MINUTES AND OVERVIEW PLAN
CIBMTR WORKING COMMITTEE FOR PLASMA CELL DISORDERS AND ADULT SOLID TUMORS
Orlando, FL
Thursday, February 20, 2020, 12:15 – 2:15 pm

Co-Chair:	**Muzaffar Qazilbash, MD, MD Anderson Cancer Center, Houston, TX; Telephone: 713-745-3458; E-mail: mqazilba@mdanderson.org**
Co-Chair:	**Shaji Kumar, MD, Mayo Clinic Rochester, Rochester, MN; Telephone: 507-284-2017; E-mail: kumar.shaji@mayo.edu**
Co-Chair:	**Nina Shah, MD, University of California, San Francisco, CA; Telephone: 415-514-6354; E-mail: nina.shah@ucsf.edu**
Scientific Director:	**Parameswaran Hari, MD, MS, CIBMTR Statistical Center, Milwaukee, WI; Telephone: 414-805-4613; E-mail: phari@mcw.edu**
Assistant Scientific Director:	**Anita D'Souza, MD, MS, CIBMTR Statistical Center, Milwaukee, WI; Telephone: 414-805-0637; E-mail: anitadsouza@mcw.edu**
Statistical Directors:	**Raphael Fraser, PhD, CIBMTR Statistical Center, Milwaukee, WI; Telephone: 414-955-4849; E-mail: rfraser@mcw.edu**
Statistician:	**Omar Dávila Alvelo, MS, CIBMTR Statistical Center, Milwaukee, WI; Telephone: 414-805-0686; E-mail: odavila@mcw.edu**
Statistician:	**Noel Estrada-Merly, MS, CIBMTR Statistical Center, Milwaukee, WI; Telephone: 414-805-0692; E-mail: nestrada@mcw.edu**

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1. **Introduction**

The Plasma Cell Disorders Working Committee (PCDWC) met on Thursday, February 20, 2018 at 12:15 p.m. The chairs, scientific director and statisticians were all presented at the meeting. Attendees were asked to have their name badges scanned at the front gate for attendance purpose and to maintain the committee membership roster.

As scientific director of the PCDWC, Dr. Parameswaran Hari welcomed the attendees on behalf of the working committee leadership and started the welcome presentation by introducing each member of the working committee leadership, then explained how to gain and maintain membership, the goals and expectations of the working committee. Dr. Hari also introduced Dr. Ibrahim Yakoub as the EBMT Chair, who was unfortunately not present at the meeting. Dr. Hari also made the announcement to the members present that he would be stepping down as Scientific Director after many years of service to the committee. Dr. Anita D'Souza would take over as the Scientific Director to continue the mission and work of the committee. Dr. Hari continued by emphasizing that each proposal was given 5 minutes for presentation and 5 minutes for discussion, and the voting scores will be used as a critical recommendation by the leadership. Dr. D'Souza continued the presentation explaining the rules of authorship, and PI's rules of conduct; emphasizing the timely completion of draft manuscript. Dr. D'Souza explained that if the PI does not write the first draft of the manuscript, after 3 requests, the paper will be reassigned, and the person who writes the manuscript will be the first author. Dr. D'Souza then presented the studies in progress and explained the Advisory Committee Metrics. Lastly, Dr. D'Souza discussed important details about the CIBMTR study development cycle and explained the different sources of CIBMTR data collection (TED and CRF).

2. **Accrual summary**

The accrual summary was reference by Dr. D'Souza for review but not formally presented. The link to the full accrual summary was available online as part of the attachments. The accrual summary provides information about the number of patients available in the registration level (TED) and research level (CRF) for potential studies

3. Presentations, Published or Submitted Papers

Dr. D'Souza went through the published or submitted papers in 2019, as well as abstracts that have been presented at various conferences, mentioning that it was a very productive year and emphasized the high metrics of the committee. At the time, one study was published, and five abstracts were presented or accepted for presentation. These include:

a. **MM14-01** Autologous Transplantation for Germ Cell Tumors: Improved Outcomes over 3 decades. **Published in BBMT**
b. **MM17-01** Hematopoietic cell transplantation utilization and outcomes for primary plasma cell leukemia in the current era. **Presented at ASH 2019 as an oral. Manuscript submitted**
c. **MM18-01** The t(11;14) abnormality confers superior survival in African Americans undergoing autologous hematopoietic cell transplantation for multiple myeloma. **Submitted**
d. **MM18-02** Novel Prognostic Scoring System for Autologous Hematopoietic Cell Transplantation in Multiple Myeloma. **Presented at ASH 2019 as an oral. Manuscript in preparation**
e. **MM18-03** To compare the outcomes in young patients with multiple myeloma at diagnosis undergoing autologous or allogeneic hematopoietic stem cell transplant (HCT) with older patients: progression-free and overall survival in a case match analysis. **Presented at ASH 2019 as an oral. Selected as 1 of 5 disparities-focused abstract by ASH for media release. Manuscript in preparation**
f. **MM18-04** Busulfan, Melphalan, and Bortezomib versus High-Dose Melphalan as a Conditioning Regimen for Autologous Hematopoietic Stem Cell Transplantation in Multiple Myeloma: Long Term Follow Up of a Novel Conditioning Regimen **Presented at ASH 2019 as a poster. Manuscript submitted**

4. Studies in Progress

Dr. D'Souza presented the summary of studies in progress.

a. **MM17-01** Hematopoietic cell transplantation utilization and outcomes for primary plasma cell leukemia in the current era (S Girnius/S Patel/L Bachegowda/B Dhakal) Submitted. The goal of the study is to publish paper by June 2020.
b. **MM17-02** The Impact of Bortezomib Based Induction Therapy vs No Induction Therapy on Outcomes for Light Chain Amyloidosis (R Cornell/S Goodman/L Costa) Analysis. The goal of this study is to submit manuscript by June 2020.
c. **MM18-01** The t(11;14) abnormality confers superior survival in African Americans undergoing autologous hematopoietic cell transplantation for multiple myeloma (T Badar) Submitted. The goal of the study is to publish paper by June 2020.
d. **MM18-02** Deriving a prognostic score for patients undergoing high dose therapy and autologous SCT for myeloma and examining validity of this in long-term exceptional responders (A Hall/B Dhakal/Z Gahvari/S Chhabra/N Callander) The goal is to submit paper by March 2020.
e. **MM18-03** To compare the outcomes in young patients with multiple myeloma at diagnosis undergoing autologous or allogeneic hematopoietic stem cell transplant (HCT) with older patients: progression-free and overall survival in a case match analysis (P Munshi/A Jurczyszyn/J Zaucha/D Vesole) Manuscript in preparation. The goal is to submit paper by March 2020.
f. **MM18-04** Busulfan, Melphalan, and Bortezomib versus High-Dose Melphalan as a Conditioning Regimen for Autologous Hematopoietic Stem Cell Transplantation in Multiple Myeloma: Long Term Follow Up of a Novel Conditioning Regimen (P Hagen/P Stiff) Submitted. The goal of the study is to publish paper by March 2020.

g. **MM19-01** Impact of Induction Therapy with VRD vs. VCD on Outcomes in Patients with Multiple Myeloma Undergoing Stem Cell Transplantation (S Sidana/M Norkin/S Kumar/S Giralt) Protocol Development. The goal of this study is to have the protocol finalized by April 2020 and proceed to analysis.
h. **MM19-02** Maintenance therapy after second autologous hematopoietic cell transplantation for Multiple Myeloma. (O Pasvolsky/ M Yeshurun U Rozovski/ L Alon) Protocol Development
i. **MM19-03** Second autologous stem cell transplantation as salvage therapy for relapsed or refractory AL amyloidosis (C Tan/H Fung) Protocol Development. The goal of this study is to have the protocol finalized by October 2020 and proceed to analysis.

5. Future/Proposed Studies

Dr. D'Souza thanked the investigators whose proposals were submitted but not selected for presentation, emphasizing that the majority were dropped due to overlaps with current studies and data availability issues. Also reiterated the voting process. Dr. Muzaffar Qazilbash introduced the presenter for the first 2 proposals.

a. **PROP 1911-95** Serum Free light Chain measurement following Autologous Hematopoietic Cell Transplantation is predictive of outcomes in Multiple Myeloma. (Murthy/Kharfan-Dabaja/Kumar)
Dr. Hemant Murthy presented the proposal. The goals of the proposal are to: 1) assess the impact of autologous HCT patients' normalization of serum free light chain ratio (sFLC) at day +100 with clinical outcomes (relapse, PFS and OS). Also, to analyze the impact of % change in involved FLC from baseline and day +100 with outcomes and to analyze disease and patient characteristics that are associated with the normalization of sFLC ratio. The PI hypothesized that normalization of serum free light chain following HCT predicts superior PFS and OS in multiple myeloma. There were 2,946 patients (~45% of CRF patients) which contained available information on sFLC at diagnosis and 100-days from 2008 to 2018. Dr. Murthy suggested that sFLC could potentially be considered a surrogate marker of long-term outcomes and the CIBMTR would help to complete the largest study reported on the role of sFLC. Proposal presentation was opened for comments and questions. A comment was made on the possible exclusion of patients with renal dysfunction. A member of the audience was concerned on normalization ratio and how it is affected by treatment. A question was asked on the possibility to stratify the analysis based on the (sFLC) ratio. Dr. Murthy commented on 100-days as an inflection point and its relationship with maintenance therapy, explaining that at this point maintenance strategies are developed, and ratio may not be affected by it. A comment was made on patients with abnormal normalization ratio, which tend to seek bortezomib. Couple of audience members commented on whether to include at transplant timepoint in the timepoints to evaluate (sFLC) ratio but this was not available. Additional time points after day 100 were also of interest, e.g. day 180, but this would not be available. Last comment was made on the different tests for calculating the sFLC ratio and the variability of results.
b. **PROP 1911-96** Prexisting malignancy as risk factor for development of new primary malignancy following Autologous Stem Cell Transplantation and Maintenance therapy in Multiple Myeloma (Murthy/Kharfan-Dabaja/Kumar)
Dr. Hemant Murthy presented the proposal. The goals of the proposal are to 1) assess the cumulative incidence of new post-transplant malignancy and new secondary hematologic malignancy in patients who have a pre-existing malignancy reported prior to the diagnosis of MM,2) determine if the presence of pre-existing malignancy increased the risk of developing new post-transplant malignancy in patients who have undergone autologous stem cell transplantation for multiple myeloma compared to those without preexisting malignancy. The hypotheses are: 1) that in patients with MM and prior history of malignancy who receive Auto-SCT the incidence and risk of developing new post-transplant malignancy and new secondary hematologic malignancy is increased; 2) maintenance therapy increases incidence of both new post-transplant malignancy and secondary hematologic malignancy compared with those with no maintenance. Between 2008 to 2018, there were 534 multiple myeloma cases undergoing first

autologous stem cell transplants with a history of prior malignancies. Dr. Murthy emphasized that this study could help guide pre-transplant decision and post-transplant choice of maintenance therapy. He emphasized the importance of the CIBMTR in order to conduct this study which would not be able to be conducted in other registries.

Proposal presentation was opened for comments and questions. A concern was raised on the timeline of prior malignancies to transplant. Another member questioned what kind of new malignancies where going to be included. Dr. Hari replied that we gather all malignancies in our forms except for skin cancers. A comment was made on the possibility of adding patients without prior solid tumors to compare the incidence of new malignancies. A member of the audience questioned on the availability of information of family incidence of malignancies. This would not be available. Dr. Hari responded that prospectively people tend to forget to report a malignancy. A concern was raised on the low numbers of new malignancies. A member of the audience pointed out the lack of information on treatment of the prior malignancy as a limitation to this study. Lastly, an audience member asked what the risk of new malignancy is on the group who received maintenance therapy.

c. **PROP 1911-123** Outcomes after autologous hematopoietic cell transplantation in POEMS syndrome. (Kansagra/Cornell/Dispenzieri)

Dr. Shaji Kumar presented the proposal on behalf of Dr. Ankit Kansagra. The goals of the proposal are: 1) to evaluate AHCT use in POEMS and determine disease status, hematopoietic recovery rates, and clinical outcomes; 2) to identify prognostic markers of survival after AHCT and create a predictive scoring system; and 3) to evaluate the role of induction vs no-induction therapy on outcomes. This study hypothesizes that autologous hematopoietic cell transplantation (AHCT) will demonstrate low transplant related mortality and prolonged progression free survival when used as treatment for patients with POEMS syndrome. There were 418 patients with POEMS patients >18 years of age, undergoing HDT/ASCT and reported to CIBMTR from 2000-2018 and about 14% of these patients are from the CRF track. Dr. Kumar emphasized the importance of using CIBMTR data to evaluate the role of AHCT in patients with POEMS.

First question asked on the availability of information on neurologic responses. A concerned was raised on the possible misclassification on the diagnosis of POEMS syndromes. Dr. Hari commented on the availability of path reports to confirm the diagnosis for some patients, but we would have to trust centers classification. A comment was made on availability of maintenance therapy for these patients. Dr. D'Souza responded that this information is available only on CRF patients. Other comments were made on the availability of information on initial treatment and mobilization failure. Dr. Kumar clarified that we would only have data on patients who underwent transplant.

Dr. Kumar introduced the next presenter and study.

d. **PROP1910-21/PROP1911-141/PROP1911-228/PROP1911-44** <u>Combined proposal:</u> Risk factors for and characteristics of secondary primary malignancies following autologous hematopoietic cell transplant for multiple myeloma

Dr. Brittany Ragon presented the combined proposal on behalf of all groups who proposed similar concepts. The goals of the proposal are: 1) to determine the cumulative incidence of second primary malignancies (SPM), and secondary hematological malignancies (SHM); 2) to compare overall survival (OS) in patients with SPM and SHM compared to those without SPM and SHM; 3) to identify patient and disease characteristics that predict an increased risk of developing SPM/SHM and 4) to determine the risk of SPM/SHM when post auto-HCT lenalidomide therapy is utilized. They hypothesize that multiple myeloma (MM) patients undergoing autologous hematopoietic cell transplant (auto-HCT), post-transplant therapies can modify the risk of second primary malignancies (SPM), including the risk of secondary hematological malignancies (SHM) and that patients who develop SPM following auto-HCT for MM have an inferior overall survival compared to those who do not develop SPM.

Proposal presentation was opened for comments and questions. A concern was raised on the duration of lenalidomide. A member of the audience asked if cytogenetic abnormalities tested via FISH are captured in the forms. Dr. D'Souza replied that we collect that information, and we also have the reports on abnormalities. A concern was raised on the recurrence of SPM. A member of the audience suggested to look on the availability of SHM after an allogeneic transplant.
Dr. Nina Shah introduced the last presenter.

e. **PROP1911-134/PROP1911-237/PROP1911-26** Combined proposal: Impact of bortezomib-based vs. lenalidomide maintenance therapy on outcomes of patients with high-risk multiple myeloma.
Dr. Naresh Bumma presented the combined proposal on behalf of all groups who proposed similar concepts. The goals of the proposal are 1) to evaluate outcomes after novel agent induction, autologous stem cell transplant (ASCT) and maintenance therapy in patients with high-risk multiple myeloma (MM) compared to patients with standard risk disease; 2) evaluate progression free survival (PFS) in patients with high-risk MM receiving lenalidomide only maintenance vs. bortezomib-based (alone or in combination) consolidation/maintenance after ASCT; 3) evaluate overall survival (OS) in patients with high-risk MM receiving lenalidomide only maintenance vs. bortezomib-based (alone or in combination) consolidation/maintenance after ASCT.
The hypothesis is that lenalidomide single agent as maintenance therapy is associated with inferior progression free survival in high-risk myeloma patients (defined as deletion 17p/monosomy 17, t(4;14), t(14;16), t(14;20) or gain 1q on FISH). Between years 2014 to 2018 there were 3879 patients who underwent ASCT after first induction from which 1246 were classified as high risk and 80.4% received post ASCT therapy. Dr. Bumma emphasized that there is limited information comparing lenalidomide alone to other maintenance regimens in high risk MM. Hence, this study will help to determine post ASCT therapy for patients with high risk MM.
First comment was on the availability on dual maintenance therapies, Dr. D'Souza replied that we collect that information. Another comment was made on follow-up since Dr. Bumma planned 2019 could be possibly included in the proposal. Dr. D'Souza replied that study should be done until 2018 since we would not have complete data reporting for 2019 yet. A member suggested the possible analysis of double hits on cytogenetics. A concern was raised on a possible center effect between high risk cytogenetics and the intent of treatment. Other member commented on the small differences found in different studies that compared the use of Bortezomib.

24 additional proposals were submitted but not presented as listed below:

a. **PROP1911-03** The impact of response kinetics on outcomes while on lenalidomide maintenance after autologous hematopoietic cell transplantation in multiple myeloma. *Dropped Reason - Feasibility*
b. **PROP1911-07** Transplant outcomes in multiple myeloma-associated AL amyloidosis *Dropped Reason - Insufficient score to proceed among submitted proposals*
c. **PROP1911-107** Impact of Melphalan dose on outcomes following autologous stem cell transplantation in light chain amyloidosis with renal involvement in young vs. older patients. *Dropped Reason - Insufficient score to proceed among submitted proposals*
d. **PROP1911-117** The effect of coexistent amyloid and multiple myeloma in patients undergoing autologous stem cell transplant*. Dropped Reason - Insufficient score to proceed among submitted proposals*
e. **PROP1911-122** Growth Factors vs. Growth Factors + Chemotherapy in Peripheral Blood Stem Cell Mobilization for Autologous Hematopoietic Stem Cell Transplantation in Multiple Myeloma Patients. *Dropped Reason - Overlap with SC15-04*
f. **PROP1911-130** Melphalan dosing in the setting of advanced age and comorbidity. *Dropped Reason - Overlap with MM18-03*
g. **PROP1911-17** Comparison of high dose melphalan with 1 day vs. 2day regimen followed by autologous hematopoietic cell transplantation in patients with multiple myeloma. *Dropped Reason - Feasibility*

h. **PROP1911-177** To compare the outcomes of upfront autologous hematopoietic stem cell transplant using melphalan 200mg/m2 to melphalan <200mg/m2 in young and older patients with renal insufficiency and multiple myeloma in the US. *Dropped Reason - Overlap with MM14-03*
i. **PROP1911-180** Success and safety of re-mobilization of stem cell for patients with Multiple Myeloma who have previously undergone autologous stem cell transplant. *Dropped Reason - Feasibility*
j. **PROP1911-186** Evaluation of factors predictive of successful outcomes in allogeneic hematopoietic cell transplantation for multiple myeloma. *Dropped Reason - Feasibility*
k. **PROP1911-189** The Mayo 2012 and European 2015 Staging Systems for Systemic Light Chain Amyloidosis Predict Survival following High Dose Melphalan and Autologous Stem Cell Transplantation Irrespective of Transplant Center Experience. *Dropped Reason - Feasibility*
l. **PROP1911-230** Outcomes with an intensified conditioning regimen of BCNU/melphalan compared with melphalan alone in myeloma patients not achieving deep hematologic response prior to ASCT. *Dropped Reason - Insufficient score to proceed among submitted proposals*
m. **PROP1911-255** Outcome of patients with Multiple Myeloma undergoing Autologous (AHCT) and Allogeneic Stem Cell Transplantation (Allo-HCT) stratified by Lactate Dehydrogenase (LDH). *Dropped Reason - Feasibility*
n. **PROP1911-269** Study the Impact of Bone marrow microenvironment using thrombocytopenia and anemia as a surrogate marker in Multiple Myeloma patients undergoing autologous stem cell transplant. *Dropped Reason - Insufficient score to proceed among submitted proposals*
o. **PROP1911-29** KRD vs. VRD induction in transplant eligible multiple myeloma patients undergoing autologous stem cell transplantation. *Dropped Reason - Feasibility*
p. **PROP1911-37** Predictors and Prognostic Impact of Early Relapse After Salvage Second Autologous Hematopoietic Cell Transplantation for Relapsed. *Dropped Reason - Insufficient score to proceed among submitted proposals*
q. **PROP1911-43** Assessing outcomes of patients with AL amyloidosis with t(11;14) after autologous stem cell transplant. *Dropped Reason - Insufficient score to proceed among submitted proposals*
r. **PROP1911-62/PROP1911-65** Outcomes of autologous hematopoietic cell transplantation in multiple myeloma with pre-existing monoclonal gammopathy of unknown significance, smoldering myeloma or solitary plasmacytoma. *Dropped Reason - Insufficient score to proceed among submitted proposals*
s. **PROP1911-71** Evaluation of the outcomes of the use of allogeneic stem cell transplant in refractory or relapsed systemic amyloid light chain amyloidosis. *Dropped Reason - Insufficient score to proceed among submitted proposals*
t. **PROP1911-84** Efficacy analysis of melphalan dose reduction in multiple myeloma patients undergoing autologous transplant in the era of novel agent induction and maintenance. Dropped Reason - Insufficient score to proceed among submitted proposals
u. **PROP1911-94** Outcomes of HIV+ Patients undergoing Autologous HCT for Multiple Myeloma. *Dropped Reason – Feasibility*
v. **PROP1911-213** Comparing outcomes of maintenance therapies after autologous stem cell transplant (SCT) in patients with multiple myeloma. *Dropped Reason -Insufficient score to proceed among submitted proposals*
w. **PROP1910-03** Optimal conditioning regimen for relapsed Multiple Myeloma, prior to second salvage autologous hematopoietic stem cell transplant. *Dropped Reason- Insufficient score to proceed among submitted proposals*

The meeting was adjourned at **2:00** p.m. Dr. Kumar asked the audience to give an applause and thank Dr. Hari for his contributions.

6. Other Business

The chairs of the working committee, scientific director and statisticians had a post-WC meeting afterwards. After the new proposals were presented, each attendee had the opportunity to vote the proposals using the provided voting sheets. Based on the voting results, current scientific merit and impact of the studies on the field, the following studies were decided to move forward as the committee's research portfolio for the upcoming year:

a. **MM20-01: PROP 1911-123** Outcomes after autologous hematopoietic cell transplantation in POEMS syndrome (Kansagra/Cornell/Dispenzieri/Kumar)
b. **MM20-02: PROP 1910-21/ PROP 1911-141/ PROP 1911-228/ PROP 1911-44** Risk factors for and characteristics of secondary primary malignancies following autologous hematopoietic cell transplant for multiple myeloma (Ragon/George/Gowda/Shah/Usmani). Invite Dr. Murthy to the Writing Committee since **PROP 1911-96** included many overlaps with the study, and prior malignancy was a variable we could add to this study and include within this protocol.
c. **MM20-03: PROP 1911-134/ PROP 1911-237/ PROP 1911-26** Impact of bortezomib-based vs. lenalidomide maintenance therapy on outcomes of patients with high-risk multiple myeloma (Bumma/Dhakal/Sidana)

Working Committee Overview Plan for 2020-2021

Study number and title	Current status	Goal with date	Total hours to complete	Total hours to 2021 goal	Hours allocated to 6/30/2020	Hours allocated 7/1/2020-6/30/2021	Total Hours allocated
MM17-01: Hematopoietic cell transplantation for primary plasma cell leukemia in the era of novel agents	Submitted	Published – July 2020	0	**0**	0	0	**0**
MM17-02: The Impact of Bortezomib Based Induction Therapy vs No Induction Therapy on Outcomes for Light Chain Amyloidosis	Analysis	Submitted – July 2020 Published – July 2021	80	**80**	70	10	**80**
MM18-01: Racial Discrepancy in Clinical Outcomes of Multiple Myeloma Patients with and without t(11;14) Genetic Abnormality	Submitted	Published – July 2020	0	**0**	0	0	**0**
MM18-02: Deriving a prognostic score for patients undergoing high dose therapy and autologous SCT for myeloma and examining validity of this in long-term exceptional responders	Manuscript Prep	Published – July 2021	10	**20**	10	10	**20**
MM18-03: To compare the outcomes in young patients with multiple myeloma at diagnosis undergoing autologous or allogeneic hematopoietic stem cell transplant (HCT) with older patients: progression-free and overall survival in a case match analysis	Manuscript Prep	Published – July 2021	10	**20**	10	10	**20**

MM18-04: Busulfan, Melphalan, and Bortezomib versus High-Dose Melphalan as a Conditioning Regimen for Autologous Hematopoietic Stem Cell Transplantation in Multiple Myeloma: Long Term Follow Up of a Novel Conditioning Regimen	Submitted	Published – July 2020	0	**0**	0	0	**0**
MM19-01: Impact of Induction Therapy with VRD vs. VCD on Outcomes in Patients with Multiple Myeloma Undergoing Stem Cell Transplantation	Protocol Development	Submitted – March 2021	280	**280**	150	130	**280**
MM19-02: Maintenance therapy after second autologous hematopoietic cell transplantation for Multiple Myeloma	Protocol Development	Manuscript Preparation – July 2021	280	**210**	150	60	**210**
MM19-03: Second autologous stem cell transplantation as salvage therapy for relapsed or refractory AL amyloidosis	Protocol Development	Submitted – March 2021	290	**290**	100	190	**290**
MM20-01: Outcomes after autologous hematopoietic cell transplantation in POEMS syndrome	Protocol Pending	Manuscript Preparation – July 2021	330	**260**	0	260	**260**
MM20-02: Risk factors for and characteristics of secondary primary malignancies following autologous hematopoietic cell transplant for multiple myeloma	Protocol Pending	Data File Preparation – July 2021	330	**100**	0	100	**100**
MM20-03: Impact of bortezomib-based vs. lenalidomide maintenance therapy on outcomes of patients with high-risk multiple myeloma	Protocol Pending	Data File Preparation – July 2021	330	**100**	0	100	**100**

Working Assignments for Working Committee Leadership (March 2020)

Shaji Kumar:	**MM17-01:** HCT for primary plasma cell leukemia **MM18-01:** Racial discrepancy in MM patients with t(11;14) **MM19-01:** VRD vs. VCD as induction for MM patients **MM20-02:** Risk factors for and characteristics of secondary primary malignancies following autologous hematopoietic cell transplant for multiple myeloma
Nina Shah:	**MM17-02:** Bortezomib induction therapy for light chain amyloidosis **MM18-02:** Prognostic score system **MM18-03:** Compare young vs. old MM patients **MM20-01:** Outcomes after autologous hematopoietic cell transplantation in POEMS syndrome
Muzaffar Qazilbash:	**MM18-04:** BuMelVel vs High dose Mel in MM **MM19-02:** Maintenance therapy after second AutoHCT for MM **MM19-03:** Second AutoHCT for AL Amyloidosis **MM20-03:** Impact of bortezomib-based vs. lenalidomide maintenance therapy on outcomes of patients with high-risk multiple myeloma