

Consensus recommendations for optimal use of T-cell-engaging BsAbs in multiple myeloma

IMWG consensus guidelines provide recommendations to support the expanding use of T-cell-engaging BsAbs in clinical practice, with a particular focus on the management of key toxicities such as CRS and ICANS.

CRS



Avoid administering BsAbs during active infection

CRS suspected: Assess clinically, check labs, rule out infection

Management guided by grade (ASTCT grading)



Grade 1: Observation

Consider tocilizumab



Grade 2: Tocilizumab 8 mg/kg

Consider steroids and supportive care



Grade 3: Tocilizumab + dexamethasone 10 mg every 6 hours

Grade 4: Tocilizumab + high-dose steroids

ICU and supportive care as indicated

Consider high-dose steroids and salvage treatment

ICANS



Baseline and at least twice-daily neurological monitoring during BsAb initiation

Management guided by grade (ASTCT grading)



Grade 1: Observation

Consider dexamethasone, non-sedating anti-epileptics



Grade 2: Dexamethasone 10 mg every 12 hours

Consider high-dose steroids, alternative therapies, non-sedating anti-epileptics, and EEG and CT/MRI



Grade 3 and 4: Dexamethasone 10 mg every 6 hours

Consider high-dose steroids and/or alternative therapies

Non-sedating anti-epileptics

CT/MRI, consider EEG and CSF evaluation

ICU care



Cytopenias

Cytopenias are frequent – CBC monitoring is recommended before each dose.

Standard supportive care should include G-CSF for neutropenia, transfusion or ESA for anemia, and holding therapy for severe thrombocytopenia.



Infections

Infections are frequent and can be severe, so vigilant monitoring and prompt investigation are essential.

ASTCT, American Society for Transplantation and Cellular Therapy; CBC, complete blood count; BsAb, bispecific antibody; CRS, cytokine release syndrome; CSF, cerebrospinal fluid; CT, computed tomography; EEG, electroencephalogram; ESA, erythropoiesis-stimulating agent; G-CSF, granulocyte colony-stimulating factor; ICANS, immune-effector cell associated neurotoxicity syndrome; ICU, intensive care unit; IMWG, International Myeloma Working Group; MRI, magnetic resonance imaging.

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