Outcomes of VMP-based therapy in very elderly patients (≥75 years) with multiple myeloma

Slama Ahlem, Bizid Inaam, Zaineb Mlayah, Aya Dridi Zaouali, Ameni Yahya ,Ben Salem Sirine, Boufrikha Wiem, Laatiri Mohamed Adnene, Boukhris Sarra

University of Monastir, Faculty of Medicine of Monastir, Clinical Hematology Department, Fattouma Bourguiba Hospital, 5000 Monastir, Tunisia

Background

The bortezomib, melphalan and prednisone (VMP) regimen is widely used for transplant-ineligible MM. Comorbidities and treatment-related toxicity often constrain its use in very elderly patients (≥75 years).

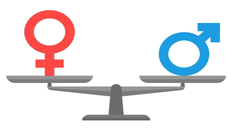
This study aims to compare the efficacy and survival outcomes of VMP-based regimens in patients with MM aged ≥75 years to those aged <75 years.

Methods

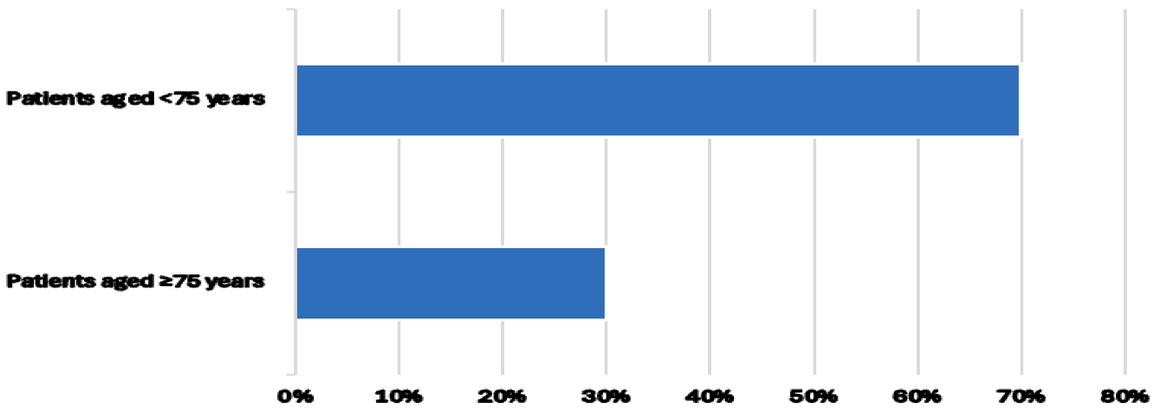
- ✓ Retrospective single-center study
- ✓ Inclusion criteria : Patients with symptomatic MM according to the IMWG criteria, treated with VMP
- ✓ Period of the study : 2019 - 2025
- ✓ Study setting : Fattouma Bourguiba University Hospital, Monastir, Tunisia.
- ✓ Patients were stratified into two categories: 1st group with age ≥75; the 2nd group with age <75 years.
- ✓ Clinical features, biological characteristics, response rates and survival outcomes were analysed and compared between the two groups using SPSS version 26.

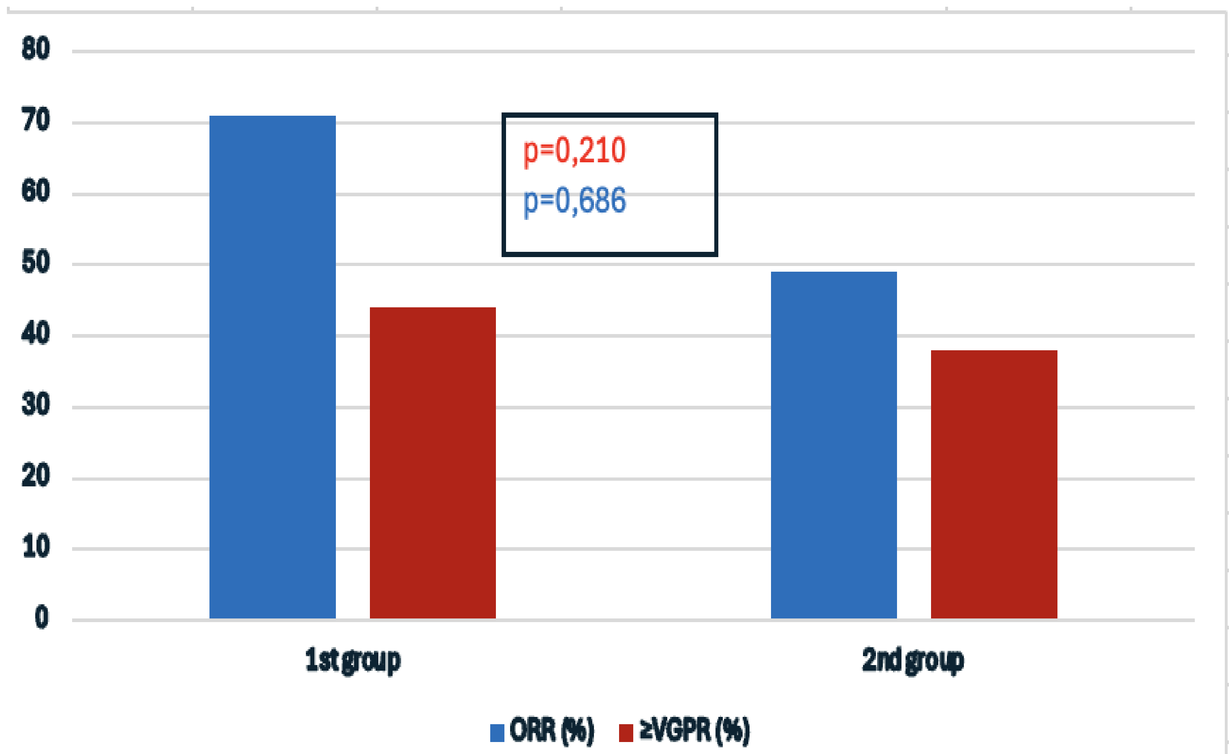
Results

- ✓ **53 Patients**
- ✓ Sex distribution : **H/F =1**



- ✓ Median age = **72 years** [58–92]





- ✓ Baseline characteristics showed a poorer clinical status in the 1st group: (**Table 1**)

Table 1 : Patient's Baseline characteristics

	1st group	2nd group	p
ECOG performance status ≥2	69 %	57 %	0,544
renal impairment	33 %	16 %	0,467
Elevated LDH levels	12 %	27 %	0,12
bone involvement	75 %	92 %	0,179
ISS stage ≥II	50 %	81 %	0,234

- ✓ At one year :
  - overall survival (**94% vs 95%,** P =0.546)
  - relapse-free survival **(92% vs 85%,** P =0.817)

→ Comparable Results

Conclusion

VMP-based therapy appears to provide comparable response and survival outcomes in patients aged ≥75 years. No significant impact of age was observed on treatment efficacy or 1st-year survival. These findings support the use of VMP in very elderly patients, emphasizing that treatment decisions should be guided by other factors rather than age.

Acknowledgments

We wish to express our sincere gratitude to all members of the **Clinical Hematology Department**, whose expertise, dedication, and commitment to patient care serve as a constant source of inspiration. Their daily efforts ensure high-quality care and support the advancement of research within our department. We extend special thanks to **Dr Mohamed Adnene Laatiri, Head of the Clinical Hematology Department**, for his exceptional leadership and continuous support.