Risk factors associated with early mortality in patients with multiple myeloma in the novelagents era

Sung-Hoon Jung¹, Min-Seok Cho¹, Hee Kyung Kim², Seok Jin Kim², Kihyun Kim², Jung-Won Cheong³, Soo-Jeoong Kim³, Jin-Seok Kim³, Jae-Sook Ahn¹, Yeo-Kyeoung Kim¹, Deok-Hwan Yang¹, Hyeoung-Joon Kim¹, Je-Jung Lee¹

1Department of Hematology-Oncology, Chonnam National University Hwasun Hospital, South Korea

2Division of Hematology-Oncology, Department of Medicine, Samsung Medical Center, Sungkyunkwan University School of Medicine, South Korea

3Division of Hematology, Department of Internal Medicine, Yonsei University College of Medicine, Severance Hospital, South Korea

Although the introduction of novel agents improved the survival outcomes in patients with multiple myeloma (MM), some patients died within less than one year (early mortality, EM) following the diagnosis. In this study, we evaluated the EM rate, and investigated the risk factors associated with EM in MM patients. Retrospective data from 542 patients who were initially treated with a novel agent-containing regimen were analyzed. The median overall survival (OS) for the entire cohort was 56.5 months. The median OS in the 2010-2014 group was longer than in the 2002-2009 group (59.2 months vs. 49.1 months, P = 0.054). The rate of EM was 13.8%, and the most common cause of EM was infection and comorbidity. In multivariate analysis, the age-adjusted Charlson comorbidity index (ACCI \geq 4), low body mass index (BMI 20 kg/m²), thrombocytopenia, and renal failure were significantly associated with EM. The presence of none, 1, or \geq 2 factors was associated with a 4.1%, 14.3%, or 27.4% risk of EM (P 0.001), respectively. The median OS times were significantly different depending on the presence of factors associated with EM (P 0.001). In conclusion, the ACCI (\geq 4), low BMI, thrombocytopenia and renal failure were strong predictors for EM in the novel agent era. These data may help manage MM patients and improve survival.