Faculty Panel Outline:

- Myeloma Case Study #1 Introduction presented by Krina K. Patel, MD, MSc
 The University of Texas MD Anderson Cancer Center
- Lymphoma Case Study #2 Introduction presented by Loretta J. Nastoupil,
 MD The University of Texas MD Anderson Cancer Center
- Bridging Therapy for CAR T cells and Role of Radiation: Chelsea C. Pinnix, MD, PhD – The University of Texas MD Anderson Cancer Center and Joanna C. Yang, MD, MPH – Washington University
- Outpatient Cellular Therapy: Yi Lin, MD, PhD – Mayo Clinic
- Infectious Complications:
 Tania Jain, MBBS Johns Hopkins Medicine
 Zainab Shahid, MD, FACP University of North Carolina at Chapel Hill
- Survivorship/QOL/ePRO: Surbhi Sidana, MD – Stanford University

With additional insight from Hans Lee, MD – *The University of Texas MD Anderson Cancer Center* and Tycel J. Phillips, MD – *University of Michigan Health*

Case 1: Primary refractory DLBCL

- A 72-year-old man with PMH of type 2 DM and CKD (GFR: 40 ml/min) was diagnosed with bulky stage IV DLBCL with positive cMYC translocation without BCL2 and BcL6.
- Treatment history:
 - **R-CHOP** x 4 → disease progression (kinetic failure)
 - R-ICE x 2 \rightarrow No response

His treating Oncologist calls you for referral and planning next stage. He lives 3 hours away from your center.

Case 2: Relapsed refractory MM

A 69-year-old woman with PMH of COPD and hypertension was diagnosed with stage III (R-ISS) IgG lambda MM with t(4;14).

- Treatment History:
 - VRD x 4 followed by Melph auto-SCT with VGPR 3 months post transplant.
 - Maintenance with Bortezomib every 2 weeks → Disease progression one year post auto-SCT
 - **Daratumumab plus Dex** x 3 cycles → No response
 - Elotuzumab, pomalidomide, and dexamethasone (EPd) → with transient response.
 - Enrolled in a **BCMA T cell redirector trial**: → VGPR x 8 months then progressed