



## Can Smoldering Myeloma Progress to Full-Blown Myeloma?

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**Jack Aiello:**

Jerry asked a good question related to, "If I've had smoldering myeloma for seven years, eight years, is it less likely that I will progress to full-blown myeloma?"

**Dr. Raje:**

For sure. You've already declared yourself biologically. And it's usually within the first five years. It doesn't mean that you will not progress ever. But the rate of that progression goes down considerably.

**Jack Aiello:**

And then one follow-up question, Dr. Raje. Kristoff asked the question, "If I've been diagnosed with smoldering myeloma, can I as a patient do anything to perhaps shorten, reduce the progression—or lengthen, rather the progression to full-blown myeloma?"

**Dr. Raje:**

Again, this is an area of very active research. Because when we think about curing a disease, you want to act early. You want to try and take care of the problem before it becomes a big problem. And this is a space where we are doing a lot of testing. This is the place where we are testing the vaccine study, as I talked about.

We also—because we are talking about lifestyle and things like that, we did a very interesting study within the Harvard Cancer Center hospitals. And what we did there was actually a stress relaxation response approach. So, we used an intervention called meditation. And what we're looking at is the genomic profile of patients with smoldering and MGUS to see whether or not we actually changed the genetics of myeloma progressing. We don't have the data. It's going to be presented later on this year, and we'll find out. So certainly not worrying too much about your disease is a good thing. One can just say that through common sense. But we'll have proof whether or not strategies such as this will be helpful, Jack.

**Jack Aiello:**

Gee, I'm looking forward to hearing the results. And, Dr. Orlowski, one more smoldering question.

If a smoldering myeloma patient has also been diagnosed with osteoporosis, should they go on zoledronic acid (Zometa) or pamidronate (Aredia) earlier than they might figure on doing if they don't have myeloma?

**Dr. Orlowski:**

Yeah. That's a great question. Because the osteoporosis could be just a part of the normal maturing process, should we say, and unrelated to the myeloma. But it would be important to try to figure out if the level of osteoporosis is out of what

would be expected to be proportionate for age. The reason for that is that myeloma can cause osteoporosis. And in that case, it could actually be a symptom of the disease and indicate that maybe therapy for the myeloma would be indicated.

If it's just plain old osteoporosis unrelated to the myeloma, then the osteoporosis should be treated. And there are oral drugs which can be used for that. The zoledronic acid is usually used only if the patient doesn't tolerate the oral drug. And for plain old osteoporosis, the dose is usually just once per 12 months. But it can be a little difficult to differentiate between how much is myeloma versus how much is not myeloma.

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