

LIVING WELL WITH MYELOMA WEBINAR

Multiple Myeloma Patient Safety and the Coronavirus



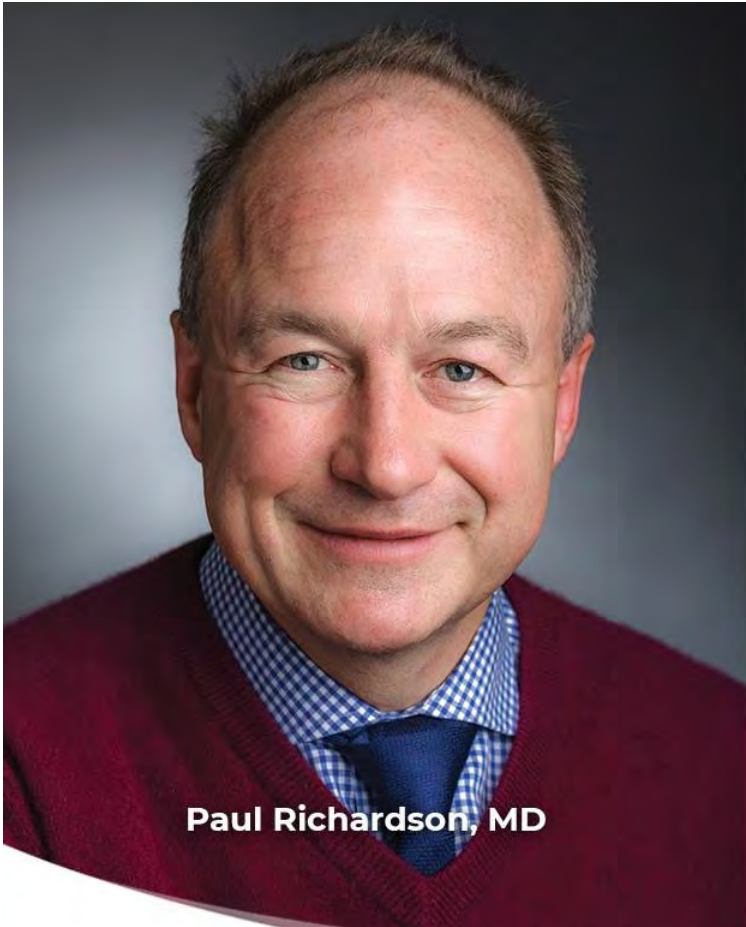
Brian G.M. Durie, MD

Paul Richardson, MD

Beth Faiman, PhD, RN

Thursday, April 16, 2020

Today's Speakers



Paul Richardson, MD

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Dana-Farber
Cancer Institute



Brian G. M. Durie, MD

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Beth Faiman, PhD, RN

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Cancer Institute

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#1 Message



Stay at home

with

- **Hand washing**
- **Physical distancing**
- **Social networking**

COVID-19 BASIC INFORMATION

- Novel Coronavirus
- Highly infectious
- Spread by droplets from coughing/ sneezing
- Transmission in air and from surfaces
- Biggest risk: close person-to-person transfer

Key Recommendations

- **Physical distancing** – we still want to be social

- Stay home

- Wash hands



- Protect from all outside contacts
- Masks protect others from you

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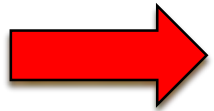


Risk of becoming infected

- Linked to dose or “viral load”
- Role of “Super Spreaders”
- Aerosolized virus in hospital setting
- Multiple exposures
- Entry site is important: throat/lung, nose, eyes
- Drinking water (liquids) can help
- New mutations

Risk of serious consequences: Top 10 Medical Factors

- Age > 65 years
- Man versus woman
- Chronic lung disease, smoking and/or vaping
- Diabetes
- Cardiovascular disease especially hypertension
- A cancer diagnosis
- Asthma
- Kidney disease
- Nursing home residence
- African American, Native or American Indian



Social and Healthcare Resource Risk Factors

Social

- % uninsured
- Below poverty line
- Homeless
- Migrants

Healthcare Resources

- Bed count/ capita
- ICU beds/ capita
- Distance to
equipped hospital

Food Security

For Everyone

- Grocery trips
- Home Delivery

For Disadvantaged

- Home alone
- Disabled
- Lost job
- Poor/homeless

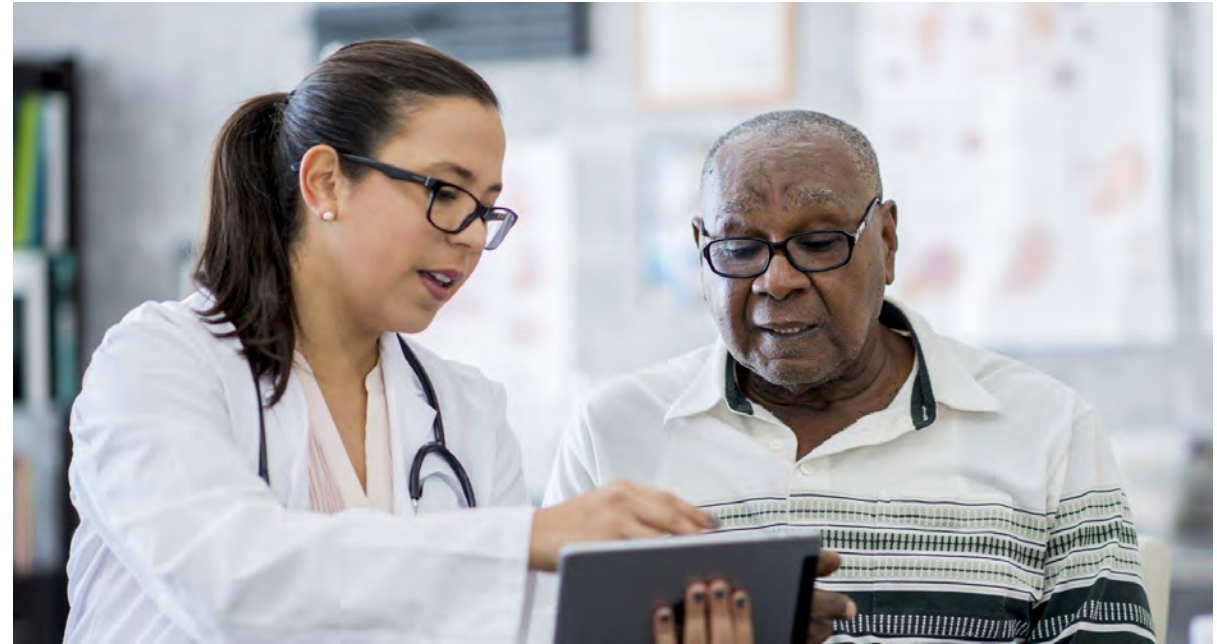


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Risk factors for myeloma patients

- Need for urgent care (increased exposure risk)
- Active myeloma needing new therapy (at diagnosis/ relapse)
- Ongoing or recent ASCT
- Cellular therapies
- Poor bone marrow reserves
- Use of higher dose steroids
- Low vitamin D levels



Strategies to reduce risk in short term

- Use telemedicine or equivalent
- Limit lab testing or do safely
- Temporarily reduce/ eliminate IV bisphosphonate (Zometa®/ Aredia®)
- Modify therapy to reduce risk of neutropenia
- Use more oral drugs/ regimens if acceptable
- Limit ASCT and/or IV/SQ therapies if possible
- Be aware that clinical trials can be modified

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Thinking of the way forward...

**What do we need
to know?**

Details of COVID-19 infection

- Transmitted from early asymptomatic patients
- Lack of testing means we do not know
- Loss of smell a key early feature
- There may not be fever or classic features such as cough
- Diffuse aches & pains very common

Thinking of family and friends

- Be very alert for infection in any member of your social group
- **Physical distancing** may be required
- Push hard to get testing if valid concern (loss of smell is clue)
- Lack of resources has distorted recommendations (testing/
masks)

Question: Can I go for a walk?

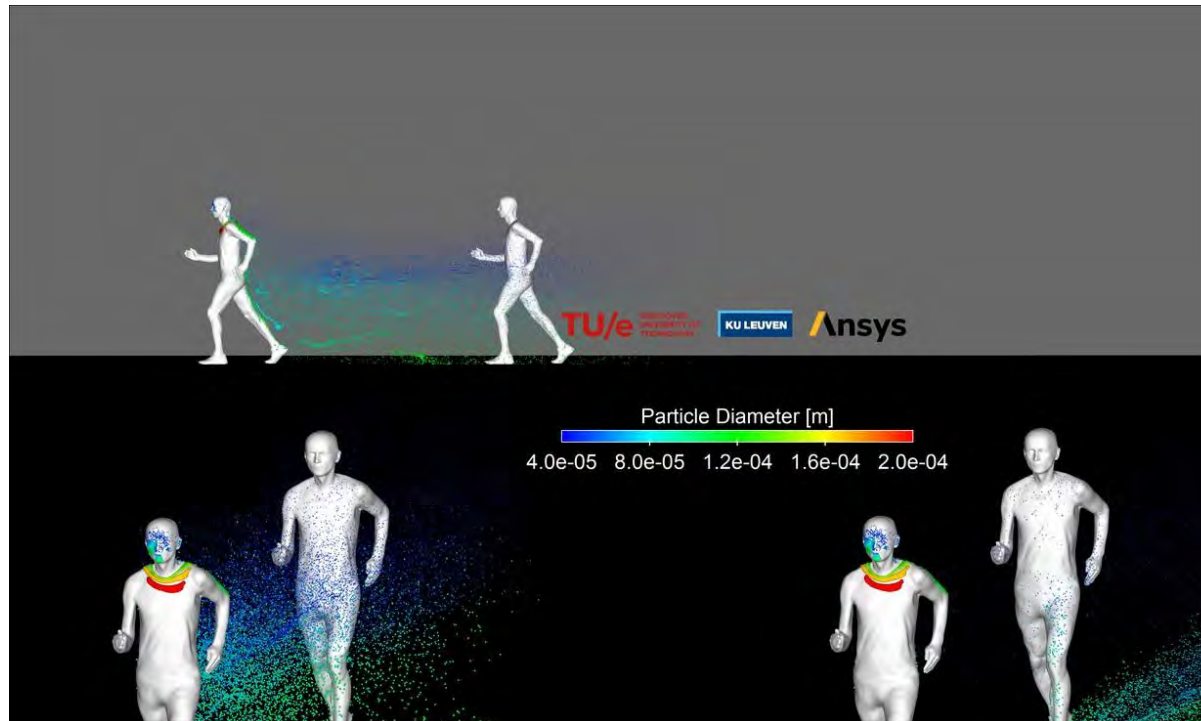
- Yes!
- Respect “physical distancing”
- Enhance local “social” connections
- Many experts agree about the value

Bottom line: Regular exercise is helpful!



Safe physical distance

On the basis of the study results, the scientist advises that for walking the distance of people moving in the same direction in 1 line should be at least 4–5 meter, for running and slow biking it should be 10 meters and for hard biking at least 20 meters.



Belgian-Dutch Study: Why in times of COVID-19 you should not walk/run/bike close behind each other.

<https://medium.com/@jurgenthoele/belgian-dutch-study-why-in-times-of-covid-19-you-can-not-walk-run-bike-close-to-each-other-a5df19c77d08>

Recognizing anxiety: fostering resilience

- These are anxious times. Remember, we WILL get through it.
- Maintain **social connections** despite physical distancing
- GoToWebinars can help a lot!
- Children get anxious too!



Support Group Leaders GoToMeeting



Recognizing anxiety: fostering resilience

- Agree on longer term perspective!
- Some treatments becoming available
(Hydrochloroquine/ plasma)
- Vaccine will take time (not live vaccines should be OK for MM patients): 2021
- Introducing antibody testing will be key!

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New Therapies

For Lung Problems

- Lay on stomach
- Stick with low flow oxygen
- Try nitrous oxide (increases blood flow)
- Tocilizumab (Actemra®) for “shock” (crash) syndrome

New Therapies

For COVID-19

- Remdesivir and other anti-virals
- Hydrochloroquine (Plaquenil®)
- Selinexor (Xpovio®)
- Plasma infusions or hyperimmune immunoglobulin*
- Tuberculosis vaccination (Bacillus Calmette–Guérin)
- Vaccine: multiple developers including Janssen, Sanofi, GlaxoSmithKline, and biotech companies

* Takeda joint partnership with Biotest and partners

The New Normal

- Physical distancing continues
- Virtual social networking a requirement for everyone
- Antibody tests and COVID-19 testing required
 - Cluster testing essential
- Proper masks essential in public
- Telemedicine is new norm/ clinic visits for urgent
- **For myeloma:** treatment paradigm evolves
- Traveling will be carefully selected if truly needed (or required for sanity – i.e. vacation!)

Question: Can I get through this without developing COVID-19 infection?

- Yes – with care and good luck!
- Population infection level = 2-5%
- The key is to avoid becoming part of a local cluster!
- When local clusters are “contained,” the COVID-19 infection process subsides

Bottom line: The goal is to stay healthy until a vaccine is available

Question: What can we expect now?

- **April/May:** Continue “stay-at-home” -- further lockdown possible
- **June/ July:** A period of transitions (travel unlikely)
- **August/ September:** Some return to normalcy
- **Beyond September:** social/ travel restrictions unclear

Most likely your status re: COVID-19 will be required

- infected / recovered / antibody test shows immunity?
- not infected / tested negative

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Question: How can resilience help in the face of COVID-19 infections?

- **A** ccept that this is a key challenge!
- **B** egin to asses how COVID-19 impacts you and your family/friends/groups
- **C** lear action plans are required!

Bottom line: By taking time to focus and come up with the best solutions, resilience can be enhanced

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We will get through this together!

Myeloma has no borders



An apricot tree grows in Turkey



“Do Remember They
Can’t Cancel the Spring”
– David Hockney



Support messages in the sky above Los Angeles



Myeloma Patient Safety and the Coronavirus

As the COVID-19 respiratory virus spreads around the world, please know that the IMF is here for you.

People living with myeloma are at an increased risk. “Myeloma patients have compromised immune systems and are highly vulnerable to new infections,” says IMF Chairman Dr. Brian G.M. Durie.

“It is important to be proactive and guard against infection from unknown sources.”

On this page, you will find updated guidance to keep you safe. Featured are Dr. Durie’s blogs and FAQs, aimed specifically at myeloma patients, and links to the best sources of COVID-19 news.

There is currently no vaccine against COVID-19, so it is important for myeloma patients and their families to minimize their risk for contracting the virus. Practices to minimize your risk include:

<https://www.myeloma.org/covid19-myeloma-patients>

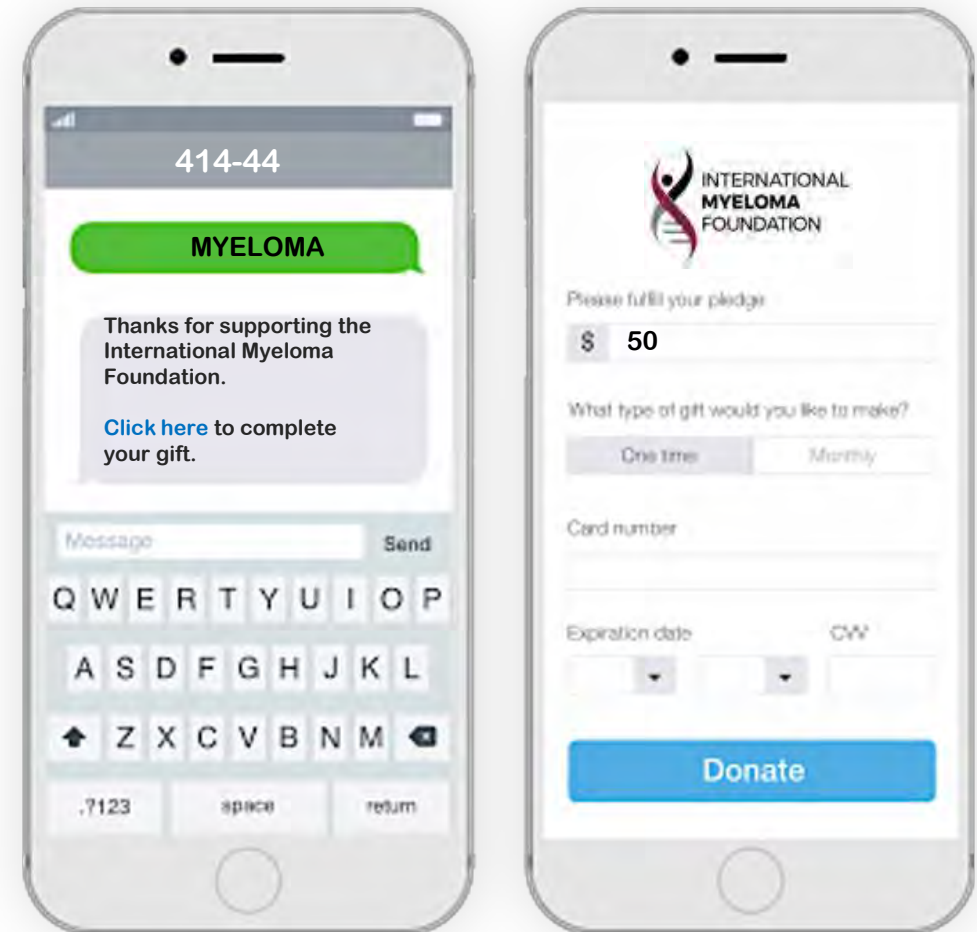
Text to Give: Mobile Cause

MAKE A DONATION FROM YOUR SMARTPHONE

Step 1 Send a new text message to **41444**

Step 2 Text **MYELOMA**

Step 3 Click the link in the reply message to make a donation



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