

EMN26 study on Iberdomide reported substantial response improvements in over 50% of Multiple Myeloma treated patients

- **Iberdomide maintenance therapy after transplantation in Newly Diagnosed Multiple Myeloma showed a favourable safety profile and induced superior response improvement as compared with Lenalidomide.**
- **The study is currently underway in The Netherlands, Italy, France and Greece and included 120 patients.**
- **On Dec. 9, an oral presentation was held during the American Society of Hematology (ASH) conference in San Diego.**

Rotterdam, 11 December 2023 – The **European Myeloma Network (EMN)** conducted a phase 2 study with **Iberdomide** as **maintenance therapy** after autologous stem-cell transplantation in patients with newly diagnosed multiple myeloma – the **EMN26 study**. Results were presented at the **American Society of Hematology (ASH)** conference in San Diego by Niels van de Donk, Professor at Amsterdam UMC, Vrije Universiteit Amsterdam, Department of Hematology, Cancer Center Amsterdam - one of the two principal investigators of the study together with Francesca Gay from University of Torino - during the oral abstract session on 9 December 2023.

Maintenance therapy is meant to control disease after initial treatment. The immunomodulatory agent lenalidomide is considered the standard maintenance approach after induction with triplet or quadruplet therapies followed by high-dose chemotherapy and autologous stem-cell transplantation. Iberdomide is a novel, potent, oral cereblon (CRBN) E3 ligase modulator (CELMoD™) with greater tumoricidal and immune-modulatory effects.

The EMN26 study – conducted at 22 sites in the Netherlands, Italy, France, and Greece – evaluated Iberdomide maintenance in 3 cohorts with different doses: 1.3 mg, 1.0 mg, 0.75 mg. Patient enrolment is concluded, the study is ongoing, and results of the first two cohorts (1.3 mg and 1.0 mg) were presented at ASH. Iberdomide showed to be well tolerated by patients, with **manageable side effects**. Substantial **response improvements** were observed at 6 months (42% of patients with 1.3 mg and 35% with 1.0 mg) and 12 months (50% of patients with 1.3 mg and 54% with 1.0 mg), which are markedly superior to those reported with lenalidomide maintenance in the EMN02 study¹ (26% at 6 months and 31% at 12 months).

MRD negativity is defined as the absence of myeloma cells in the bone marrow, detected through diagnostic techniques with a sensitivity of at least 10⁻⁵. The EMN26 study with Iberdomide showed that at 6 months the MRD conversion rate from positive to negative was 15% with 1.3 mg and 24% with 1.0 mg; at 12 months, the conversion rate increased to 58% with 1.3 mg and 29% with 1.0 mg.

The presented data support the role of iberdomide as maintenance therapy in Newly Diagnosed Multiple Myeloma after transplantation. Longer follow-up is needed to define the recommended dose that will be used in the randomized phase 3 Excaliber study, which will directly compare Iberdomide vs. Lenalidomide maintenance.

¹Sonneveld P, et al. Consolidation and Maintenance in Newly Diagnosed Multiple Myeloma. J Clin Oncol. 2021 Nov 10;39(32):3613-3622. doi: 10.1200/JCO.21.01045. Epub 2021 Sep 14. PMID: 34520219.

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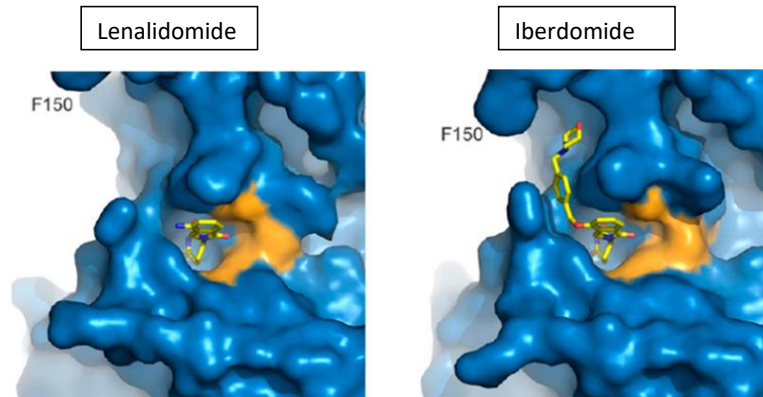
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Photos to include:

1. Presenter/ Principal Investigator: Prof. Niels van de Donk



2. Iberdomide (IBER) is a novel, potent, oral cereblon (CRBN) E3 ligase modulator (CELMoD™) with greater tumoricidal and immune-modulatory effects compared with IMiDs.



About EMN – European Myeloma Network foundation

The European Myeloma Network (EMN) is a non-profit organization, created in 2005. This network is the reference organization for multiple myeloma studies in Europe: physicians can participate in cooperative projects to increase and share their experiences, and to standardize and harmonize clinical practices; pharmaceutical companies can refer to the EMN as a general interlocutor in Europe to plan and manage clinical trials with new molecules; and, most importantly, patients can be enrolled in clinical studies evaluating last-generation and promising drugs, with the ultimate goal of improving their survival and quality of life. Various national groups collaborate within the EMN, such as the Netherlands (where the headquarter is located), Italy (with the data centre of the network), Germany, Austria, France, Spain, Greece, Czech Republic, the UK, Norway, Denmark, Switzerland, Turkey, and many more countries will participate in the EMN projects in the future. For further information, please contact the EMN (President Prof. Pieter Sonneveld): <https://www.myeloma-europe.org/>

About Multiple Myeloma

Multiple myeloma is a rare and highly heterogeneous hematologic malignancy typical of the elderly, with a median age at diagnosis of approximately 65 years. In Europe, this disease has an incidence of 4.5 new cases per 100,000 people, with around 33,000 new cases each year. Multiple myeloma arises in plasma cells, a type of white blood cells. In multiple myeloma, cancerous plasma cells accumulate in the bone marrow, and, rather than produce helpful antibodies, the tumour cells produce abnormal proteins that can cause serious complications, such as hypercalcemia, renal failure, anaemia, and bone lesions. Much progress has been made in the treatment of this disease thanks to the introduction of autologous stem cell transplantation, and innovative and effective novel agents. In the last ten years, the median survival of patients has improved from only 2 to 8-10 years. Yet, there is a long way ahead and further research to support patients and their family is needed.