STUDY

IMAGE study: Isatuximab plus pomalidomide and dexamethasone for RRMM in the real-world setting

Population: n = 294 (efficacy) **n = 299** (safety)

STUDY DESIGN

Non-interventional, retrospective cohort study. Data were collected from medical records for adult patients aged ≥18 years with RRMM who had received ≥1 dose of isatuximab.

Effectiveness endpoints: PFS, OS, ORR, TTFR, TTBR, TTNT, and PFS2



Isatuximab





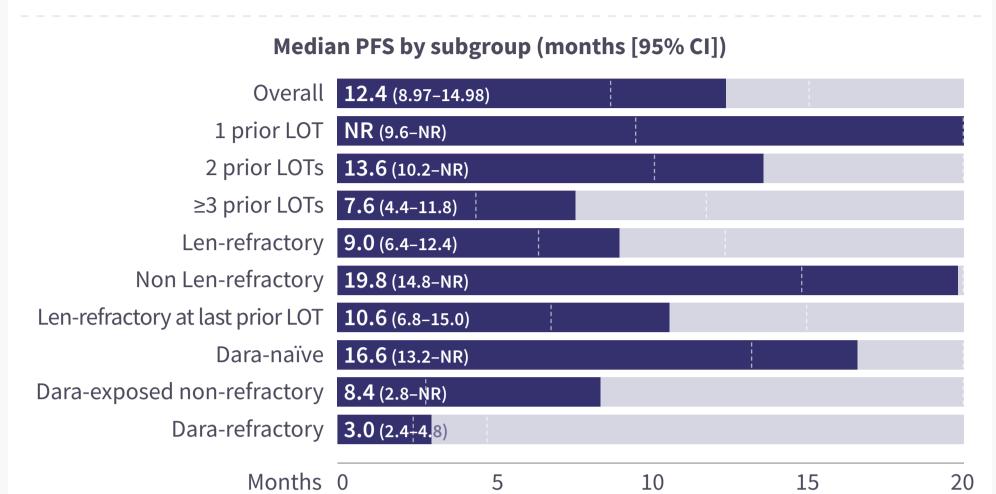
Pomalidomide



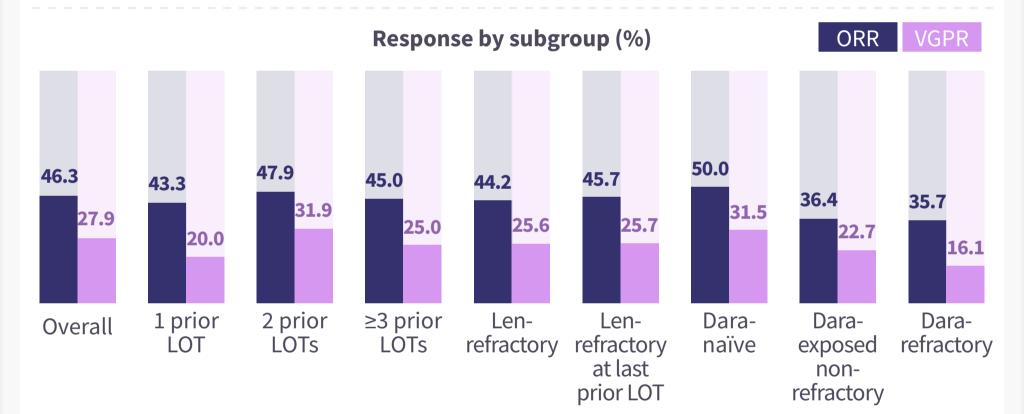


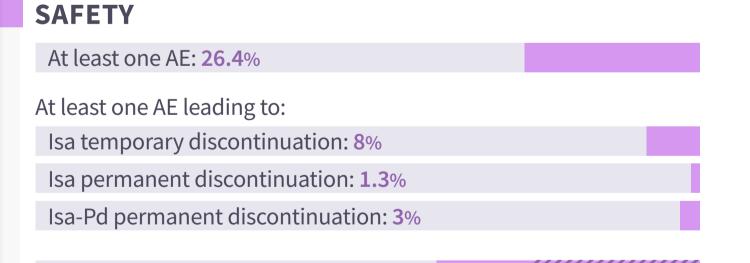
Dexamethasone

EFFICACY Treatment arm: Median follow-up: 14.2 months

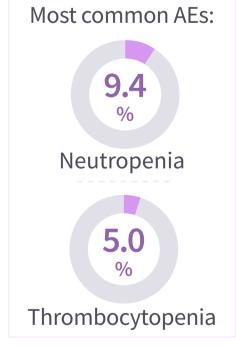


OS (95% CI): Median OS: NR (18.9–NR)





of which 63.8% were due to disease progression



Data from the IMAGE study demonstrated that the efficacy and safety profile of Isa-Pd in a real-world context is consistent with findings from clinical trials. Isa-Pd showed a PFS benefit when used as a second-line treatment, as well as in patients who were exposed but not refractory to Dara and in Len-refractory patients. These results continue to support Isa-Pd as a standard-of-care treatment for RRMM.

Abbreviations: AE, adverse event; CI, confidence interval; Dara, daratumumab; Isa-Pd, isatuximab, pomalidomide, and dexamethasone; Len, lenalidomide; LOT, line of therapy; NR, not reached; ORR, overall response rate; OS, overall survival; PFS, progression-free survival; PFS2, PFS under the next therapy; RRMM, relapsed/refractory multiple myeloma; TTBR, time to best response; TTFR, time to first response; TTNT, time to next therapy; VGPR, very good partial response.

Decaux O, et al. Eur J Haematol. 2024;113(3):290-297.

Deaths: 39.6%



