

**“Should patients with high risk smoldering myeloma receive treatment?”**

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Chemoprevention is currently being explored for patients with high risk multiple myeloma. Unfortunately there is no standardized definition of what constitutes high risk disease and the concordance between centers in defining the entity is poor. Some of the laboratory definitions of high risk are not widely available. It is important that only high risk patients are exposed to the risks of chemotherapy so that patients not destined to develop multiple myeloma within two years are prevented from exposure to agents that will impact their quality of life. This is exemplified by the failed thalidomide trials that did not improve outcomes but caused permanent neurotoxicity in 83% of patients.

The one trial that purports to show a survival advantage has multiple design flaws and cannot be considered the last word on intervention for high risk smoldering myeloma. However the trial is important and hypothesis generating so that more trials can build on this knowledge and answer this critically important question.

In conclusion:

- Chemoprevention for the right population must continue to be explored
- We must accurately identify the population for whom not treating carries more risk than treating
- However doing this outside of trials and becoming standard practice is not borne out by the evidence