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First line *vs* delayed transplantation in myeloma: Certainties and controversies

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Abstract

Since the middle of 1990s autologous stem cell transplantation has been the cornerstone for the treatment of young patients with Multiple Myeloma (MM). In the last decade the introduction of novel agents such as immunomodulatory drugs (IMiDs) and proteasome inhibitors (PI), has dramatically changed the therapeutic scenario of this yet incurable disease. Due to the impressive results achieved with IMiDs and PI both in terms of response rates and in terms of progression free and overall survival, and to the toxicity linked to high dose therapy and autologous stem cell transplantation (ASCT), a burning question nowadays is whether all young patients should be offered autotransplantation up front or if this should be reserved for the time of relapse. This article provides a review of the data available regarding ASCT in MM and of the current opinion of the scientific community regarding its optimal timing.

Key words: Autologous stem cell transplantation; Multiple myeloma; IMiDs; Proteasome inhibitors; High dose therapy

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