anti-CD38 mAb	4 (8.9)
Chemotherapy	2 (4.4)
Prior line of therapy – n (%)	
PI+Len-based	14 (31.1)

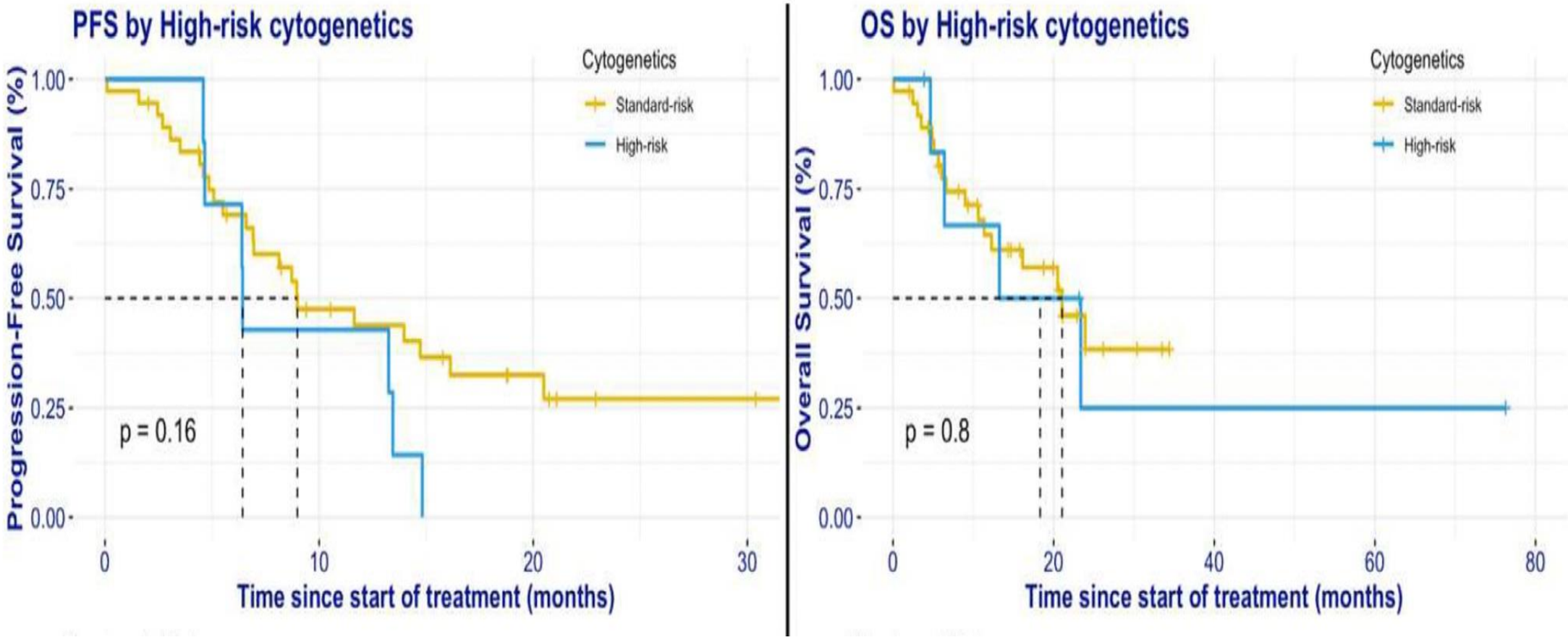
Stathoupulos et al., Clin Lymph and Myel , 2025

Cyclofosfamide-pomalidomide in RW



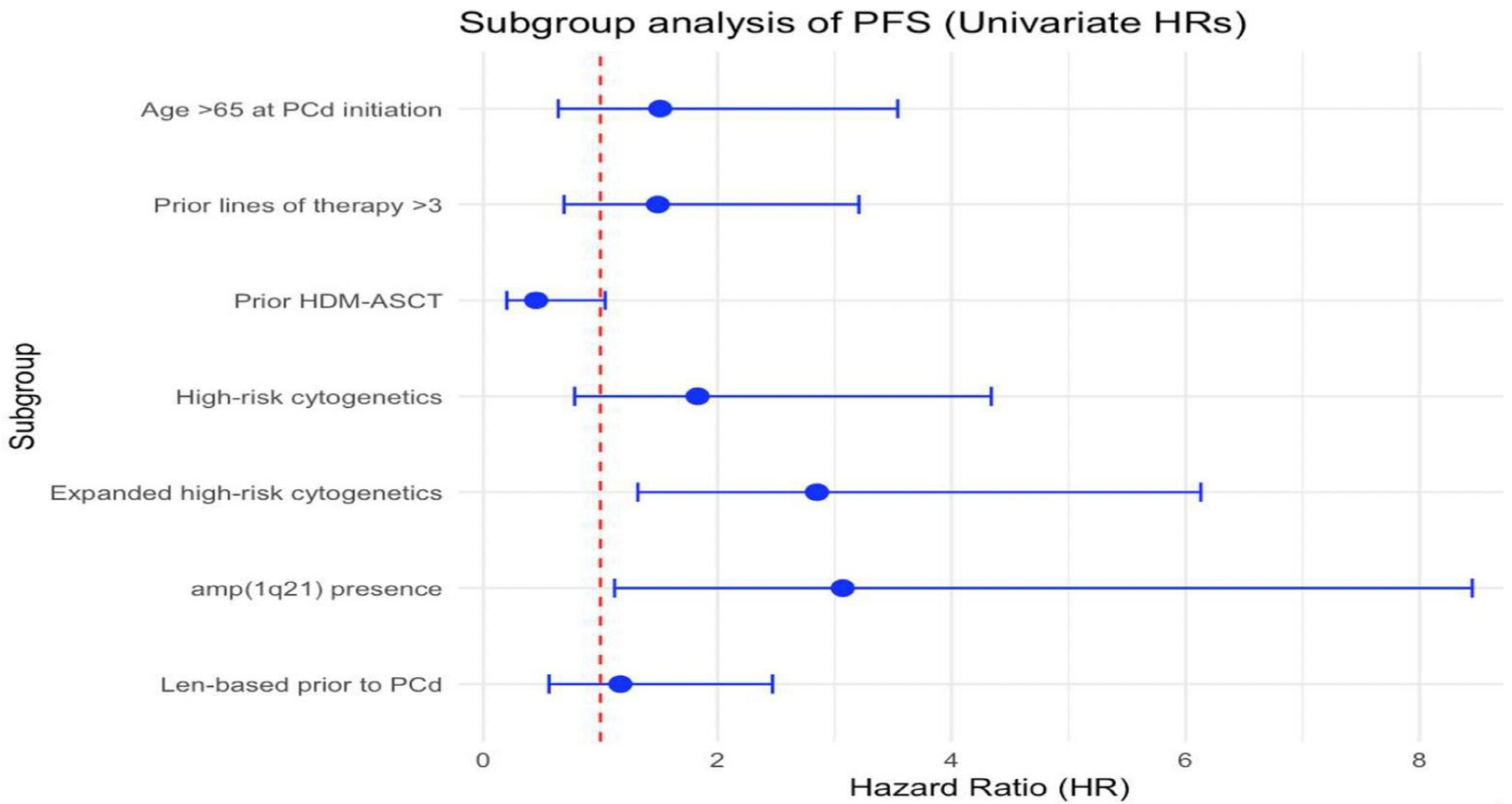
Stathoupulos et al., Clin Lymph and Myel , 2025

Cyclofosfamide-pomalidomide in RW



Stathoupulos et al., Clin Lymph and Myel , 2025

Cyclofosfamide-pomalidomide in RW



Stathoupulos et al., Clin Lymph and Myel , 2025

Selinexor based triplets in RW (US Flatiron health database)

Characteristic, *n* (%)	Overall (*n* = 112)	Anti-CD38 mAb Treatment Immediately Prior to Selinexor-Triplet Regimen (*n* = 33)
Previous therapy exposures		
Bortezomib	107 (96)	28 (85)
Carfilzomib	86 (77)	23 (70)
Ixazomib	31 (28)	8 (24)
Daratumumab	105 (94)	32 (97)
Isatuximab	5 (4.5)	2 (6)
Elotuzumab	27 (24)	6 (18)
Lenalidomide	109 (97)	32 (97)
Pomalidomide	93 (83)	24 (73)
Thalidomide	5 (4.5)	0 (0)
Autologous Hematopoietic Stem Cell Transplant		
Prior transplant	62 (55)	16 (48)
No prior transplant	50 (45)	17 (52)

Whiteley et al., Curr Oncol , 2025

Selinexor based triplets in RW

Characteristic, *n* (%)	Overall (*n* = 112)	Anti-CD38 mAb Treatment Immediately Prior to Selinexor-Triplet Regimen (*n* = 33)
Cytogenic risk		
High	29 (26)	12 (38)
Standard	39 (35)	9 (28)
Unknown	39 (35)	11 (34)
Index LOT line number		
≤3L	7 (6.3)	5 (15)
4L	17 (15)	9 (27)
5L	31 (28)	14 (42)
6L	11 (9.8)	2 (6)
7L	18 (16)	1 (3)
≥8L	28 (25)	2 (6)
Index LOT regimen		
XVd	53 (47)	12 (36)
XKd	28 (25)	7 (21)
XDd	11 (9.8)	5 (15)
XPd	20 (18)	9 (27)

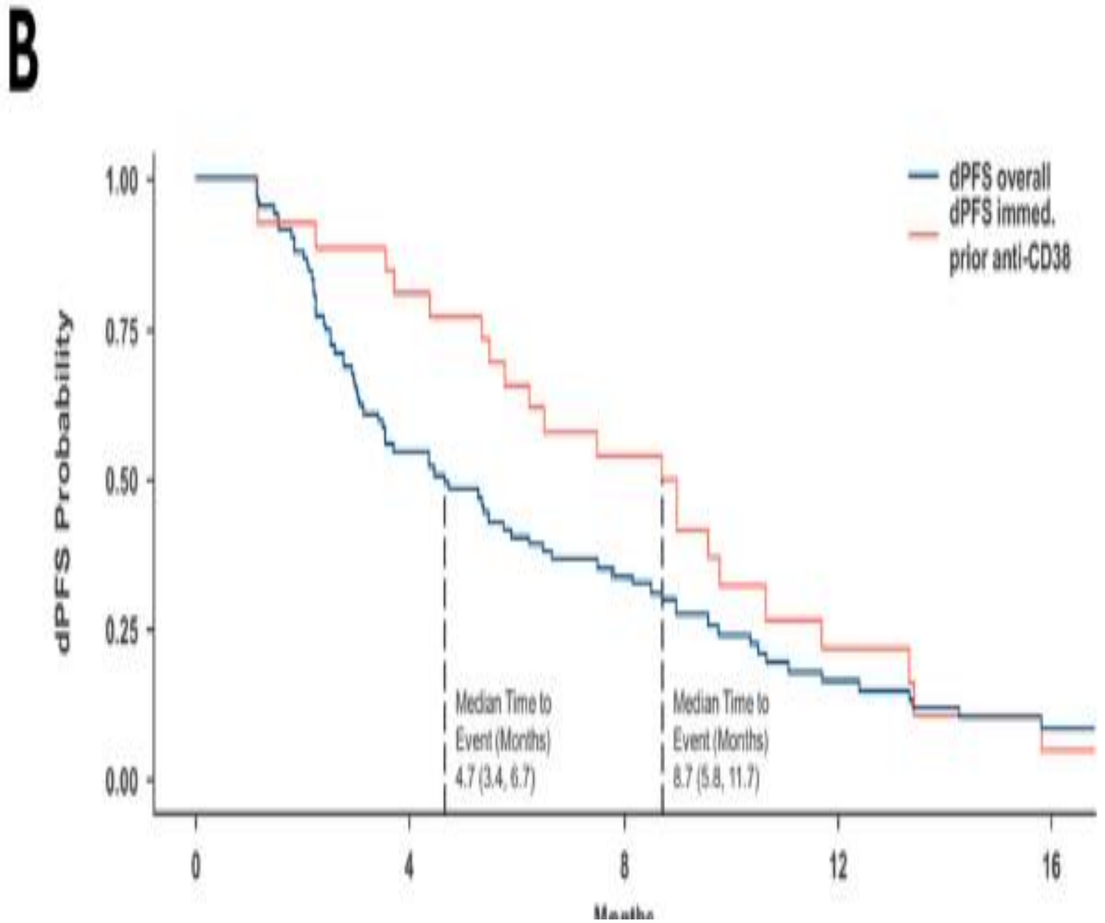
Whiteley et al., Curr Oncol , 2025

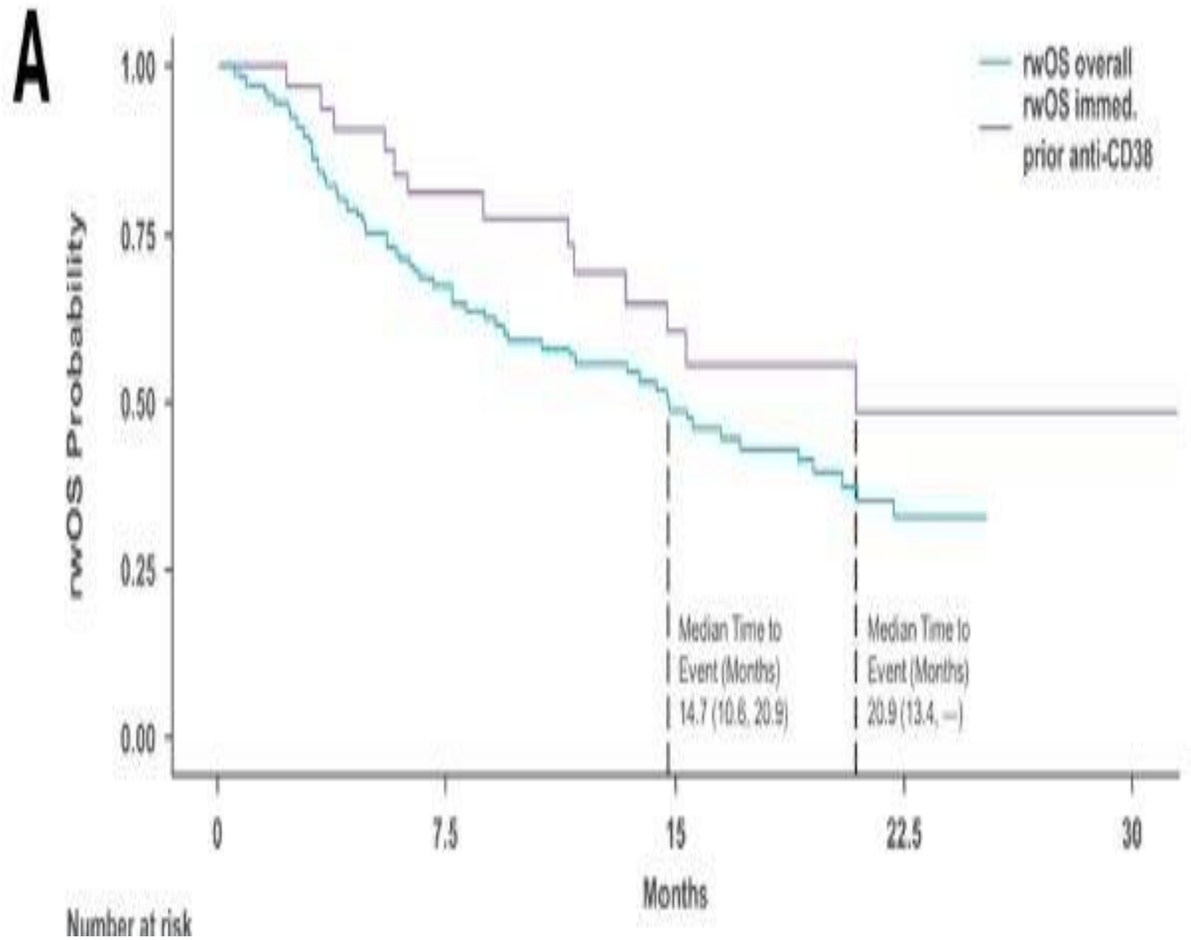
Selinexor based triplets in RW

	Overall (*n* = 77)	100 mg (*n* = 24)	80 mg (*n* = 22)	60 mg (*n* = 27)	40 mg (*n* = 4)
Had change in prescribed dose, *n*, (%)	22 (29)	14 (58)	7 (32)	1 (3.7)	0 (0)
Selinexor Regimen *n*, (%)					
XVd	39 (51)	20 (83)	12 (55)	6 (22)	1 (25)
XKd	18 (23)	1 (4.2)	8 (36)	8 (30)	1 (25)
XDd	7 (9.1)	3 (13)	1 (4.5)	2 (7.4)	1 (25)
XPd	13 (17)	0 (0)	1 (4.5)	11 (41)	1 (25)

Whiteley et al., Curr Oncol , 2025

Selinexor based triplets in RW: outcomes





Whiteley et al., Curr Oncol , 2025

The MM patient at fourth line: time for BCMA or GPRC5d

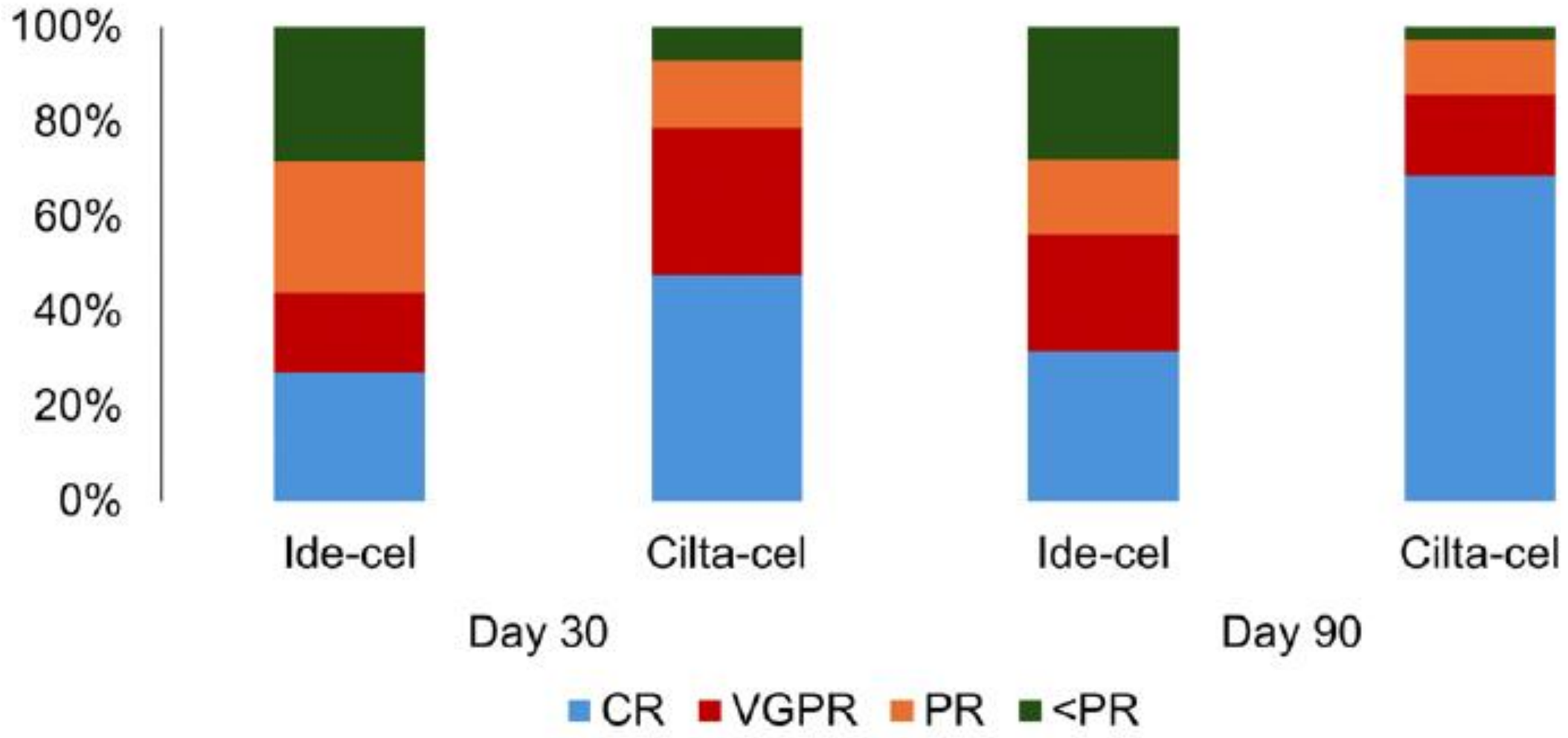
- BCMA targeting: ciltacel, idecel
- BCMA targeting: teclistamab, elranatamab
- GPRC5d targeting: talquetamab

Ciltacel vs Idecel in RW

Characteristic	Ide-cel (*n* = 162)	Cilta-cel (*n* = 42)	*p*
Age, median (range)	61 (28–83)	61 (24–84)	0.32
Sex, no. (%)			0.08
Male	106 (65)	21 (50)	
Female	56 (35)	21 (50)	
Race/Ethnicity, no. (%)			0.35
Non-Hispanic White	150 (93)	42 (100)	
Non-Hispanic Black	4 (2)	0	
Hispanic	5 (3)	0	
Other	3 (2)	0	
ECOG, no. (%)			0.11
0	52 (32)	6 (14)	
1	90 (56)	70 (71)	
2	18 (11)	6 (14)	
3	2 (1)	0	
R-ISS, no. (%)			0.35
I	33 (22)	5 (12)	
II	84 (55)	27 (64)	
III	35 (23)	10 (24)	
Unknown	10	4	
Extramedullary disease, no. (%)	47 (29)	20 (48)	0.03
Plasma cell leukemia, no. (%)	7 (4)	0	0.19
High-risk cytogenetics, no. (%)	76 (52)	16 (52)	0.94
Unknown	17	11	
Prior transplantation, no. (%)			0.03
Autologous	145 (90)	42 (100)	
Allogeneic	11 (7)	0	
Prior lines of therapy, no. (%)	6 (3–14)	6 (4–10)	0.41
Refractory status, no. (%)			
Triple-class	104 (64)	29 (67)	0.77
Penta	58 (36)	10 (24)	0.20
Prior anti-BCMA exposure, no. (%)	18 (11)	4 (10)	0.77
Time between diagnosis and infusion in years, median (range)	7.4 (0.2–27.6)	6.9 (0.2–23.9)	0.53
Time between apheresis and infusion in days, median (range)	47 (28–190)	68 (33–139)	<0.001
Follow-up in months, median (95% CI)	12.5 (11.7–13.3)	8.9 (6.6–11.3)	<0.001

Merz et al., Hemasphere , 2025

Ciltacel vs Idecel in RW



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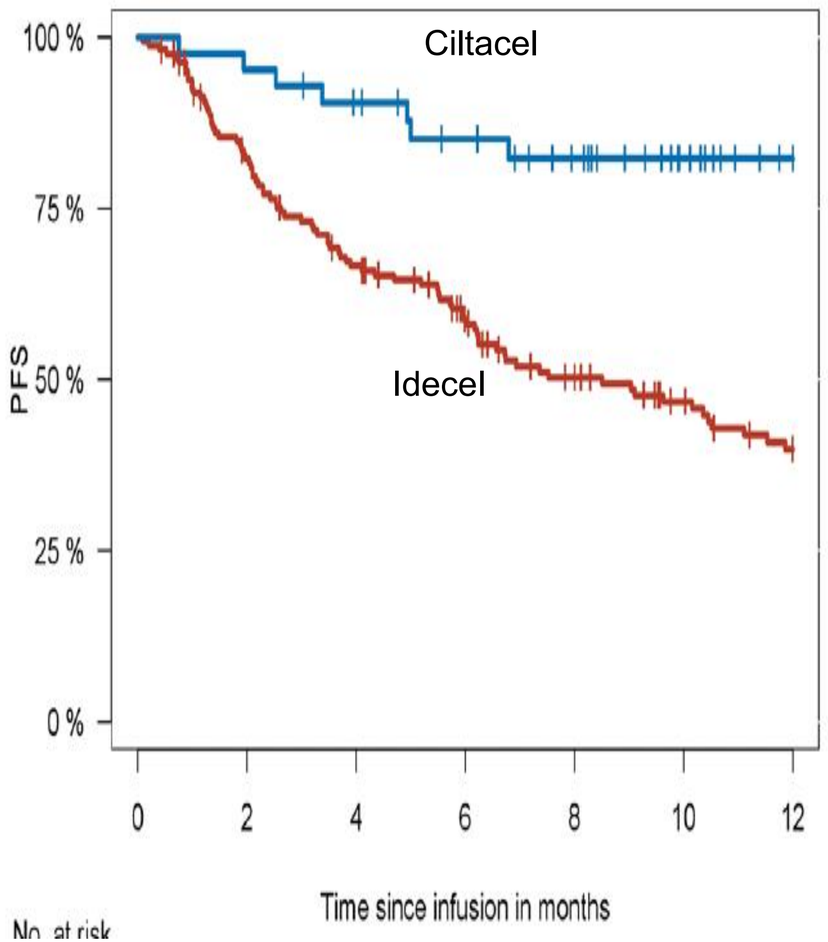

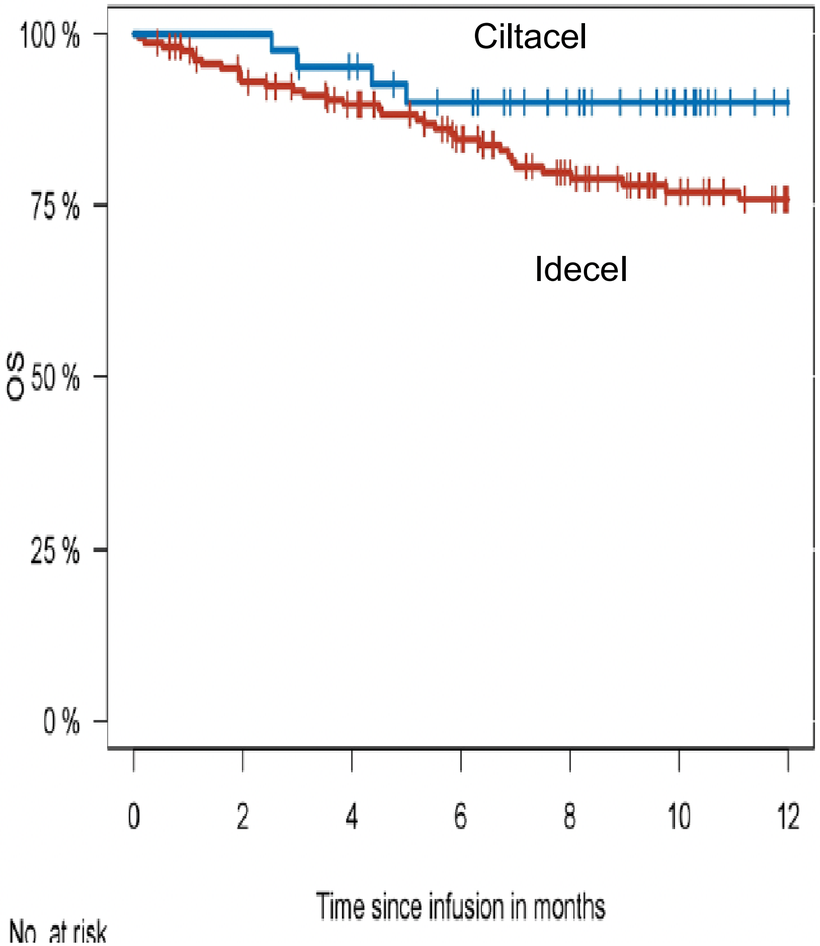

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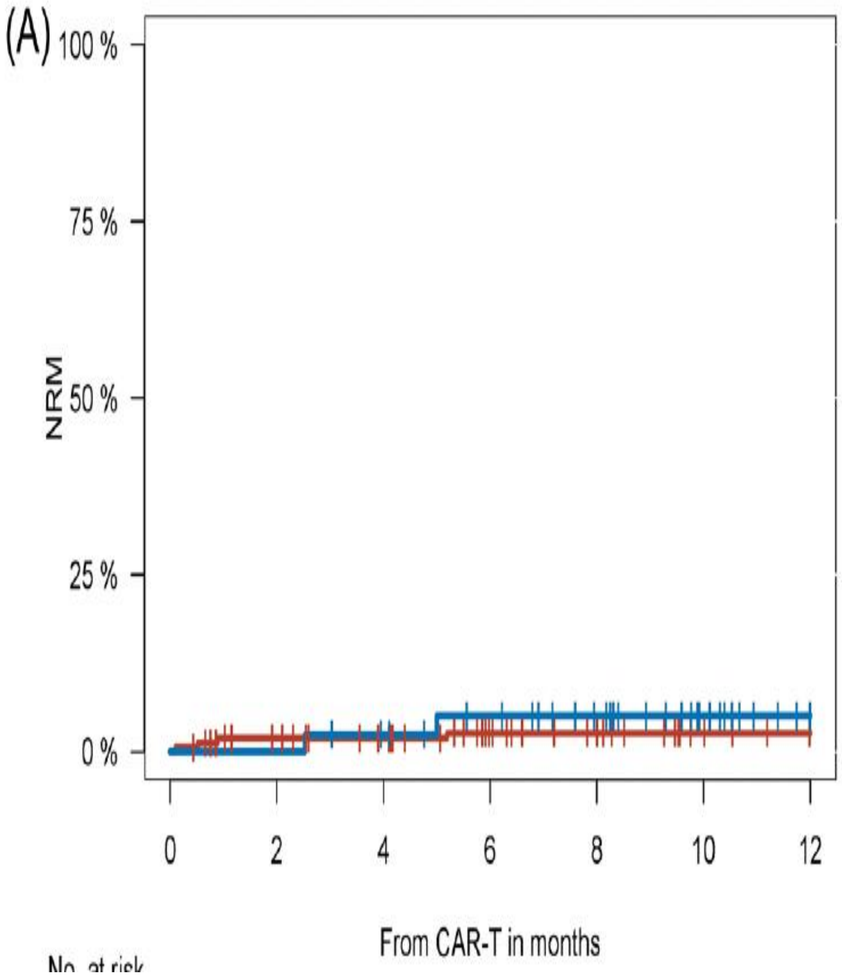

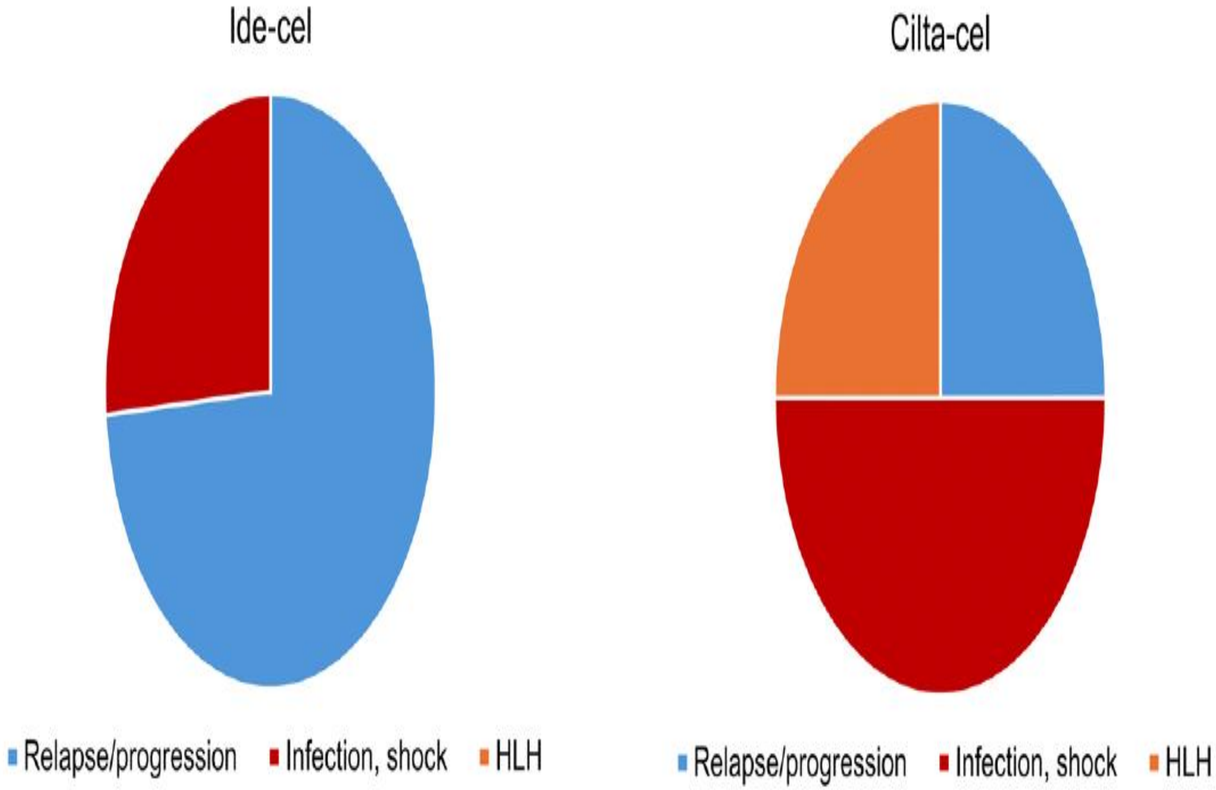

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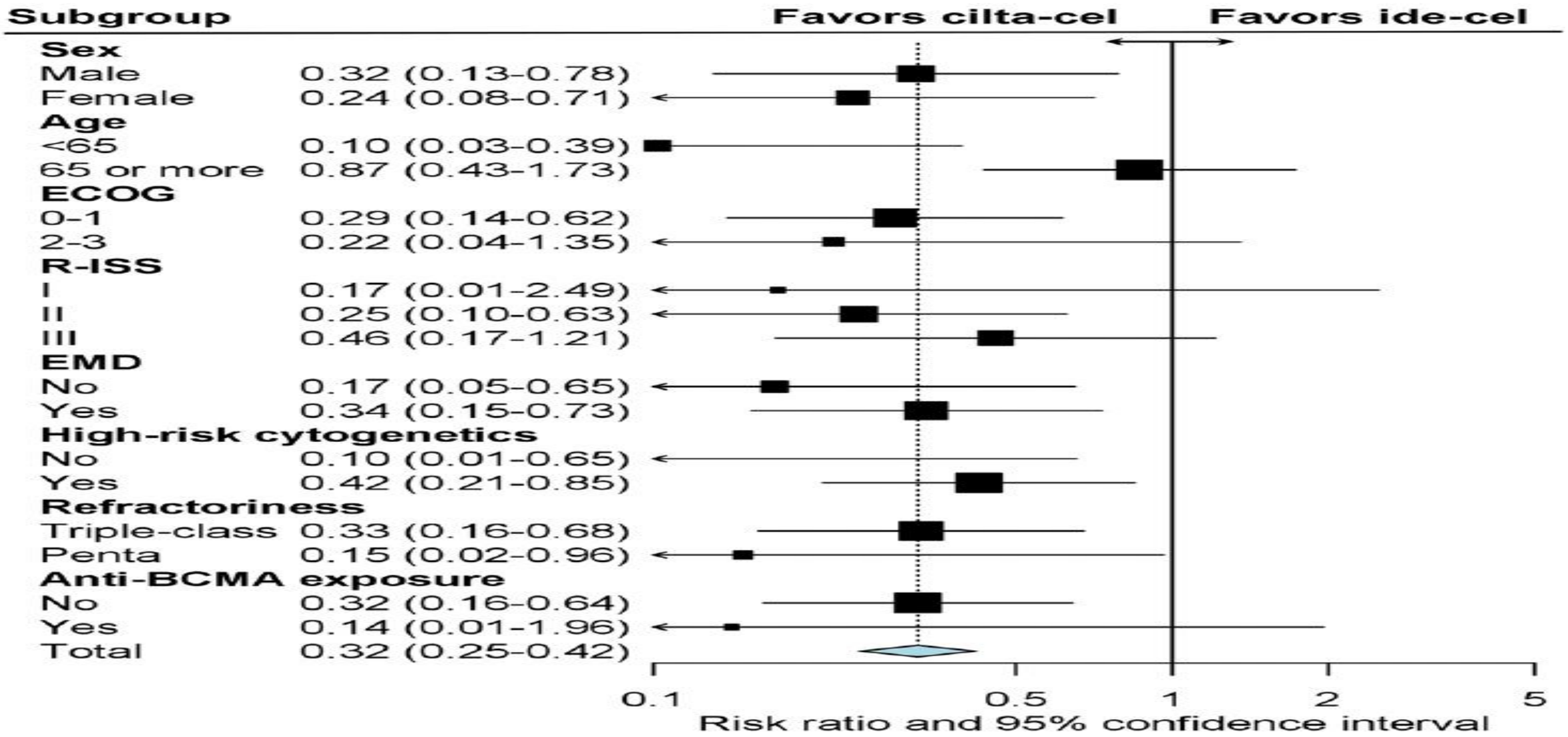
Ciltacel vs Idecel in RW



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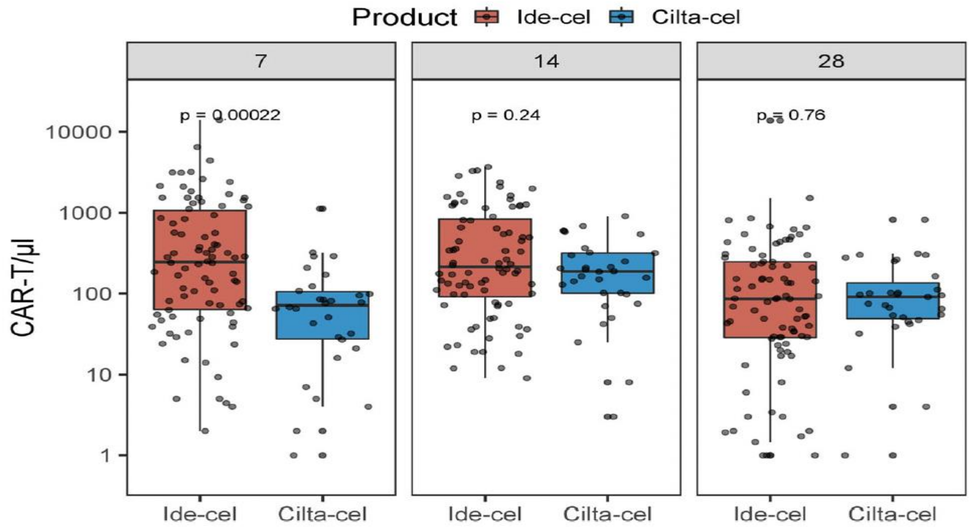

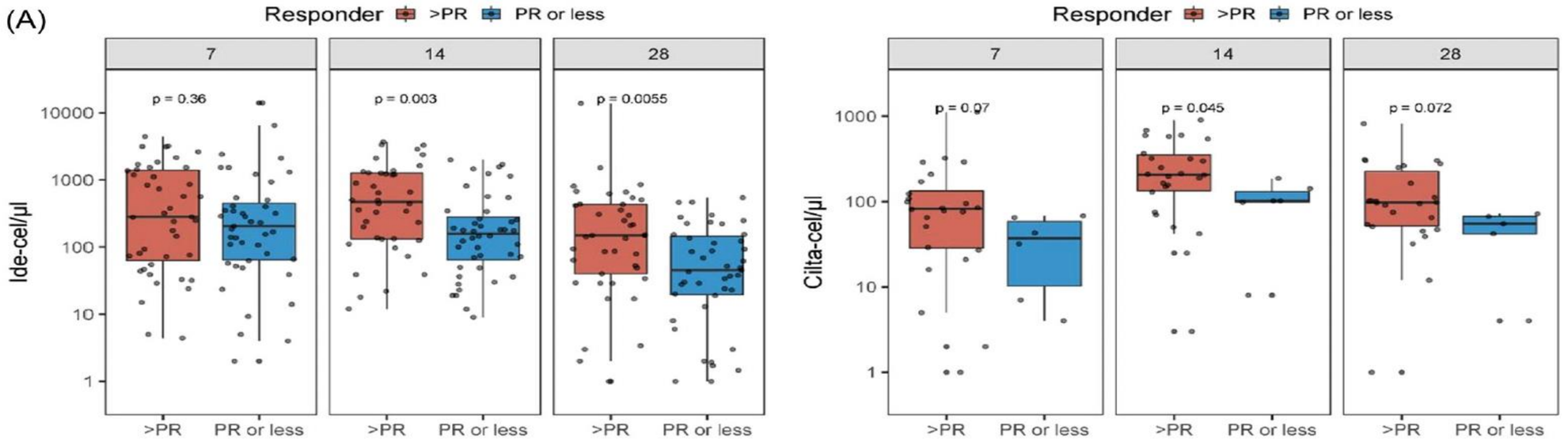

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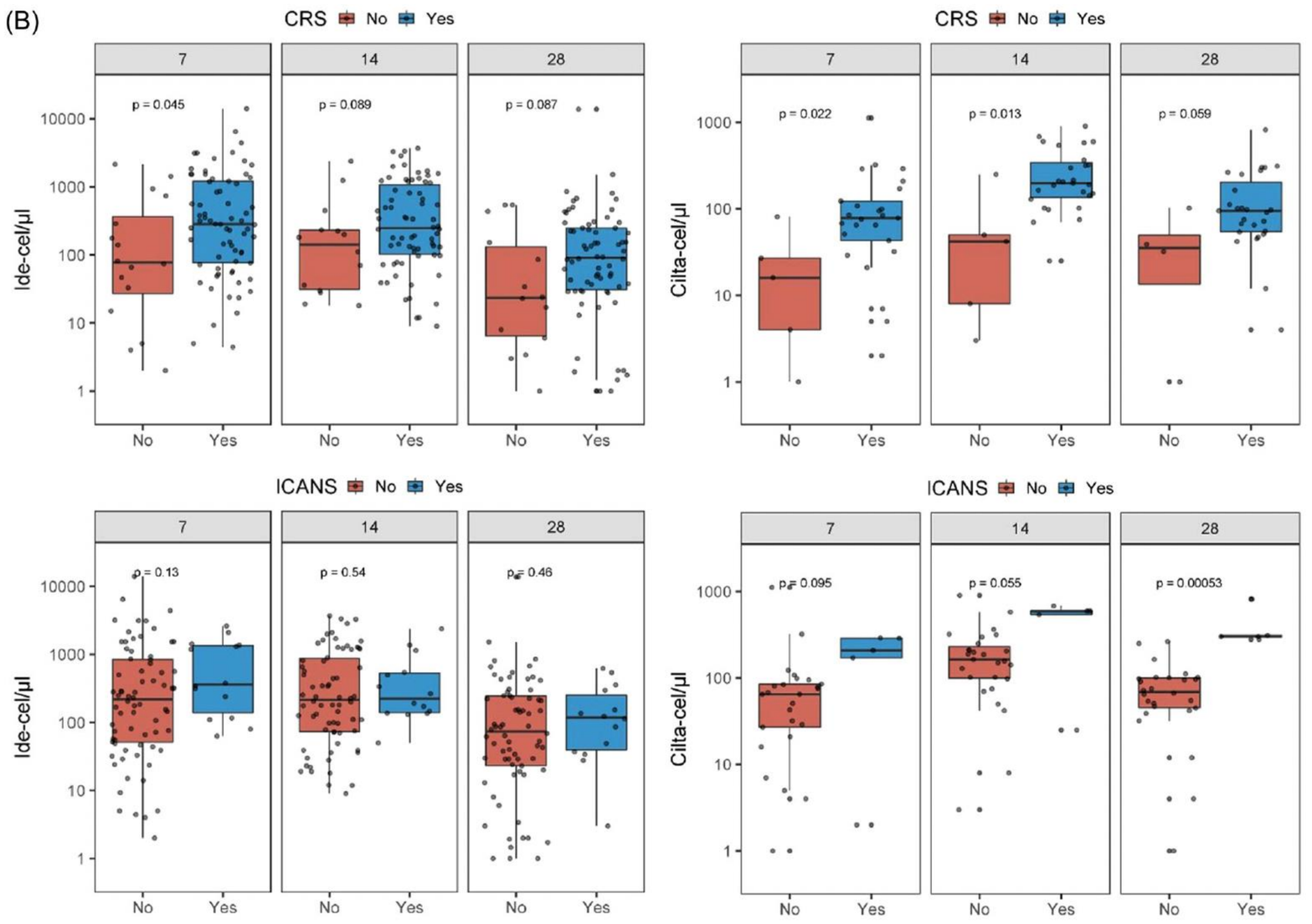
Ciltacel vs Idecel in RW



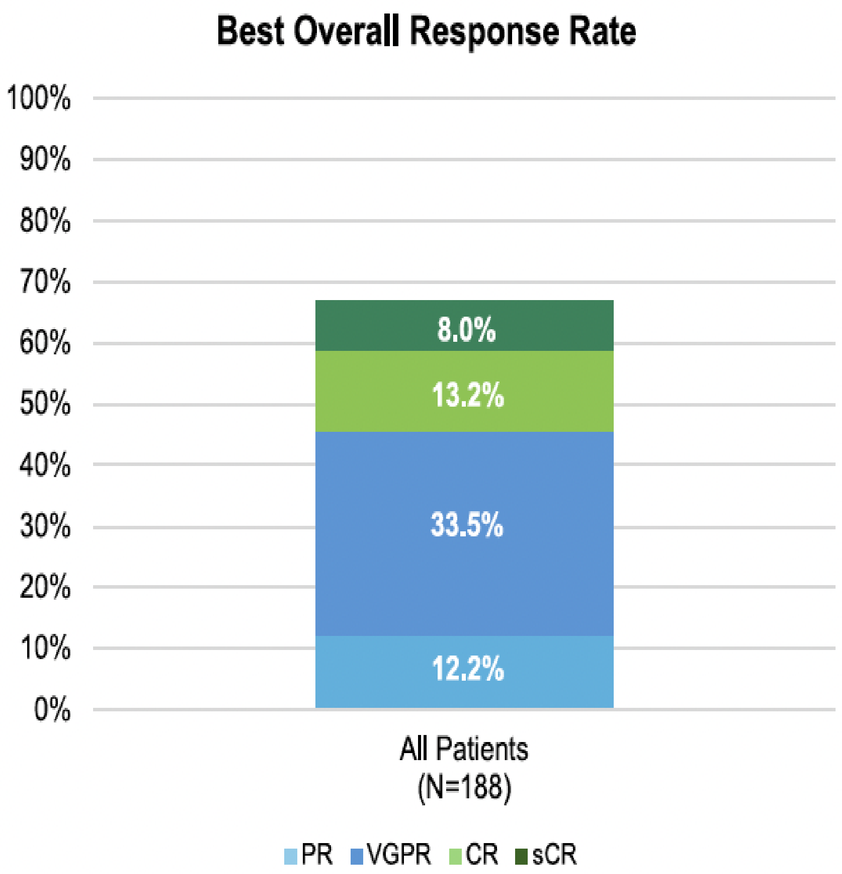
Merz et al., Hemasphere , 2025

Teclistamab in RW (US, UK, Gr, Sp, Ca)

Characteristics	TEC (*N* = 210)
Median age - yr (range)	67 (33–91)
≥75 yr, (%)	49 (23.3)
Gender, (%)	
Female	93 (44.3)
Male	117 (55.7)
Race, no. (%)	
White	156 (74.3)
Black	19 (9.0)
Asian	19 (9.0)
Other/unknown	16 (7.6)
Ethnicity - no. (%)	
NonLatinX	162 (77.1)
LatinX	23 (11.0)
Unknown	25 (11.9)
ECOG Performance Status—no./total no. (%)	
0	21/130 (16.2)
1	74/130 (56.9)
2	24/130 (18.5)
3	11/130 (8.5)
Stage (ISS) - no./total no. (%)	
I	47/124 (37.9)
II	39/124 (31.5)
III	38/124 (30.6)
Isotype MM – no./total no. (%)	
IgG	99/204 (48.5)
IgA	50/204 (24.5)
Light chain only	51/204 (25.0)
Other	4/204 (2.0)
Cytogenetic risk category – no./total no. (%)	
Standard-risk	82/164 (50.0)
High risk[a]	82/164 (50.0)
Missing	46
Presence of EMD[b] – no./total no. (%)	37/126 (29.4)
CrCl <30 ml/min – no./total no. (%)	26/209 (12.4)
Time from diagnosis to first TEC dose (range), yr	6.1 (0.6-29.2)
Median prior lines of therapy (range)	6 (1–20)
Refractory status—no./total no. (%)	
Triple-class refractory[c]	138/167 (82.6)
Penta-drug refractory[d]	71/161 (44.1)
Prior BCMA exposure – no./total no. (%)	92/210 (43.8)
CAR T alone	42/92 (45.7)
ADC alone	27/92 (29.3)
BsAb alone	6/92 (6.5)
ADC + BCMA CAR T	16/92 (17.4)
ADC + BCMA CAR T + bsAb	1/92 (1.1)
Prior GPRC5D exposure – no./total no. (%)	9/197 (4.6)
Received > 1 BCMA, GPRC5D, and/or other T-cell engaging therapies – no. (%)	27 (12.9)
MajesTEC-1 ineligible – no./total no. (%)	149/199 (71.0)

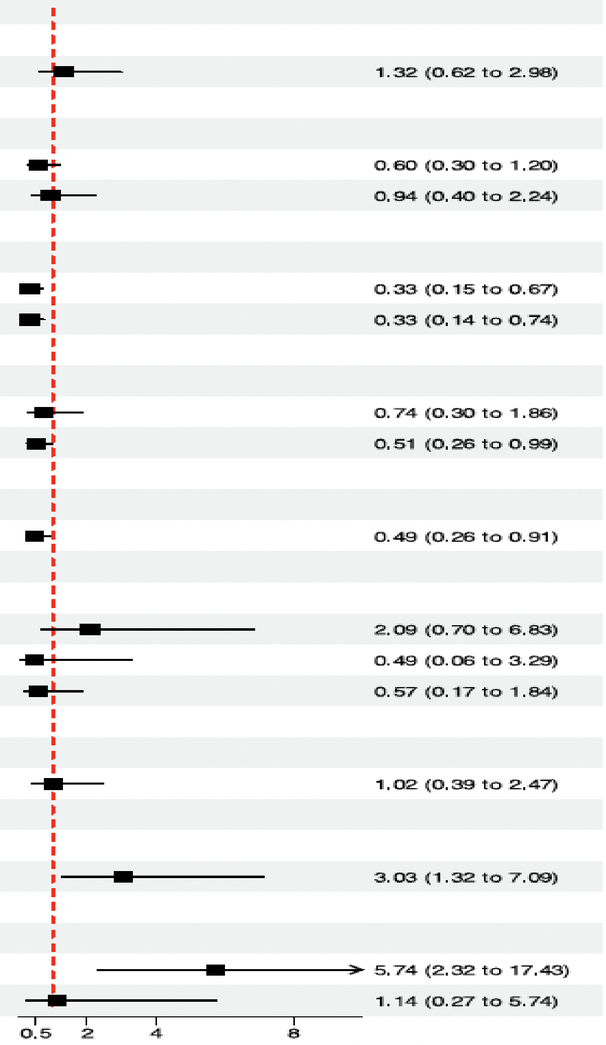
Tan et al., Blood Cancer J , 2025

Teclistamab in RW



B

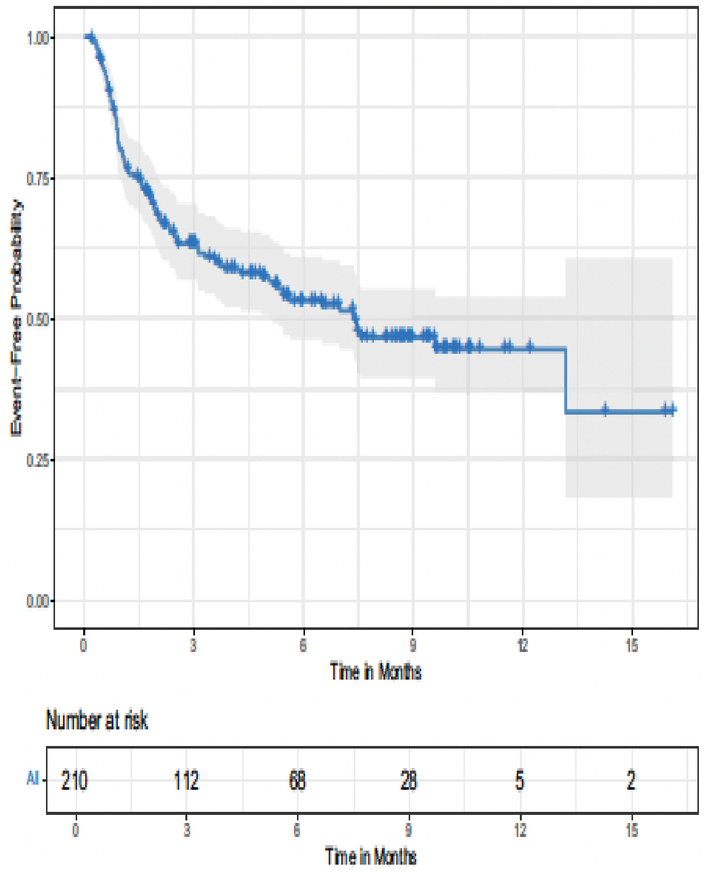
Subgroup	n	Response (%)	OR (95% CI)
Age			
<75	149	98 (65.8%)	
≥75	39	28 (71.8%)	1.32 (0.62 to 2.98)
Cytogenetic risk			
Standard risk	68	49 (72.1%)	
High risk	79	48 (60.8%)	0.60 (0.30 to 1.20)
Unknown risk	41	29 (70.7%)	0.94 (0.40 to 2.24)
Penta-refractory disease			
No	81	16 (19.8%)	
Yes	65	37 (56.9%)	0.33 (0.15 to 0.67)
Unknown	42	24 (57.1%)	0.33 (0.14 to 0.74)
Baseline EMD			
No	81	60 (74.1%)	
Yes	31	21 (67.7%)	0.74 (0.30 to 1.86)
Unknown	76	45 (59.2%)	0.51 (0.26 to 0.99)
Prior BCMA exposure			
BCMA-directed therapy naïve	104	77 (74.0%)	
Prior BCMA-directed therapy exposure	84	49 (58.3%)	0.49 (0.26 to 0.91)
Prior BCMA agent(s)			
CART alone	40	23 (57.5%)	
ADC alone	23	17 (73.9%)	2.09 (0.70 to 6.83)
BsAb alone	5	2 (40.0%)	0.49 (0.06 to 3.29)
≥2 BCMA-directed agents	16	7 (43.8%)	0.57 (0.17 to 1.84)
CrCl at start of tec (ml/min)			
≤30	24	16 (66.7%)	
>30	162	110 (67.1%)	1.02 (0.39 to 2.47)
Platelet count at start of tec (x10⁹/L)			
<50	27	12 (44.4%)	
≥50	161	114 (70.8%)	3.03 (1.32 to 7.09)
MajesTEC-1 eligibility			
Ineligible	133	79 (59.4%)	
Eligible	47	42 (89.4%)	5.74 (2.32 to 17.43)
Unknown	8	5 (62.5%)	1.14 (0.27 to 5.74)



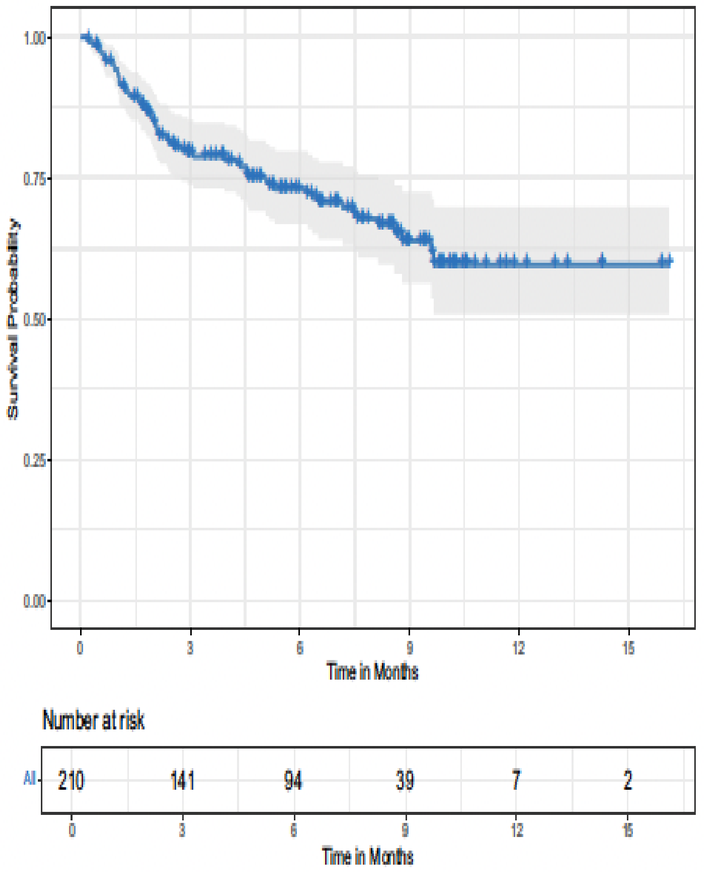
Stathoupulos et al., Clin Lymph and Myel , 2025

Teclistamab in RW

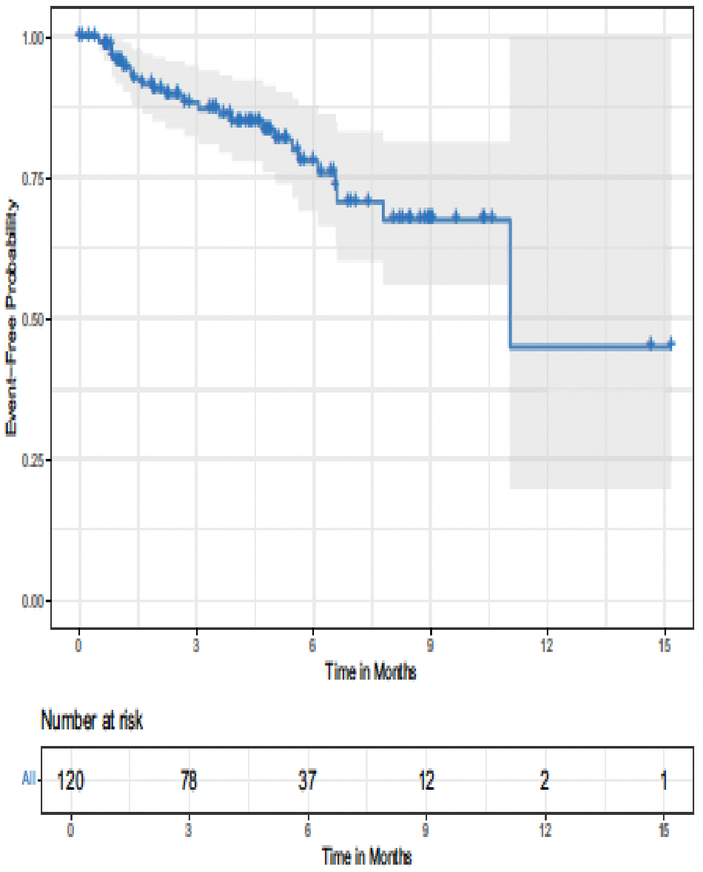
A PFS



B OS

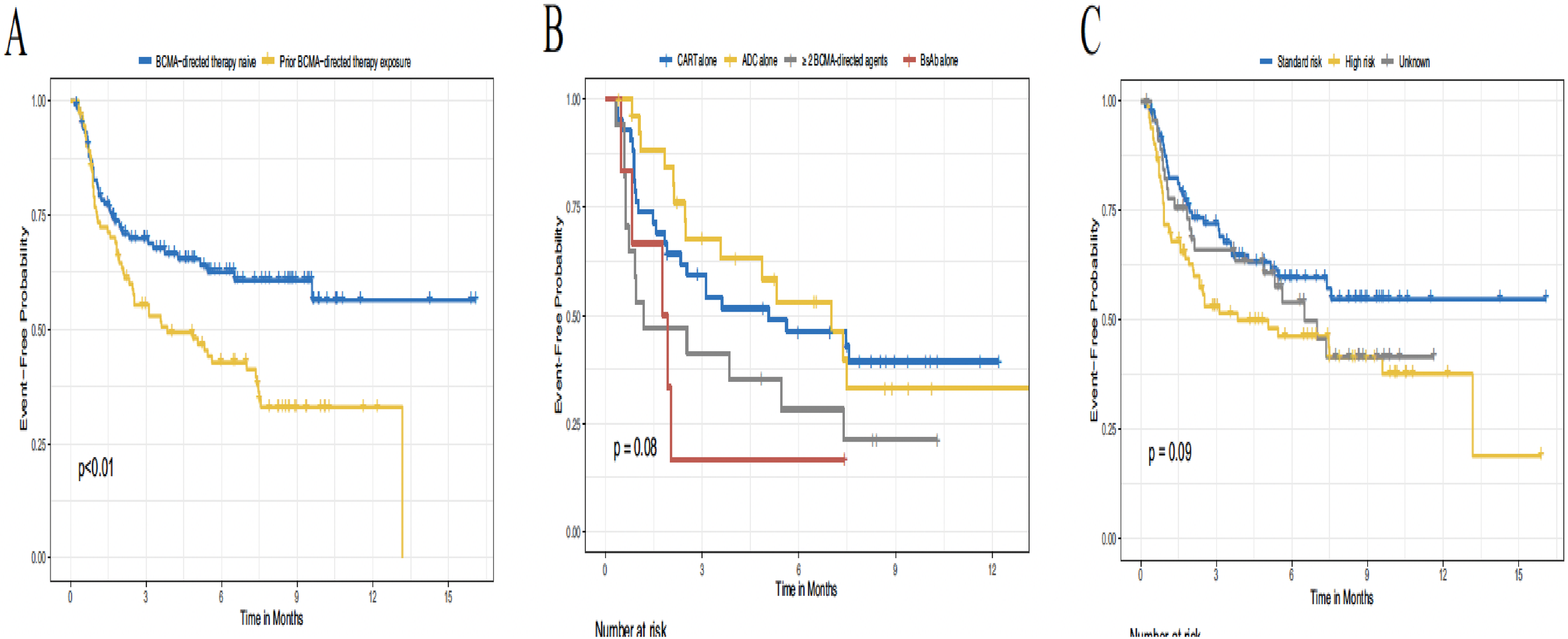


C DOR



Stathoupulos et al., Clin Lymph and Myel , 2025

Teclistamab in RW

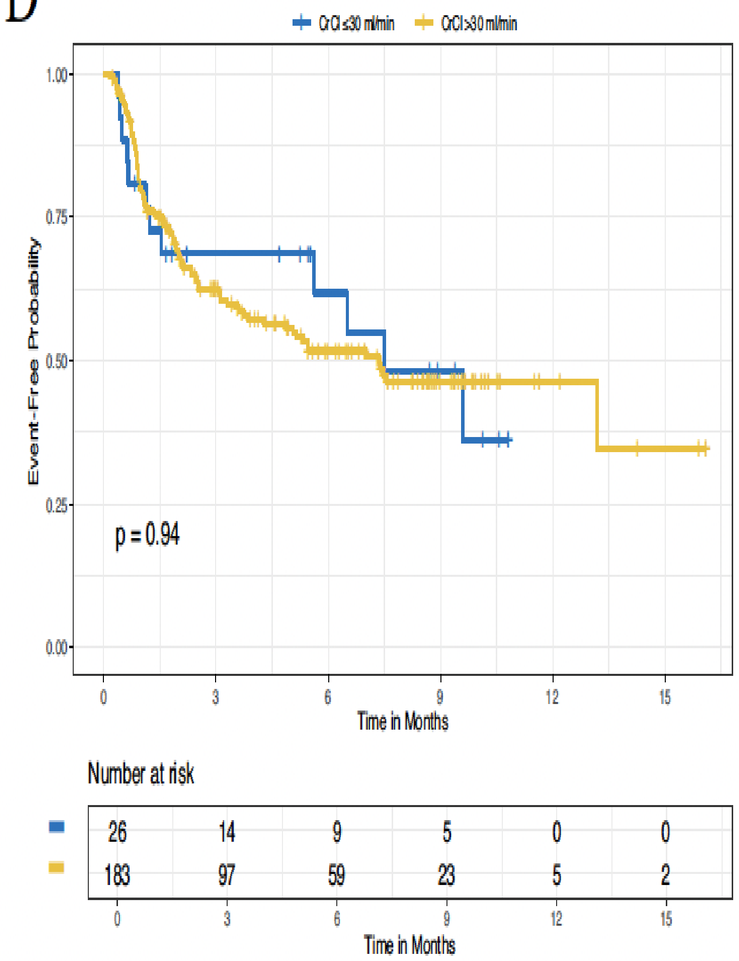


Stathoupulos et al., Clin Lymph and Myel , 2025

Teclistamab in RW

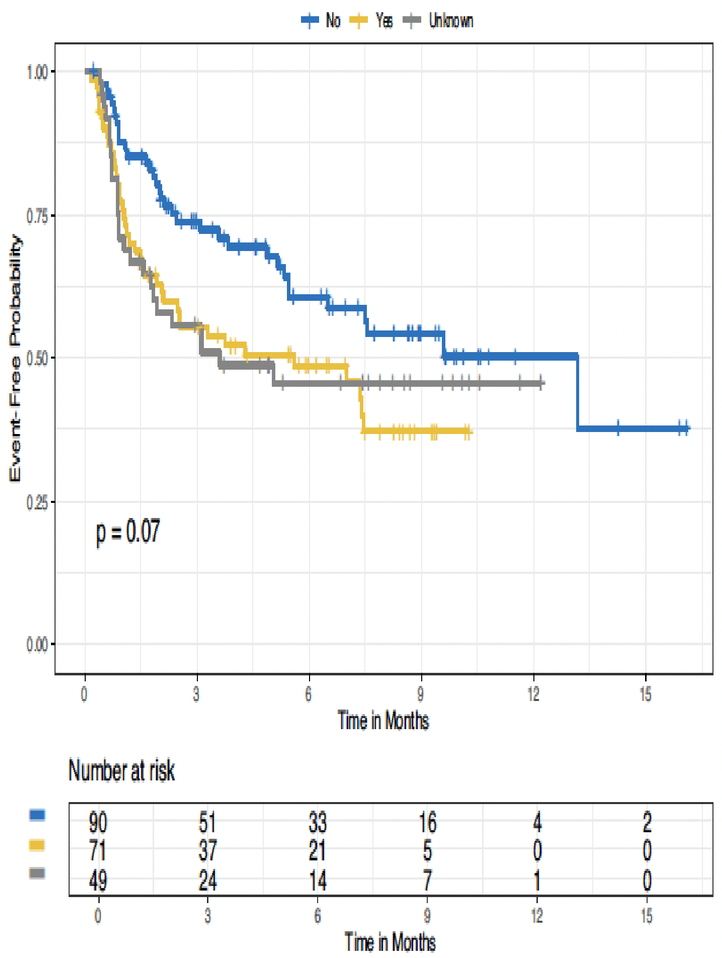
D

Creatinine Clearance



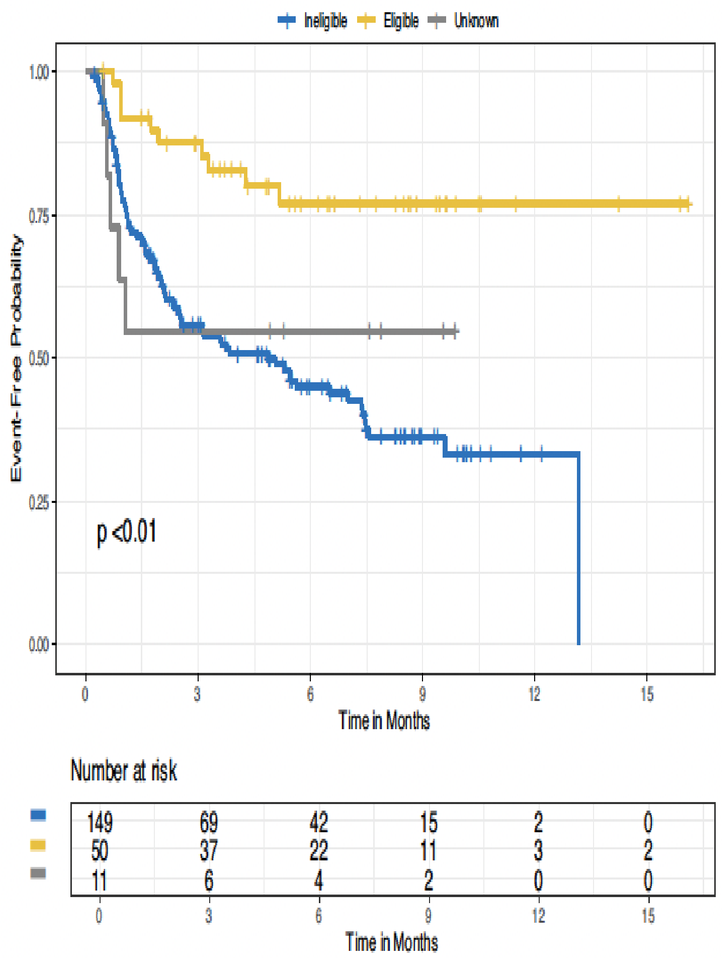
E

Penta drug Refractoriness



F

Trial Eligibility



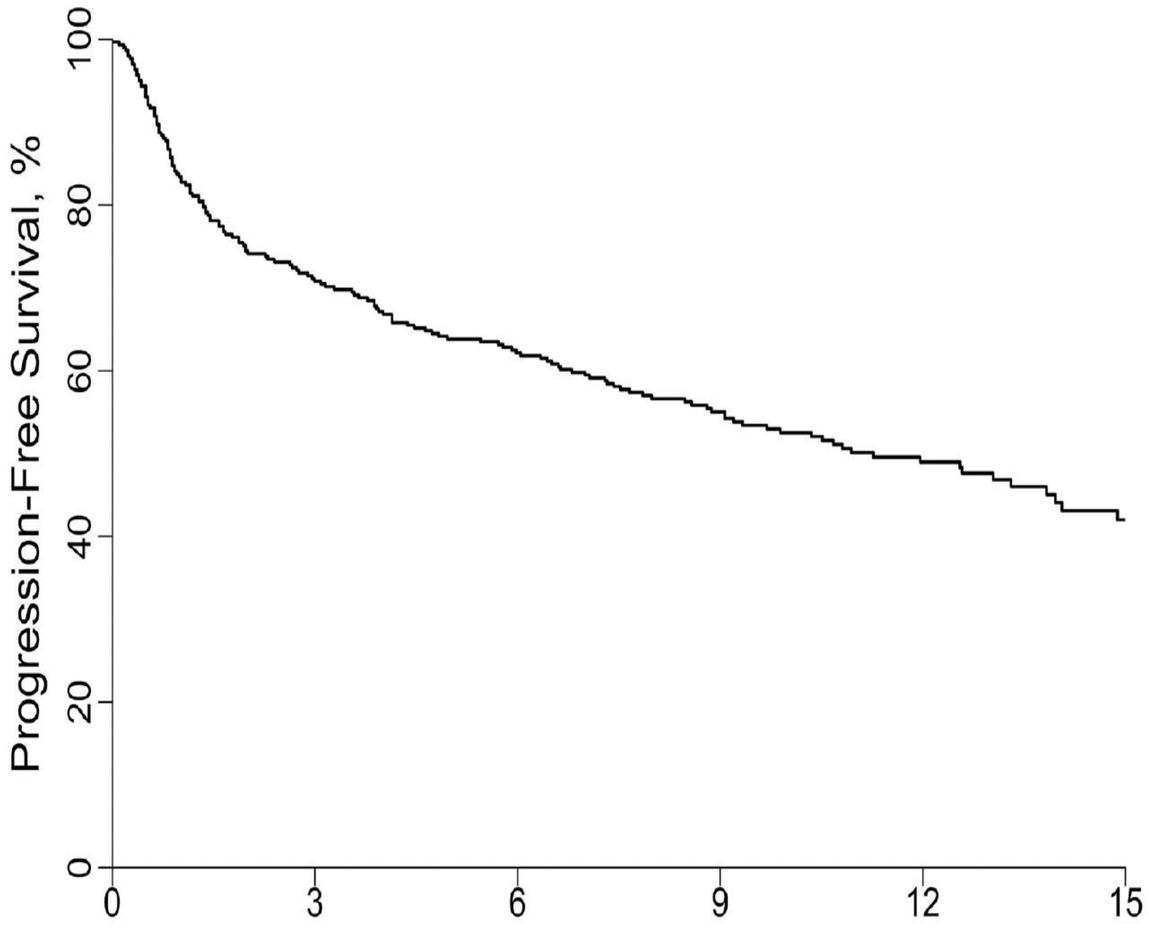
Stathoupulos et al., Clin Lymph and Myel , 2025

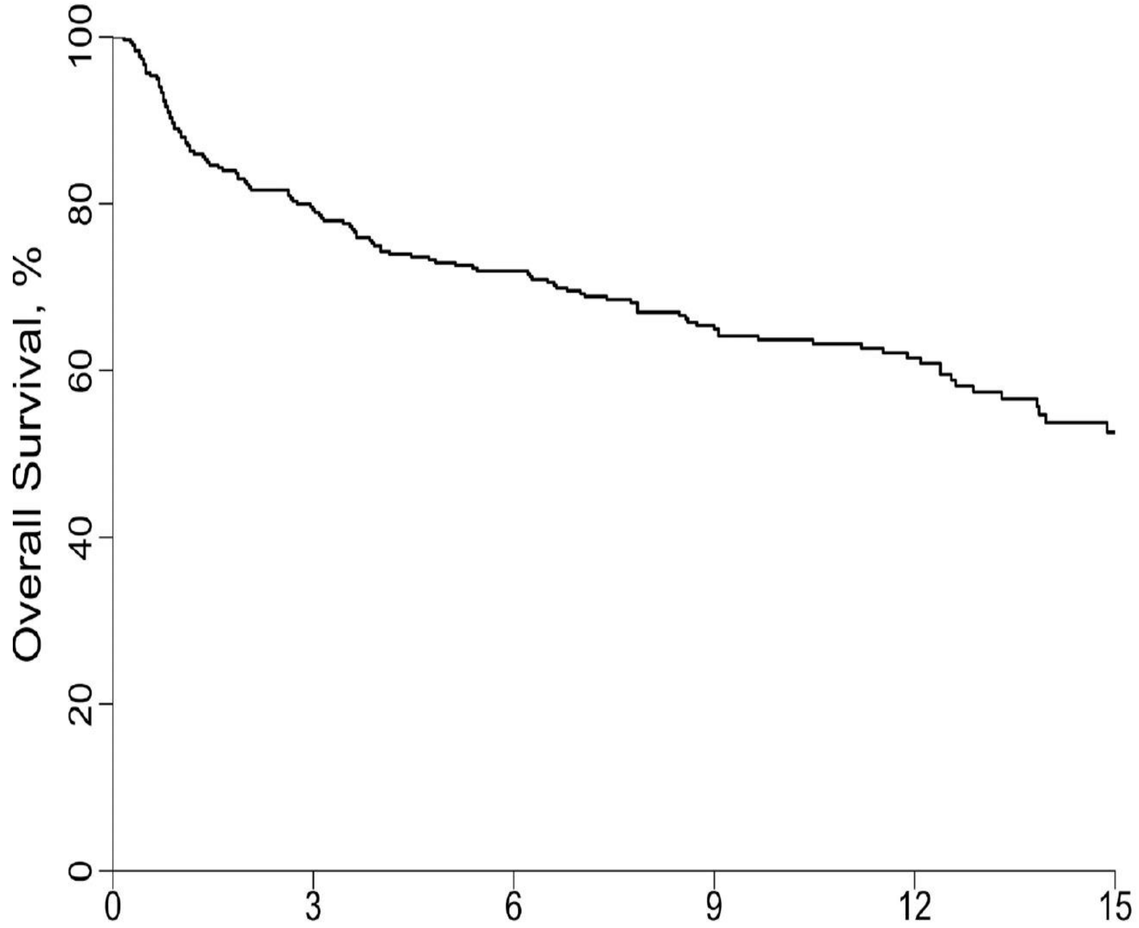
Teclistamab in RW (France EAP- 2022/2023)

Characteristics	IFM 2024-09 N=303	MajesTEC-1 N=165
Age in years, median (range) >75 years, N (%)	70 (37-88) 90 (29.7)	64 (33-84) 24 (14.4)
Sex, N (%) Male Female	 151 (49.9) 152 (50.1)	 96 (58.2) 69 (41.8)
Median prior lines of therapy (range)	4 (2-11)	5 (2-14)
Previous autologous transplant, N (%)	171 (56.4)	135 (81.8)
ImiD, N (%) exposed refractory	 302 (99.7) 208 (68.6)	 165 (100) 152 (92.1)
PI, N (%) exposed refractory	 303 (100) 194 (64)	 165 (100) 142 (86.1)
Anti-CD38 monoclonal antibody, N (%) exposed refractory	 295 (97.4) 165 (54.5)	 165 (100) 148 (89.7)
BCMA exposed, N (%)	41 (13.6)	0
ECOG PS >2 at the initiation of teclistamab, N (%)	26 (8.5)	0
Severe renal failure at the initiation of teclistamab, N (%)	30 (9.9)	0
Ineligibility to MajesTEC-1, N (%)	140 (46.2)	0
High-risk cytogenetics, N (%) del(17p) del(17p) and/or *TP53* mutation t(4;14) t(14;16)	 34/179 (19) 54/179 (30.2) 27/188 (14.3) 4/97 (4)	 23/148 (15.5) NA 16/148 (10.8) 4/148 (2.7)
Circulating plasma cells, N (%)	39 (13.8)	NA
EMD, N (%)	34 (11.8)	28 (17)
PMD, N (%)	70 (25.5)	NA
Median follow-up in months (IQR)	11.9 (9.2-14.8)	22 then 30.4

Perrot et al., Haematologica , 2025

Teclistamab in RW





Perrot et al., Haematologica , 2025

FIRST RESULTS OF REALITEC-2: SECOND COHORT OF REALITEC, AN INTERNATIONAL OBSERVATIONAL RETROSPECTIVE STUDY OF TECLISTAMAB IN PATIENTS WITH RELAPSED/REFRACTORY MULTIPLE MYELOMA IN ROUTINE CLINICAL PRACTICE

R. Popat[1], K. Uttervall[2], K. M. Kortüm[3], H. Magen[4], M. Hansson[5], T. Shragai[6], E. Terpos[7], C. T. Hansen[8], S. Manier[9|10], H. Gregersen[11], Ø.M. Ottestad[12], C. Touzeau[13], E. Hatjiharissi[14|15], S. L. Farmer[16], E. Katodritou[17], E. Spanoudakis[18], M. Ø. Vase[19], C. Liberatore[20|21], M. Papathanasiou[22], M. K. Angelopoulou[7|23], E. Clavero[24], R. Kittus[25], P. Smirnov[26], P. Hu[27], D. Santra[28], C. Albrecht[29], E. Rubio-Azpeitia[30], A. Perrot[31] on behalf of all the Realitec-2 Investigators

Popat et al., IMS , 2026

Realitec-2

260 pts; Median age 68y (range 40-100)	**27% >75 y**
HR Cytogenetics	36%
EMD	11%
Median prior LOT: 4 (2-14);	31%: 3 or <
24% triple; 7.3 % penta refractory	16% previous BCMA
ORR: 66.5%	>/= VGPR: 54.6%
Median time to first response: 1.8 months	Median time to best response: 3.6 months
Median DOR: NR	Median PFS: 15 months; Median OS: NR

Infections: any grade 62%; 3-4: 26.5%	**CRS: any grade 55%; 3-4: 1-2%**
Anemia: any grade 30%: 3-4: 18.1	Neutropenia: 27%; 3-4: 18%
Thrombocytopenia: any grade 16%; 3-4: 15%	Treatment discontinuation due to AE: 10%

Popat et al., IMS , 2026

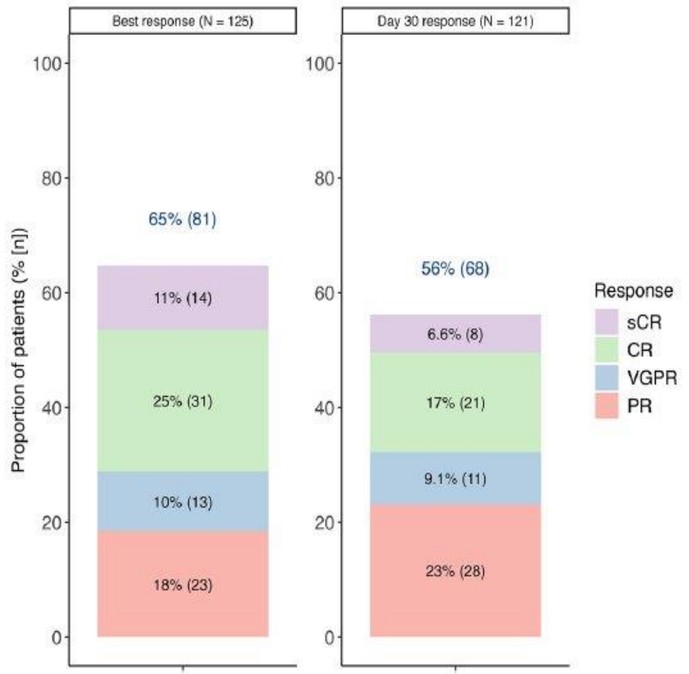
Elranatamab in RW (US MM Immunotherapy Consortium)

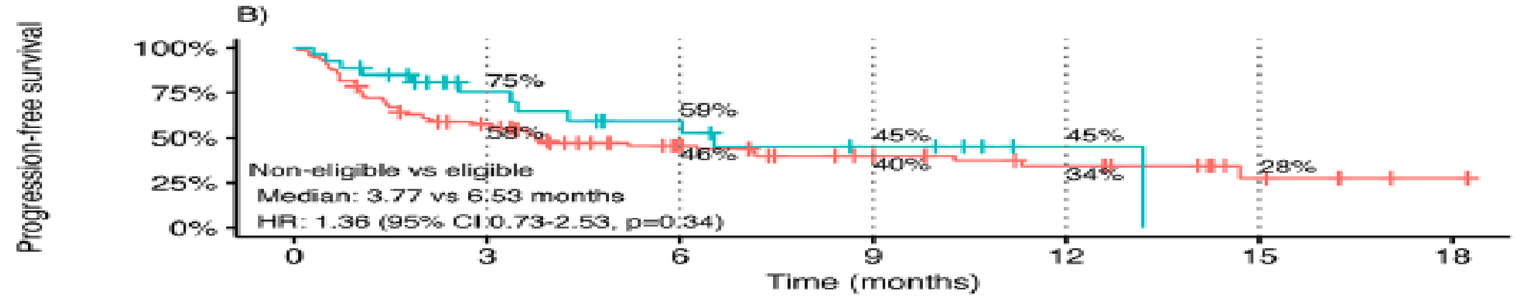
True EMD	28 (22%)
≥50% BMPCs	15 (18%)
Oligo or non-secretory	12 (9.4%)
≥1 HRCA	85 (69%)
High-risk cytogenetic abnormality at any time	
del(17p)	31 (25%)
t(4;14)	17 (13%)
t(14;16)	8 (6.3%)
gain/amp(1q)	70 (56%)
amp(1q)	9 (7.9%)
Prior LOTs	6.00 (4.00, 8.00)
Prior ASCT	66 (51%)
Prior CAR-T	54 (42%)

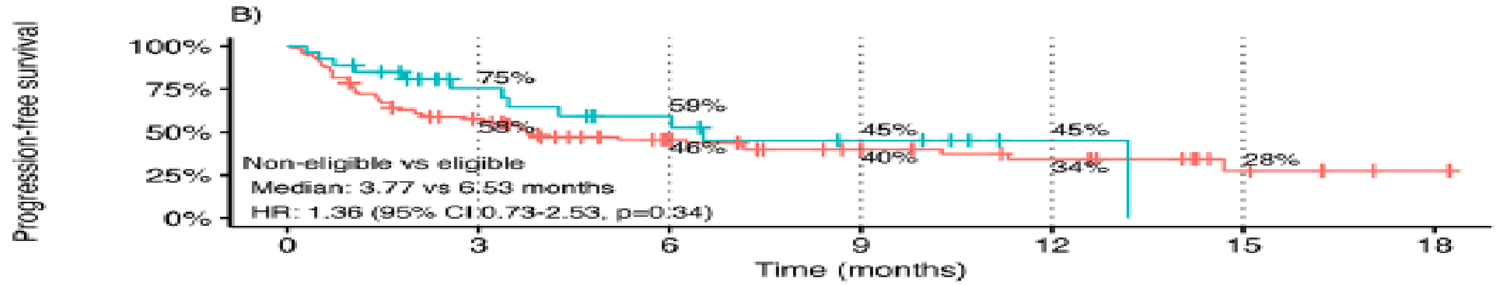
Refractory status	
Bortezomib refractory	87 (67%)
Lenalidomide refractory	110 (85%)
Pomalidomide refractory	96 (74%)
Anti-CD38 refractory	116 (89%)
Triple refractory	118 (91%)
Penta refractory	64 (49%)
Prior BCMA-directed therapy	64 (49%)
Most recent BCMA	
CAR-T	54 (84%)
TCE	6 (9.4%)
ADC	4 (6.3%)
Trial eligible	28 (22%)
Received full dose	121 (93%)

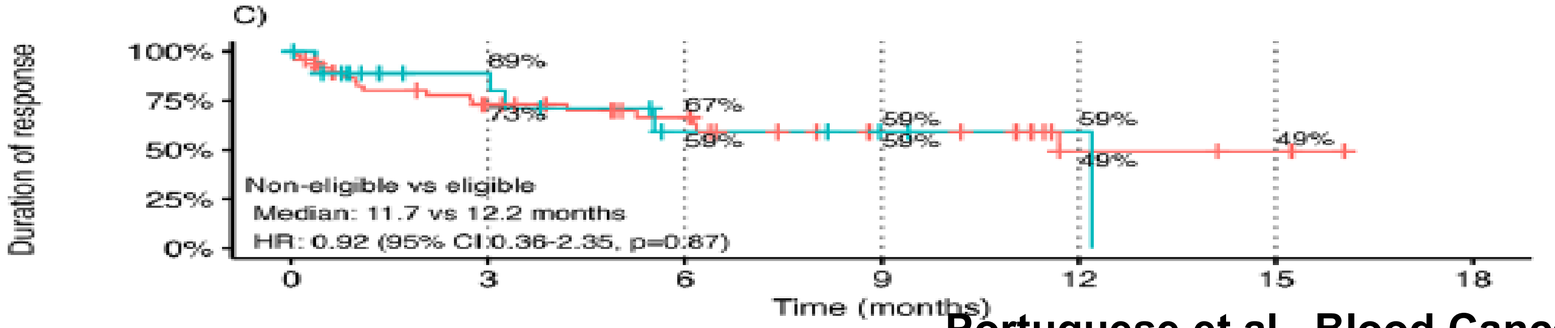
Portuguese et al., Blood Cancer J , 2026

Elranatamab in RW









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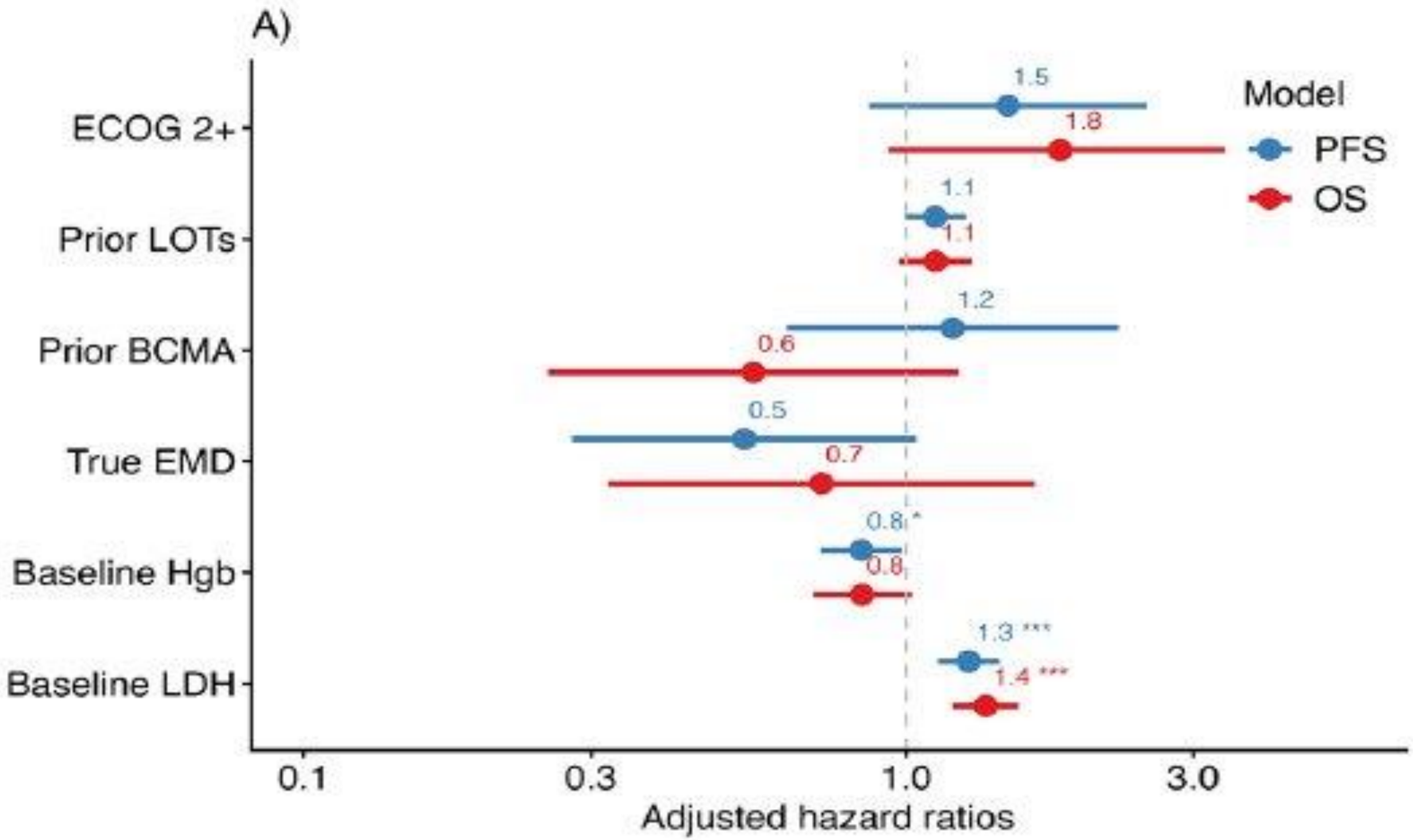
Elranatamab in RW



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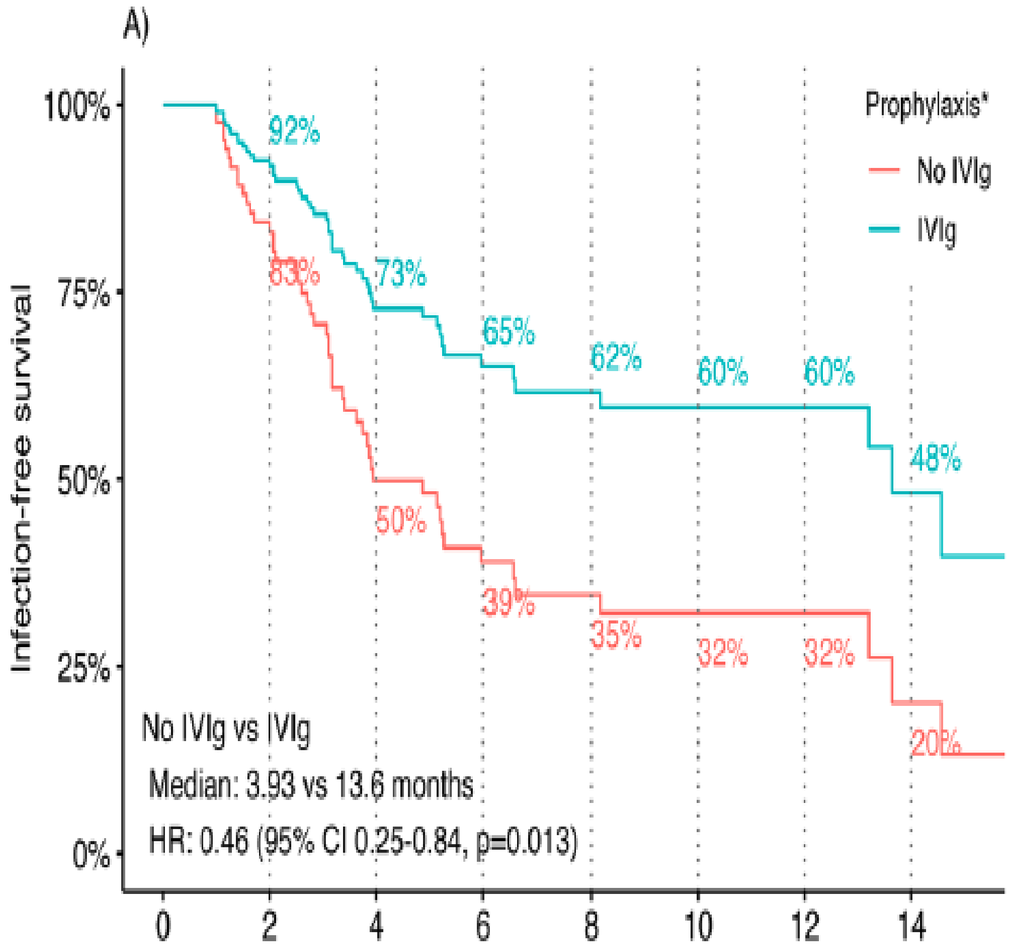
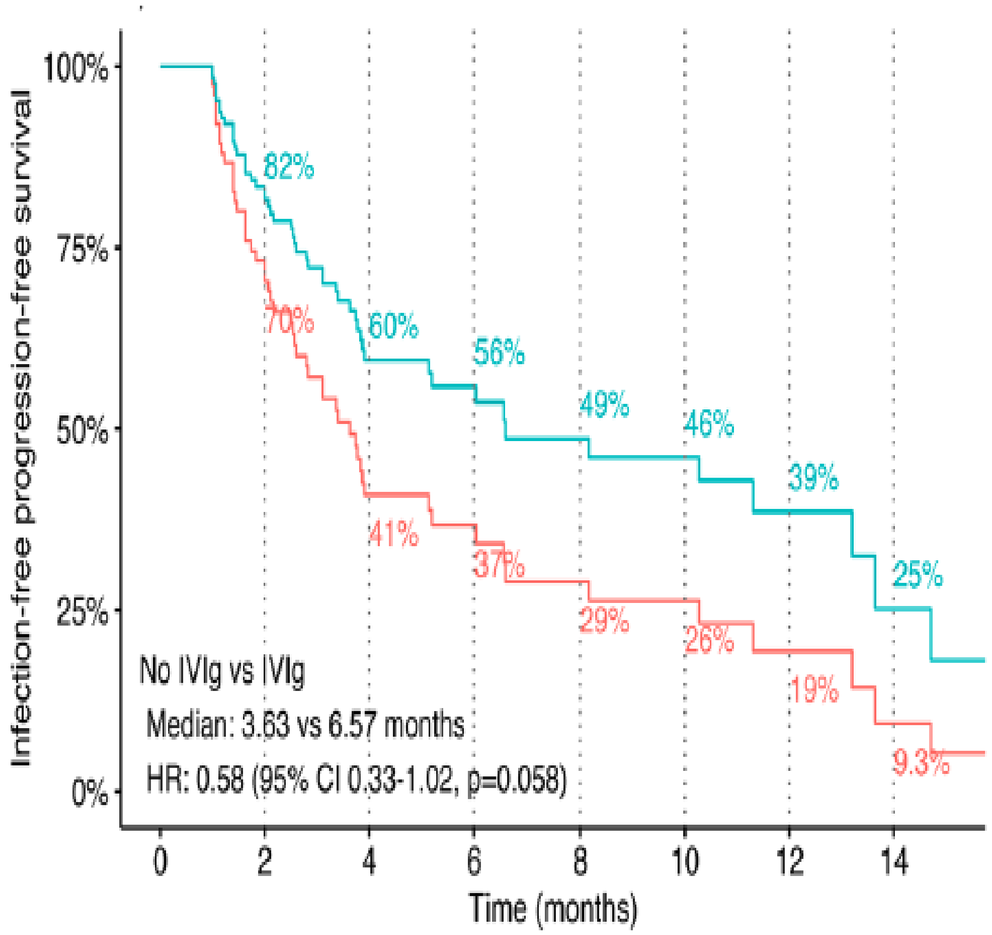
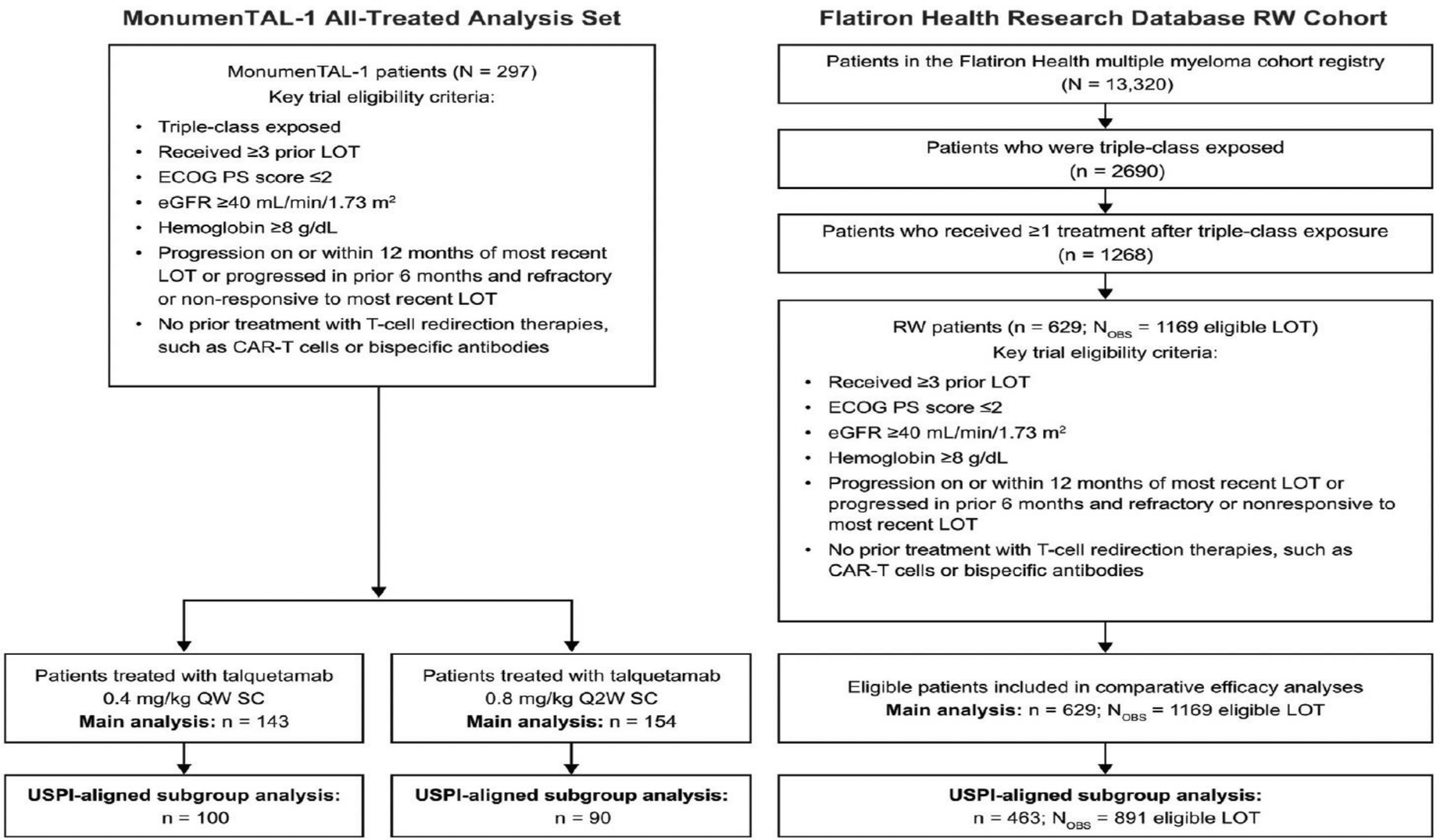
Elranatamab in RW





Portuguese et al., Blood Cancer J , 2026

Talquetamab in RW (US Flatiron Health database)



Ye et al., Clin Lymph Myeloma , 2026

Talquetamab in RW

Treatment Regimen, n (%)	N = 1169
Daratumumab (± hyaluronidase-fihj), pomalidomide, dexamethasone	62 (5.3)
Elotuzumab, pomalidomide, dexamethasone	56 (4.8)
Clinical study drug[a]	43 (3.7)
Carfilzomib, dexamethasone	42 (3.6)
Carfilzomib, cyclophosphamide, dexamethasone	36 (3.1)
Carfilzomib, pomalidomide, dexamethasone	32 (2.7)
Daratumumab (± hyaluronidase-fihj), carfilzomib, dexamethasone	27 (2.3)
Belantamab mafodotin-blmf	23 (2.0)
Bortezomib, selinexor, dexamethasone	23 (2.0)
Elotuzumab, lenalidomide, dexamethasone	22 (1.9)
Daratumumab, dexamethasone	21 (1.8)
Selinexor, dexamethasone	21 (1.8)
Daratumumab, lenalidomide, dexamethasone	19 (1.6)
Pomalidomide, dexamethasone	19 (1.6)
Clinical study drug[a], dexamethasone	18 (1.5)
Daratumumab, bortezomib, dexamethasone	18 (1.5)
Dexamethasone	15 (1.3)
Isatuximab-irfc, pomalidomide, dexamethasone	14 (1.2)
Pomalidomide	13 (1.1)
Bortezomib, cyclophosphamide, dexamethasone	12 (1.0)
Daratumumab, bortezomib, pomalidomide, dexamethasone	12 (1.0)
Isatuximab-irfc, carfilzomib, dexamethasone	12 (1.0)
Ixazomib, cyclophosphamide, dexamethasone	12 (1.0)

Ye et al., Clin Lymph Myeloma , 2026

Talquetamab in RW

Variable, %	Observed (Unweighted)			Primary Analysis (Weighted)		Fully Adjusted Analysis (Weighted)	
	MonumenTAL-1, n = 143	RW Cohort n = 1169	SMD	RW Cohort, Weighted Patient Counts[a] n = 514	SMD	RW Cohort, Weighted Patient Counts[a] n = 388	SMD
Refractory status[b]							
Triple[c]	44.8	39.2	0.11	45.3	−0.01	45.3	−0.01
Penta[d]	31.5	29.9	0.04	31.4	0.00	31.1	0.01
Others	23.8	31.0	−0.16	23.3	0.01	23.6	0.00
Time to progression on last LOT							
> 4 months	62.2	52.8	0.19	60.7	0.03	61.3	0.02
Cytogenetic profile							
High-risk[e]	28.7	21.6	0.16	25.9	0.06	24.8	0.09
Standard-risk	63.6	55.5	0.17	66.1	−0.05	67.2	−0.07
Unknown	7.7	22.9	−0.43	7.9	−0.01	8.0	−0.01
ISS stage							
I	43.4	38.5	0.10	43.0	0.01	43.4	−0.00
II	37.1	32.2	0.10	37.7	−0.01	37.0	0.00
III	19.6	29.3	−0.23	19.3	0.01	19.6	−0.00
Number of prior LOT							
> 4	55.2	55.0	0.0	56.3	−0.02	56.1	−0.02
Years since diagnosis							
≥ 6	55.2	24.4	0.66	54.2	0.02	53.6	0.04
Age (years)							
< 65	45.5	37.2	0.17	46.5	−0.02	46.8	−0.03
65–74	39.9	33.5	0.13	38.3	0.03	37.9	0.04
≥ 75	14.7	29.3	−0.36	15.2	−0.01	15.3	−0.02
Hemoglobin (g/dL)							
≥ 12	23.1	29.2	−0.14	23.6	−0.01	24.0	−0.02
Prior stem cell transplant							
Yes	79.0	57.4	0.48	N/A	N/A	79.2	−0.00

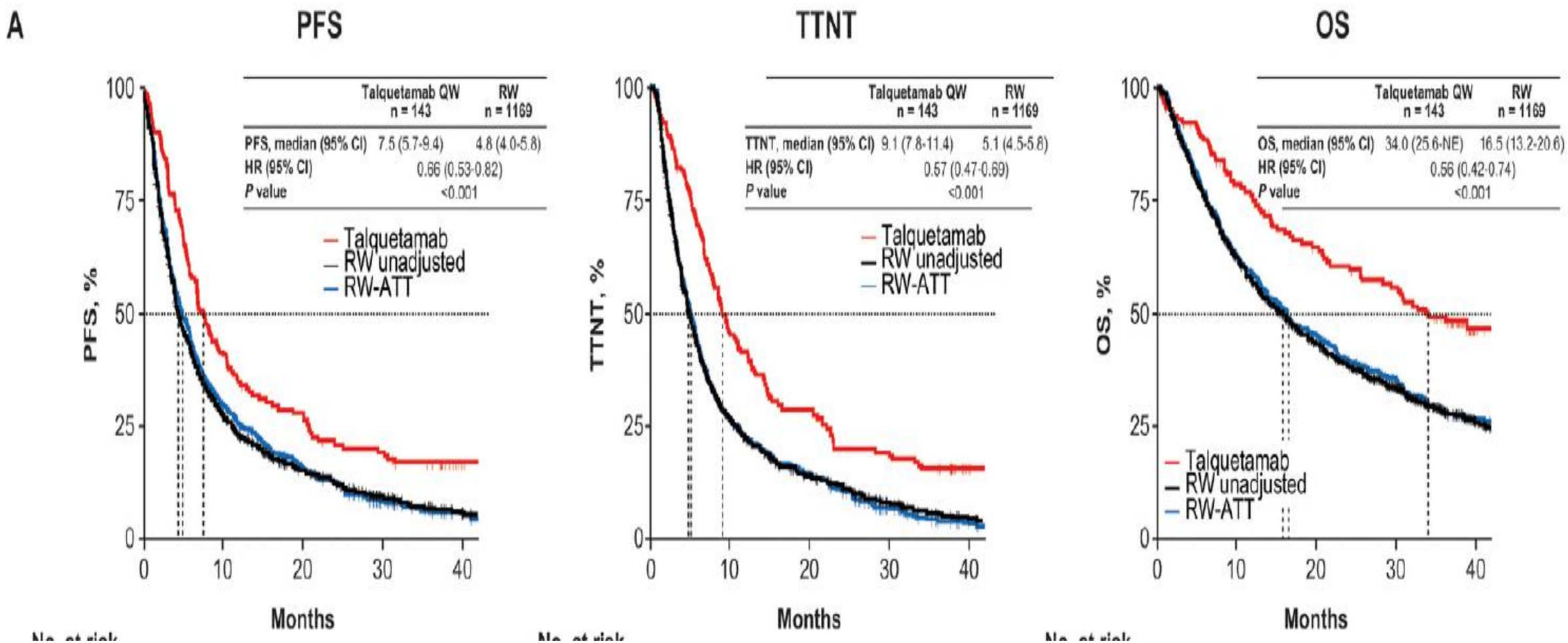
Ye et al., Clin Lymph Myeloma , 2026

Talquetamab in RW

ECOG PS							
0	30.8	27.5	0.07			31.8	−0.02
1	60.1	56.8	0.07			59.1	0.02
2	9.1	15.7	−0.20	N/A	N/A	9.0	0.00
Race							
White	89.5	72.2	0.45			89.5	0.00
Black/African American	8.4	11.1	−0.09			8.4	−0.00
Not reported/other	2.1	16.7	−0.52	N/A	N/A	2.1	0.00
Sex							
Male	54.5	51.2	0.07	N/A	N/A	55.4	−0.02
Type of multiple myeloma							
IgG	53.1	58.4	−0.11			55.4	−0.05
Light chain	29.4	16.7	0.30			27.3	0.05
Other	17.5	24.9	−0.18	N/A	N/A	17.3	0.00

Ye et al., Clin Lymph Myeloma , 2026

Talquetamab in RW: outcomes



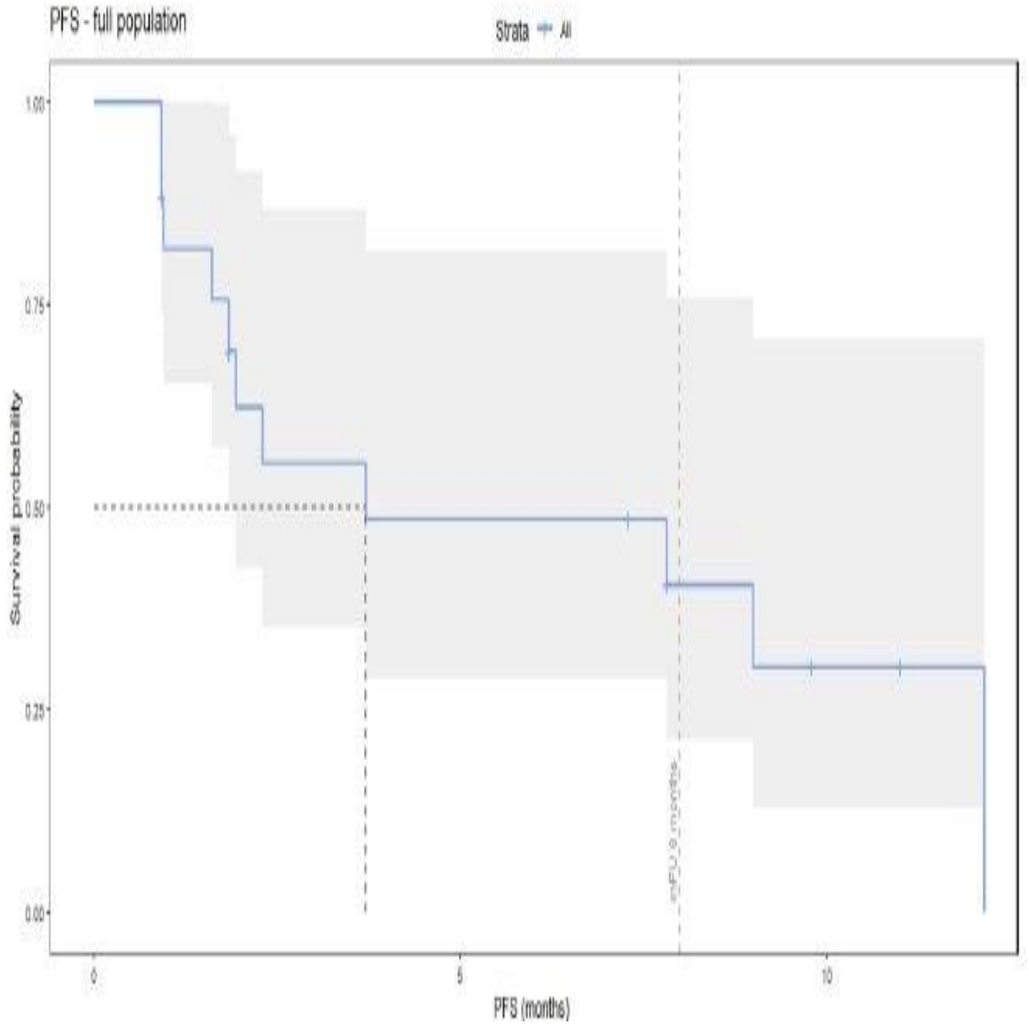
Ye et al., Clin Lymph Myeloma , 2026

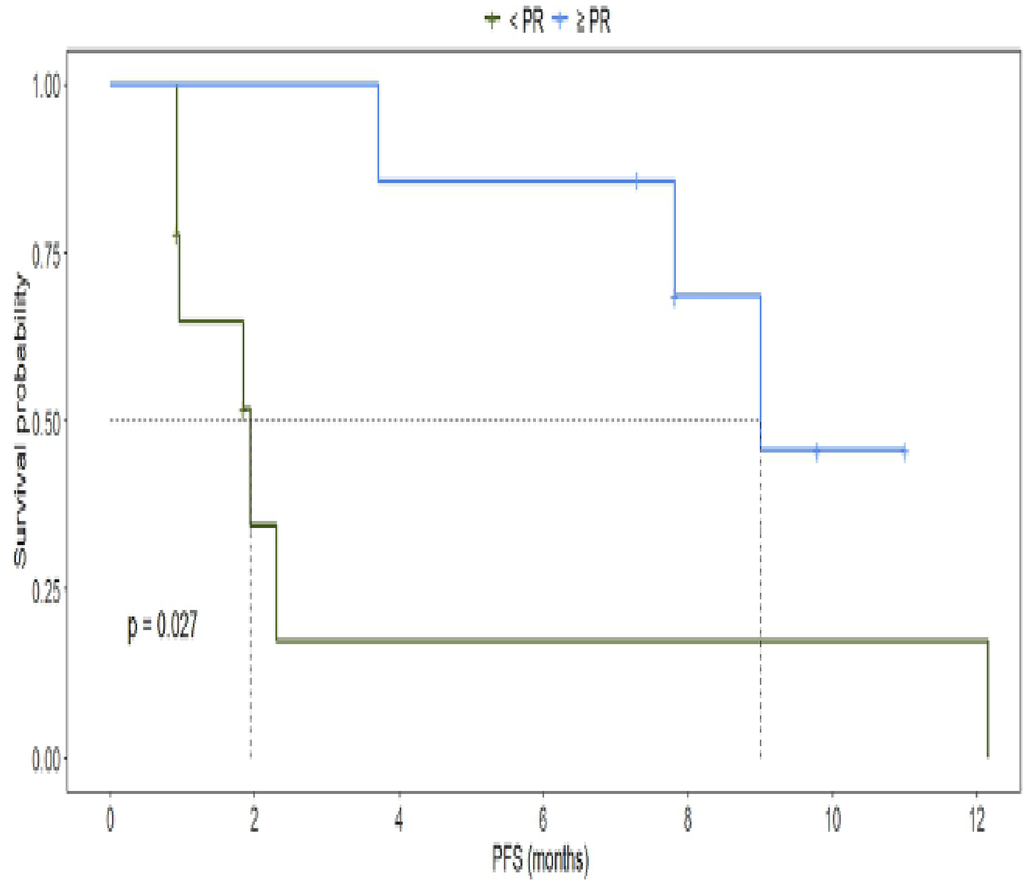
Melfuflen in RW

Characteristic	N = 17
Female, *n* (%)	8 (47)
Median age, years (range)	71 (59–84)
65–74 years, *n* (%)	6 (35)
≥ 75 years, *n* (%)	7 (41)
ECOG 0, *n* (%)	14 (82)
ECOG 1, *n* (%)	3 (18)
Cytogenetics abnormalities, *n* (%)	
High-risk[a]	7 (41)
Standard risk	3 (18)
NA	7 (41)
EMD, *n* (%)	1 (6)
Median time from diagnosis to treatment, years (range)	6 (1–23)
Median n. of prior treatments (range)	4 (2–11)[b]
Prior ASCT, *n* (%)	5 (29)
Double-class refractory, *n* (%)	17 (100)
Triple-class exposed, *n* (%)	17 (100)
Triple-class refractory, *n* (%)	15 (88)
Penta-class refractory, *n* (%)	7 (41)
Refractoriness to specific drugs, *n* (%)	
Lenalidomide	14 (82)
Pomalidomide	15 (88)
Bortezomib	10 (59)
Carfilzomib	12 (71)
Anti-CD38	17 (100)
Exposure to anti-BCMA therapies, *n* (%)	5 (29)
Refractoriness to anti-BCMA therapies	5 (29)
Belantamab mafodotin	3 (18)
Belantamab mafodotin and teclistamab	1 (6)
Ide-cel and teclistamab	1 (6)
Exposure to anti-GPRC5D BsAb, *n* (%)	1 (6)
Refractoriness to anti-GPRC5D, *n* (%)	1 (6)
Median creatinine clearance, mL/min (range)	69 (11–97)
≥ 45 mL/min < 60 mL/min, *n* (%)	3 (18)
mL/min	3 (18)

Mancuso et al., Eur J Hematol , 2026

Melfuflen in RW





Mancuso et al., Eur J Hematol , 2026

Melfuflen in RW

	All grades	Grade 1	Grade 2	Grade 3	Grade 4	Grade 5
Hematologic toxicities						
Anemia, *n* (%)	9 (53)	1 (6)	2 (12)	6 (35)	—	—
Neutropenia, *n* (%)	10 (59)	1 (6)	—	5 (29)	4 (24)	—
Thrombocytopenia, *n* (%)	11 (65)	1 (6)	1 (6)	3 (18)	6 (35)	—
Nonhematologic toxicities						
Fatigue, *n* (%)	12 (71)	7 (41)	4 (24)	1 (6)	—	—
Nausea, *n* (%)	4 (24)	4 (24)	—	—	—	—
Vomiting, *n* (%)	1 (6)	1 (6)	—	—	—	—
Diarrhea, *n* (%)	—	—	—	—	—	—
Infections, *n* (%)	7 (41)	1 (6)	2 (12)	3 (18)	—	1 (6)
SPM, *n* (%)	—	—	—	—	—	—

Mancuso et al., Eur J Hematol , 2026

Take Home Messages

- Third Line therapy lacks efficacy as compared to previous and subsequent available options
- BCMA targeting: Cilta > Ide. RW data seems to overlap trials
- Bispecifics efficacy likely correlated to overall response and fitness obtained in third line
- Innovative chemobased solutions to be considered in the evolving scenario