MEDICINE INFORMATION

PVd (pomalidomide, bortezomib and dexamethasone)

A guide to the myeloma combination also called BPD, including capsule and injection days, pregnancy precautions and how to report nerve symptoms or signs of infection.

At a glance

Treatment	Pomalidomide + Bortezomib + Dexamethasone
When it may be used	For selected people with multiple myeloma after earlier treatment, including previous lenalidomide.
How it is given	You take pomalidomide capsules by mouth. Bortezomib is usually injected under the skin. Dexamethasone is usually taken by mouth.
Before you start	Ask for a calendar, clot and infection prevention advice, pregnancy precautions and the hospital's 24-hour number.

What this treatment is and how it works

Myeloma is a cancer of plasma cells, which normally make antibodies. Pomalidomide affects the immune system and how myeloma cells grow. Bortezomib blocks a system that breaks down proteins inside cells. Dexamethasone is a steroid that also helps treat myeloma.

When it may be used

PVd is a treatment for some people whose myeloma needs treatment again after an earlier course. In the European product information, this combination is indicated after at least one previous treatment that included lenalidomide. Your team will consider what you have already received, how it worked and whether you have nerve problems or other health conditions.

Before treatment

Tell your team about previous blood clots, stroke, heart or kidney disease, numbness, diabetes or past shingles. Bring a list of medicines and supplements. You usually have blood tests for blood counts and organ function. Ask whether you need antiviral treatment to prevent shingles and which medicine can help reduce your risk of a blood clot.

Pomalidomide can seriously harm a developing baby. You may need pregnancy tests and specific precautions before the first capsule. Ask your team for the pregnancy prevention instructions for you and your partner.

How treatment is given

You take pomalidomide capsules on the days in your calendar, with planned days off. Swallow them whole and follow the pharmacist’s advice on safe handling and storage. Bortezomib is often given as an injection under the skin. Some plans have more injections in the first cycles. Dexamethasone may be given at the unit or taken at home. Check which days you have each medicine, as the schedules can differ.

If you miss a capsule or vomit after a dose, check your pack instructions or call the unit before taking more. If a visit changes, ask whether any at-home doses should move as well. Tell staff about rash, dizziness, breathing trouble or swelling during a treatment visit.

Tests and monitoring during treatment

Blood counts can fall, especially early in treatment. Keep the tests your hospital arranges even when you feel well. The team also checks kidney and liver function and follows blood or urine markers of myeloma. Tell the team about tingling, burning pain or numbness and how it affects your walking or grip. Bortezomib can affect nerves and may need adjustment.

Side effects

Common side effects

- **Low blood counts.** This can make infections, bleeding or tiredness more likely. Report fever, shaking chills or unusual bruising.
- **Tingling, numbness or pain.** Tell the team early if it affects your hands or feet, balance or sleep.
- **Constipation, diarrhoea or nausea.** Ask which medicines are suitable and report ongoing symptoms or difficulty drinking.
- **Tiredness and sleep or mood changes.** Dexamethasone can disturb sleep or raise blood sugar. Discuss a monitoring plan if you have diabetes.
- **Injection site changes.** Report pain or redness that is increasing or does not settle.

Less common and serious side effects

Pomalidomide can increase the risk of clots. Tell your team if one leg becomes swollen, painful or warm. Sudden chest pain or difficulty breathing needs emergency care. A painful rash or blisters can be shingles. A rash with widespread blistering, peeling, fever or sores in the mouth needs urgent assessment.

When to seek urgent help

Call your hospital's 24-hour cancer care number straight away for fever, shaking chills, sudden illness, unexplained bleeding, a painful swollen leg, a blistering rash, new breathlessness or difficulty drinking. Follow your hospital's temperature instructions. If you have no written threshold, call at 37.5°C (99.5°F) or above, or below 36°C (96.8°F). Call if you feel very unwell even with a normal temperature.

Seek emergency care for sudden or severe breathlessness, chest pain, collapse, stroke symptoms, facial or throat swelling, or bleeding that will not stop. Tell staff you are receiving pomalidomide, bortezomib and dexamethasone.

Practical advice for this treatment

Keep track of capsules, injections and steroid days

Ask the pharmacist to mark pomalidomide treatment days and breaks, bortezomib appointments and dexamethasone doses. Check the instructions for any missed doses and pregnancy prevention requirements before your first cycle.

Check how the team will reduce clot and shingles risk

The team may prescribe clot prevention and antiviral tablets. Ask what each one does and when to stop or refill it. If you develop a painful blistered rash, call the unit promptly. A new painful swollen leg, chest pain or sudden breathlessness needs urgent assessment.

Notice changes in balance or sensation

Tell the team if walking, turning a key or using cutlery becomes difficult. Bortezomib can affect nerves and may also cause dizziness on standing. Ask about practical support if you have falls or cannot safely manage your usual activities.

Medicines, interactions and vaccinations

Have your cancer pharmacist check new prescriptions, over-the-counter medicines and supplements. Take your clot prevention and antiviral medicine as prescribed. Ask who to call if you miss a dose or have bleeding. Discuss vaccination timing with the team, especially for live vaccines.

Everyday life

Use one calendar for capsules, steroid doses, injections and blood tests. Take care with hot items or stairs if your hands or feet feel numb. Follow your team's advice about safe handling of capsules and return unused medicine to the pharmacy as instructed.

Pregnancy, fertility and breastfeeding

Follow the pomalidomide pregnancy prevention programme. Ask about pregnancy tests, contraception, partner precautions and how long each measure applies. Contact the team immediately if a pregnancy is possible during treatment. Discuss fertility and breastfeeding before starting.

After treatment

Ask which medicines continue, including any antiviral or clot prevention medicine, and when your blood tests and follow-up are due. Let your team know if numbness, bowel problems or fatigue persist.

Frequently asked questions

Is PVd the same as BPD?

Both names refer to pomalidomide, bortezomib and dexamethasone. Check which name and schedule your hospital uses.

Why is there a break from pomalidomide?

Planned breaks are part of the cycle. Follow your calendar and check the date for restarting.

What if I miss a capsule?

Follow the instructions for your product or call the pharmacist. Tell them when it was due.

Can I open a capsule?

Ask the pharmacist if you have difficulty swallowing. Pomalidomide capsules are meant to be swallowed whole.

Will the injection dates change?

They can change as treatment progresses. Check the new calendar at the start of each cycle.

Why do I need clot prevention?

This combination can raise clot risk. Your team will choose a medicine based on your bleeding and clotting risks.

Why are the pregnancy precautions so specific?

Pomalidomide can seriously harm a developing baby. Your team will explain which tests and precautions apply before, during and after treatment, including rules for men who take it. Ask for a written plan for this exact medicine before the first dose.

Does tingling mean I must stop treatment?

Tell your team promptly. It will assess the symptoms and advise whether a change is needed.

Can I have a shingles vaccine?

Ask the team which vaccine is suitable and when to have it. Keep taking prescribed antiviral medicine as instructed.

What if the steroid keeps me awake?

Tell your team and ask if the timing can change. Follow the schedule until it advises otherwise.

What if I bruise more easily?

Report new or unexplained bruising. It may be a sign that your platelets are low.

How do I know whether treatment is helping?

The team reviews myeloma blood or urine tests and how you feel. Ask when you will discuss the results.

Why might a dose be delayed?

Your blood counts, side effects or an infection may need assessment. Ask what to do with your at-home medicines.

Can I travel on days off?

Check your appointments and blood counts with your team and plan how you would get urgent help while away.

Individual medicine guides

- Pomalidomide
- Bortezomib
- Dexamethasone

Sources and further reading

Read this guide alongside your hospital's plan. Ask your pharmacist to confirm the exact product dispensed in India and follow the instructions for that product.

Summary of Product Characteristics (SmPC) and prescribing information

- Pomalidomide (Imnovid) - EU product page with SmPC
- Bortezomib (Velcade) - EU product page with SmPC
- Dexamethasone tablets - UK SmPC
- Dexamethasone injection - UK SmPC

Clinical protocols and other references

- eviQ PVd protocol for multiple myeloma
- OPTIMISMM trial of pomalidomide, bortezomib and dexamethasone

Additional sources

- Macmillan Cancer Support, BPD
- eviQ, PVd for multiple myeloma

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