

THE USE OF METHYLCOBALAMIN IN THE ACCOMPANYING THERAPY OF MULTIPLE MYELOMA

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ABSTRACT

Multiple myeloma (MM) or plasma cell myeloma is a B-cell malignant tumor whose morphological substrate is plasma cells (PCs) that produce monoclonal immunoglobulin. Multiple myeloma is a malignant plasma cell tumor that produces monoclonal immunoglobulins that invade adjacent bone tissue and destroy it. Characteristic manifestations include lytic bone lesions causing pain and/or fractures, renal failure, hypercalcemia, anemia, and recurrent infections. Diagnosis usually requires detection of M-protein (sometimes present in urine rather than serum, but rarely absent entirely) and/or light chain proteinuria and excess plasma cells in the bone marrow. Specific treatment most often involves a combination of conventional chemotherapy, corticosteroids, and one or more new drugs such as proteasome inhibitors (e.g., bortezomib, carfilzomib, ixazomib), immunomodulatory drugs (e.g., lenalidomide, thalidomide, pomalidomide), or monoclonal antibodies (e.g., daratumumab, isatuximab, elotuzumab). It is also possible to prescribe melphalan in high doses, followed by transplantation of autologous peripheral blood stem cells.

KEYWORDS: *Conventional Chemotherapy, Corticosteroids, Hypercalcemia, Anemia, Monoclonal Immunoglobulins, Multiple Myeloma.*

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