

## **RESEARCH NEWS**

# Not everyone with multiple myeloma gets transplants

### Fewer transplants if people are uninsured, have Medicare, or are Black

A person's race and health insurance may affect which treatments they receive for multiple myeloma.

That's according to a study of 29,000 adults who were treated for multiple myeloma during 1991-2016. The study took place in California. Researchers compared info about people's health care, insurance and hospital stays.

Multiple myeloma is a blood cancer that is more common in Black or African American people. Autologous blood and marrow transplant, or BMT, is the standard treatment for myeloma. Autologous BMT uses your own bloodforming cells, so you don't need a donor.

In the study, people who were Black or African American were less likely than people of other races to get BMT. Of the people in the study, 99% identified as Hispanic or Latino; Asian or Pacific Islander; Black or African American; or White. There were not enough people in other groups to accurately compare them.

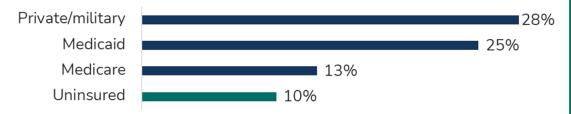
#### Percent who got BMT by race or ethnicity



About 16% of Black or African American people got BMT; that's compared to about 19-21% of people from other races.

People who had Medicare or no health insurance were less likely to get BMT than those with Medicaid or private insurance.

#### Percent who got BMT by insurance



About 10-13% people who were uninsured or had Medicare got BMT. That's compared to 25-28% of people who had Medicaid, private insurance or military insurance.

#### Learn more about

- <u>Financial help for transplant</u> at NMDP.org
- <u>Clinical trials for myeloma</u> at CTsearchsupport.org
- <u>Disparities in African</u>
   <u>Americans</u> at International
   Myeloma Foundation
- More <u>study summaries</u> at CIBMTR.org

#### Source

Esteghamat NS, Brunson A, Rosenberg AS, et al. Utilization of Autologous Hematopoietic Cell Transplantation Over Time in Multiple Myeloma: A Population-Based Study. Clinical Lymphoma, Myeloma and Leukemia. 2023. Epub 2024/01/10. doi: 10.1016/j. clml.2023.12.009.

### About this research summary

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