

Darzalex[®] (daratumumab) – Expanded indication

- On September 26, 2019, [Janssen announced](#) the FDA approval of [Darzalex \(daratumumab\)](#), in combination with [Velcade[®] \(bortezomib\)](#), [Thalomid[®] \(thalidomide\)](#), and [dexamethasone](#), for the treatment of multiple myeloma in newly diagnosed patients who are eligible for autologous stem cell transplant (ASCT).
- Darzalex is also approved for the treatment of adult patients with multiple myeloma:
 - In combination with [Revlimid[®] \(lenalidomide\)](#) and dexamethasone in newly diagnosed patients who are ineligible for autologous stem cell transplant and in patients with relapsed or refractory multiple myeloma who have received at least one prior therapy
 - In combination with Velcade, [melphalan](#) and [prednisone](#) in newly diagnosed patients who are ineligible for ASCT
 - In combination with Velcade and dexamethasone in patients who have received at least one prior therapy
 - In combination with [Pomalyst[®] \(pomalidomide\)](#) and dexamethasone in patients who have received at least two prior therapies including Revlimid and a proteasome inhibitor
 - As monotherapy, in patients who have received at least three prior lines of therapy including a proteasome inhibitor (PI) and an immunomodulatory agent or who are double-refractory to a PI and an immunomodulatory agent.
- The approval of Darzalex for this expanded indication was based on CASSIOPEIA, an open-label, active-controlled study in 1,085 patients with newly diagnosed multiple myeloma eligible for ASCT. Patients were randomized to receive Darzalex + Velcade + Thalomid + dexamethasone (DVTd) or Velcade + Thalomid + dexamethasone (VTd). Efficacy was evaluated by stringent Complete Response (sCR) rate at day 100 post-transplant, Complete Response Rate (CR) at day 100 post-transplant, and progression-free survival (PFS).
 - Overall, the sCR rate was 28.9% and 20.3% for the DVTd and VTd treatment groups, respectively ($p = 0.0010$). CR was achieved in 9.9% and 5.7% of patients, respectively.
 - Treatment with DVTd resulted in a reduction in the risk of progression or death by 53% vs. VTd (hazard ratio 0.47; 95% CI: 0.33, 0.67; $p < 0.0001$).
- The recommended dosage of Darzalex for all indications is 16 mg/kg actual body weight administered as an intravenous infusion.
 - Pre-infusion and post-infusion medications should be administered.
 - Darzalex should be administered by a healthcare professional, with immediate access to emergency equipment and appropriate medical support to manage infusion reactions if they occur.
 - Consult the Darzalex drug label for the recommended dosing schedule of Darzalex for all indications.
 - Consult individual drug labels for dosing recommendations for drugs used in combination with Darzalex.