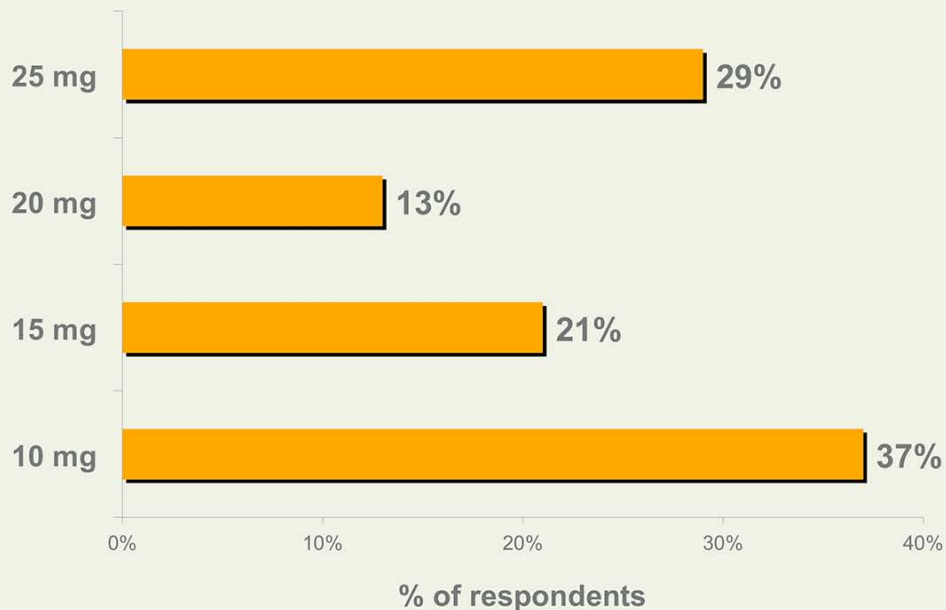


Dose of post-transplant lenalidomide maintenance

In general, when administering lenalidomide maintenance therapy for a younger (**60-year-old**) otherwise healthy patient with MM who responded to induction therapy and ASCT, what is your usual preferred starting dose?



EDITOR'S COMMENTS

We queried participants about their usual daily dose of lenalidomide maintenance, and while Dr Munshi uses 15 mg and Dr Vij 10 mg, a surprising 29% of the oncologists opt for 25 mg. This concerns Dr Vij, who believes that in the post-transplant setting 25 mg often produces cytopenias. CALGB-100104 started with 10 mg and, if that was well tolerated, stepped the dose up to 15 mg, but Dr Vij uses 10 mg because in his experience patients usually end up receiving that dose. Dr Munshi believes that even in patients tolerating 25 mg, toxicities often accumulate with time. He questions patients carefully about fatigue, noting that dose reductions of even 5 mg can have a positive effect on quality of life.

SELECT REFERENCES WITH LINKS

McCarthy P et al. **Lenalidomide after stem-cell transplantation for multiple myeloma.** *N Engl J Med* 2012;366(19):1770-81. [Abstract](#)

Attal M et al. **Lenalidomide maintenance after stem-cell transplantation for multiple myeloma.** *N Engl J Med* 2012;366(19):1782-91. [Abstract](#)