

Pomalidomide for multiple myeloma previously treated with lenalidomide and bortezomib

Information for the public

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What has NICE said?

Pomalidomide (Imnovid), given with a low dose of dexamethasone, is recommended. It is a possible treatment for multiple myeloma in adults whose disease has got worse despite having 3 treatments, including both lenalidomide and bortezomib.

What does this mean for me?

If you have multiple myeloma, and your doctor thinks that pomalidomide is the right treatment, you should be able to have it on the NHS.

Pomalidomide should be available on the NHS within 3 months.

If you are not eligible for treatment as described above, you should be able to continue taking pomalidomide until you and your doctor decide it is the right time to stop.

The condition and the treatment

Multiple myeloma is a type of cancer that affects cells in the bone marrow. Symptoms can include bone pain, bone fractures, anaemia, loss of appetite, excessive bleeding after cuts or scrapes, and frequent infections.

Pomalidomide is a type of drug that alters the body's immune response. When given with a drug called dexamethasone, it helps to stop cancer cells growing.

[NHS Choices](#) may be a good place to find out more.

These organisations can give you advice and support:

- [Myeloma UK](#), 0131 557 3332
- [Bloodwise](#) (previously Leukaemia & Lymphoma Research), 0808 2080 888
- [Leukaemia CARE](#), 08088 010 444
- [Cancer Research UK Patient Information](#) (previously CancerHelp UK), 0808 800 4040
- [Macmillan](#), 0808 808 0000

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Accreditation

