



Daratumumab subcutaneous, first approved treatment for newly diagnosed AL amyloidosis in Europe

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The European Commission (EC) has granted marketing authorisation for the expanded use of daratumumab (Darzalex®) subcutaneous (SC) formulation in two new indications. The first authorisation of these new indications is for the use of daratumumab SC in combination with bortezomib, cyclophosphamide and dexamethasone (D-VCd) for the treatment of adults with newly diagnosed systemic light chain (AL) amyloidosis. This approval makes this daratumumab-based regimen the first approved therapy for AL amyloidosis in Europe.

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This treatment was [the first treatment approved by Food and Drug Administration \(FDA\)](#) through accelerated approval for the treatment of adult patients with newly diagnosed light chain (AL) amyloidosis in January 2021.

*“We are delighted about the European approval of daratumumab for AL amyloidosis. This is the first approved treatment for a group of patients with limited specific treatment options. Whilst this is an important step for European patients, there is still a lot of work to do to ensure that every AL amyloidosis patient that needs daratumumab can access it”, says **Ananda Plate, CEO of Myeloma Patients Europe (MPE)**.*

The European approval for the AL amyloidosis indication is based on positive results from the Phase 3 ANDROMEDA study, recently presented at the 2021 American Society of Clinical Oncology (ASCO) Annual Meeting and at the 26th European Haematology Association (EHA) Congress. The study evaluated D-VCd compared with VCd alone, a common treatment regimen used in adult patients with newly diagnosed AL amyloidosis. Patients receiving treatment with daratumumab experienced a significantly higher haematologic complete response rate (haemCR) compared to patients receiving VCd alone (59 percent vs. 19 percent). Furthermore, at 20.3

months median follow up, more patients achieved a very good partial response or better with D-VCd than VCd (79 percent vs 50 percent). Overall, D-VCd had a safety profile consistent with that previously observed for each of the agents alone.

“AL amyloidosis is a rare haematological disorder and can be incredibly challenging to diagnose as symptoms are often subtle and can mimic other conditions. This challenge is further compounded by limited treatment options,” said **Efstathios Kastritis, M.D., Professor of Clinical Therapeutics at the National and Kapodistrian University of Athens School of Medicine, Athens, Greece and ANDROMEDA study investigator.** *“The approval of daratumumab is therefore welcome news for patients and the medical community as the addition of daratumumab to VCd, which has until now been the standard-of-care regimen for treating AL amyloidosis, has been shown to induce deep responses in patients, not only inducing remission at a significantly greater rate than VCd alone, but also significantly improving cardiac and renal responses and delaying major organ deterioration.”*

New indication in myeloma

The second authorisation is for the use of daratumumab SC in combination with pomalidomide and dexamethasone (D-Pd) for the treatment of adults with myeloma who have received one prior therapy containing a proteasome inhibitor and lenalidomide and were lenalidomide refractory, or who have received at least two prior therapies that included lenalidomide and a proteasome inhibitor, and have demonstrated disease progression on or after the last therapy.

This approval is based on positive findings from the Phase 3 APOLLO study recently published in [The Lancet Oncology](#). An updated analysis of the study, featuring health-related quality of life data, was also [presented](#) at the American Society of Clinical Oncology (ASCO) Annual Meeting and the 26th European Hematology Association (EHA) Congress.