WEBVTT

NOTE duration: "01:03:10.2400000"

NOTE language:en-us

NOTE Confidence: 0.84681994

 $00:00:00.000 \longrightarrow 00:00:02.779$ So the abstracts that are selected were

NOTE Confidence: 0.84681994

 $00:00:02.779 \longrightarrow 00:00:05.941$ chosen by the speakers because they are

NOTE Confidence: 0.84681994

 $00:00:05.941 \longrightarrow 00:00:09.269$ the most clinically relevant and they are

NOTE Confidence: 0.84681994

 $00:00:09.269 \dashrightarrow 00:00:12.153$ grouped in areas of clinical unmet need.

NOTE Confidence: 0.84681994

00:00:12.160 --> 00:00:15.303 Of course that doesn't mean that other

NOTE Confidence: 0.84681994

 $00:00:15.303 \longrightarrow 00:00:17.826$ abstracts that have been presented in

NOTE Confidence: 0.84681994

 $00{:}00{:}17.826 \dashrightarrow 00{:}00{:}21.230$ the meeting or are as good or important,

NOTE Confidence: 0.84681994

00:00:21.230 --> 00:00:24.158 but you have to choose basically for this

NOTE Confidence: 0.84681994

 $00:00:24.158 \longrightarrow 00:00:27.277$ type of sessions important to remember.

NOTE Confidence: 0.84681994

 $00:00:27.280 \longrightarrow 00:00:30.736$ Again, many of the ash presentations.

NOTE Confidence: 0.84681994

 $00:00:30.740 \longrightarrow 00:00:33.050$ Basically are focused on preliminary

NOTE Confidence: 0.84681994

 $00:00:33.050 \longrightarrow 00:00:35.813$ data and subsequently some of those

NOTE Confidence: 0.84681994

00:00:35.813 --> 00:00:37.703 results might be modified and

NOTE Confidence: 0.84681994

00:00:37.703 --> 00:00:40.269 they are still not peer reviewed,

 $00:00:40.270 \longrightarrow 00:00:45.466$ so this is important to keep up in mind as we

NOTE Confidence: 0.84681994

 $00:00:45.466 \longrightarrow 00:00:49.962$ think about the data that will be presented.

NOTE Confidence: 0.84681994

 $00{:}00{:}49.970 \dashrightarrow 00{:}00{:}52.147$ That there will be a recording of

NOTE Confidence: 0.84681994

 $00:00:52.147 \longrightarrow 00:00:54.209$ this session and all the sessions.

NOTE Confidence: 0.84681994

 $00{:}00{:}54.210 \dashrightarrow 00{:}00{:}56.744$ This will be available and accessible as

NOTE Confidence: 0.84681994

 $00:00:56.744 \longrightarrow 00:00:58.955$ in during material in addition to the

NOTE Confidence: 0.84681994

00:00:58.955 --> 00:01:01.710 slides and at the end of the entire series,

NOTE Confidence: 0.84681994

 $00:01:01.710 \longrightarrow 00:01:03.552$ the six sessions you'll be able

NOTE Confidence: 0.84681994

 $00{:}01{:}03.552 \dashrightarrow 00{:}01{:}05.290$ to claim your CME credit.

NOTE Confidence: 0.84681994

 $00:01:05.290 \longrightarrow 00:01:08.224$ For those of you who wants to claim it.

NOTE Confidence: 0.84681994

 $00:01:08.230 \longrightarrow 00:01:10.384$ After you answer a brief evaluation

NOTE Confidence: 0.84681994

 $00{:}01{:}10.384 \dashrightarrow 00{:}01{:}12.744$ and some feedback about how we can

NOTE Confidence: 0.84681994

 $00:01:12.744 \longrightarrow 00:01:14.746$ improve the format of of the series.

NOTE Confidence: 0.8310966

 $00{:}01{:}17.160 \dashrightarrow 00{:}01{:}19.115$ So today it's a pleasure

NOTE Confidence: 0.8310966

 $00:01:19.115 \longrightarrow 00:01:20.679$ to introduce the speakers.

00:01:20.680 --> 00:01:23.396 Sorry, there's a typo here is clearly

NOTE Confidence: 0.8310966

 $00:01:23.396 \longrightarrow 00:01:26.148$ this is not on my Lloyd update.

NOTE Confidence: 0.8310966

 $00{:}01{:}26.150 \dashrightarrow 00{:}01{:}28.110$ It's the pediatric leukemia updates.

NOTE Confidence: 0.8310966

 $00:01:28.110 \longrightarrow 00:01:31.568$ So Doctor but also full start by.

NOTE Confidence: 0.8310966

 $00:01:31.570 \longrightarrow 00:01:33.495$ Talking to us about major

NOTE Confidence: 0.8310966

00:01:33.495 --> 00:01:35.420 updates from the meeting about

NOTE Confidence: 0.8310966

 $00:01:35.494 \longrightarrow 00:01:37.558$ Accutane for blastic leukemia.

NOTE Confidence: 0.8310966

 $00:01:37.560 \longrightarrow 00:01:39.792$ Then Doctor Nina Kadan Lotic will

NOTE Confidence: 0.8310966

 $00{:}01{:}39.792 \dashrightarrow 00{:}01{:}42.976$ update us and I think some of the

NOTE Confidence: 0.8310966

00:01:42.976 --> 00:01:44.991 most important updates from the

NOTE Confidence: 0.8310966

 $00{:}01{:}44.991 \dashrightarrow 00{:}01{:}47.828$ ASH meeting on pediatric leukemias,

NOTE Confidence: 0.8310966

00:01:47.830 --> 00:01:49.542 including LL, of course,

NOTE Confidence: 0.8310966

 $00:01:49.542 \longrightarrow 00:01:52.110$ and then at the end, Dr.

NOTE Confidence: 0.8310966

00:01:52.110 --> 00:01:55.050 Nikita Shah will present to us or

NOTE Confidence: 0.8310966

 $00:01:55.050 \longrightarrow 00:01:58.244$ will moderate the Q&A session for any

NOTE Confidence: 0.8310966

 $00:01:58.244 \longrightarrow 00:02:01.020$ questions that will arise about the

 $00:02:01.020 \longrightarrow 00:02:03.974$ talks that will be presented our the.

NOTE Confidence: 0.8310966

00:02:03.980 --> 00:02:04.824 Abstractly presented,

NOTE Confidence: 0.8310966

 $00:02:04.824 \longrightarrow 00:02:07.356$ but also about any other additional

NOTE Confidence: 0.8310966

00:02:07.356 --> 00:02:09.480 questions about pediatric hematology,

NOTE Confidence: 0.8310966

 $00:02:09.480 \longrightarrow 00:02:12.056$ and in general so we look forward

NOTE Confidence: 0.8310966

 $00:02:12.056 \longrightarrow 00:02:14.970$ to a very exciting discussion,

NOTE Confidence: 0.8310966

 $00:02:14.970 \longrightarrow 00:02:18.099$ and I would like to start by

NOTE Confidence: 0.8310966

 $00:02:18.099 \longrightarrow 00:02:20.010$ introducing Doctor Nikolai Bodos.

NOTE Confidence: 0.8310966

00:02:20.010 --> 00:02:22.758 If our associate professor of medicine,

NOTE Confidence: 0.8310966

 $00:02:22.760 \longrightarrow 00:02:25.050$ here in the hematologist auction,

NOTE Confidence: 0.8310966

 $00:02:25.050 \longrightarrow 00:02:28.249$ who focuses on Accutane for blastic leukemia.

NOTE Confidence: 0.6509804

00:02:36.010 --> 00:02:37.229 Nicola, you're on mute.

NOTE Confidence: 0.77839005

 $00:02:43.690 \longrightarrow 00:02:47.670$ He would go so almost there next.

NOTE Confidence: 0.8890739

 $00{:}02{:}47.670 \dashrightarrow 00{:}02{:}51.132$ Let me see. Looking for

NOTE Confidence: 0.8890739

 $00:02:51.132 \longrightarrow 00:02:52.556$ my PowerPoint here ago.

00:02:55.790 --> 00:03:01.486 Right, and do you see a single screen?

NOTE Confidence: 0.84235924

 $00:03:01.490 \dashrightarrow 00:03:05.432$ Yep OK alright. So hold on one second let

NOTE Confidence: 0.84235924

 $00:03:05.432 \longrightarrow 00:03:09.763$ me just get to the beginning of all this.

NOTE Confidence: 0.84235924

 $00:03:09.770 \longrightarrow 00:03:11.730$ Not sure why this happened this way.

NOTE Confidence: 0.88896275

 $00:03:14.660 \longrightarrow 00:03:16.540$ So I would like to start

NOTE Confidence: 0.88896275

 $00:03:16.540 \longrightarrow 00:03:17.796$ from a brief introduction,

NOTE Confidence: 0.88896275

 $00:03:17.800 \longrightarrow 00:03:20.080$ so this are my disclosures.

NOTE Confidence: 0.88896275

 $00:03:20.080 \longrightarrow 00:03:22.666$ And we will be talking about

NOTE Confidence: 0.88896275

 $00{:}03{:}22.666 \to 00{:}03{:}23.959$ acute lymphoblastic leukemia,

NOTE Confidence: 0.88896275

 $00:03:23.960 \longrightarrow 00:03:27.600$ which is further abbreviated as a LL.

NOTE Confidence: 0.88896275

 $00:03:27.600 \longrightarrow 00:03:29.768$ This is still the disease of the young

NOTE Confidence: 0.88896275

00:03:29.768 --> 00:03:32.348 and I represent adult hematology here,

NOTE Confidence: 0.88896275

 $00:03:32.350 \longrightarrow 00:03:34.702$ so Nina will be talking to what's happening

NOTE Confidence: 0.88896275

 $00:03:34.702 \longrightarrow 00:03:37.088$ in this field in pediatric hematology.

NOTE Confidence: 0.88896275

 $00:03:37.090 \longrightarrow 00:03:39.434$ And we certainly learned a lot over the

NOTE Confidence: 0.88896275

00:03:39.434 --> 00:03:41.837 last years from our pediatric colleagues,

00:03:41.840 --> 00:03:44.344 so this shows you that about 6000 patients

NOTE Confidence: 0.88896275

 $00{:}03{:}44.344 \dashrightarrow 00{:}03{:}46.108$ are diagnosed with a cute lymphoblastic

NOTE Confidence: 0.88896275

00:03:46.108 --> 00:03:48.614 leukemia per year in the United States,

NOTE Confidence: 0.88896275

00:03:48.620 --> 00:03:50.310 and only about 2000 of

NOTE Confidence: 0.88896275

00:03:50.310 --> 00:03:51.662 them are actually adults.

NOTE Confidence: 0.88896275

 $00:03:51.670 \longrightarrow 00:03:54.374$ Median age of diagnosis, as you can see,

NOTE Confidence: 0.88896275

 $00:03:54.380 \longrightarrow 00:03:56.690$ is around 9 years old and about

NOTE Confidence: 0.88896275

 $00:03:56.690 \longrightarrow 00:04:00.198$ 1500 deaths per year, most of them.

NOTE Confidence: 0.88896275

 $00:04:00.198 \longrightarrow 00:04:01.590$ Are adults.

NOTE Confidence: 0.88896275

 $00:04:01.590 \longrightarrow 00:04:03.365$ So these survival remains very

NOTE Confidence: 0.88896275

 $00:04:03.365 \longrightarrow 00:04:04.785$ different between pediatric LL

NOTE Confidence: 0.88896275

00:04:04.785 --> 00:04:06.408 patients and adult male patients,

NOTE Confidence: 0.88896275

 $00{:}04{:}06.410 \dashrightarrow 00{:}04{:}09.178$ and you can see 5 year old survival

NOTE Confidence: 0.88896275

 $00:04:09.178 \longrightarrow 00:04:11.612$ is about 90% and children and

NOTE Confidence: 0.88896275

 $00:04:11.612 \longrightarrow 00:04:14.456$ still half of that in adults.

 $00:04:14.460 \longrightarrow 00:04:17.280$ So we're excited to have approvals

NOTE Confidence: 0.88896275

 $00:04:17.280 \longrightarrow 00:04:19.160$ for newbs CLL therapies.

NOTE Confidence: 0.88896275

 $00{:}04{:}19.160 \dashrightarrow 00{:}04{:}21.980$ You can call them immuno the rapies.

NOTE Confidence: 0.88896275

 $00:04:21.980 \longrightarrow 00:04:23.860$ This includes approval of

NOTE Confidence: 0.88896275

 $00:04:23.860 \longrightarrow 00:04:26.210$ Blinatumomab in 2017 by FDA.

NOTE Confidence: 0.88896275

00:04:26.210 --> 00:04:28.802 It's a bispecific T cell engager

NOTE Confidence: 0.88896275

 $00{:}04{:}28.802 \dashrightarrow 00{:}04{:}31.667$ attacking CD 19 positive B cells

NOTE Confidence: 0.88896275

 $00:04:31.667 \longrightarrow 00:04:33.257$ including the lymphoblasts.

NOTE Confidence: 0.88896275

 $00{:}04{:}33.260 \dashrightarrow 00{:}04{:}37.020$ Also in 2017 there was an approval notice

NOTE Confidence: 0.88896275

 $00:04:37.020 \longrightarrow 00:04:39.838$ amalgamation which is antibody drag Queen.

NOTE Confidence: 0.88896275

 $00{:}04{:}39.840 \dashrightarrow 00{:}04{:}42.990$ You get attacking CD 22 on again

NOTE Confidence: 0.88896275

 $00:04:42.990 \longrightarrow 00:04:46.490$ B cells and finally approval of.

NOTE Confidence: 0.88896275

00:04:46.490 --> 00:04:48.630 It is a jungle occlusal.

NOTE Confidence: 0.88896275

00:04:48.630 --> 00:04:51.283 The car T cell therapy for younger

NOTE Confidence: 0.88896275

 $00:04:51.283 \longrightarrow 00:04:53.749$ patients with relapsed refractory disease.

NOTE Confidence: 0.88896275

 $00{:}04{:}53.750 --> 00{:}04{:}54.177 \ \mathrm{Again},$

 $00:04:54.177 \longrightarrow 00:04:57.166$ attacking CD 19 cells on view lymphoblasts.

NOTE Confidence: 0.88896275

 $00:04:57.170 \longrightarrow 00:04:59.528$ This is for patients who are

NOTE Confidence: 0.88896275

00:04:59.528 --> 00:05:01.860 younger than 26 or younger,

NOTE Confidence: 0.88896275

 $00:05:01.860 \longrightarrow 00:05:04.849$ so the mechanism of action is bluna.

NOTE Confidence: 0.88896275

 $00:05:04.850 \longrightarrow 00:05:07.839$ Tumors represent on this slide is bite.

NOTE Confidence: 0.88896275

00:05:07.840 --> 00:05:09.532 Bispecific T cell engager,

NOTE Confidence: 0.88896275

 $00:05:09.532 \longrightarrow 00:05:11.224$ which attaches cytotoxic T

NOTE Confidence: 0.88896275

 $00:05:11.224 \longrightarrow 00:05:12.959$ cells to tumor cells.

NOTE Confidence: 0.88896275

 $00:05:12.960 \longrightarrow 00:05:16.464$ Through a CD 19 and by means of

NOTE Confidence: 0.88896275

 $00{:}05{:}16.464 \dashrightarrow 00{:}05{:}18.739$ this attachment increases the.

NOTE Confidence: 0.88896275

00:05:18.740 --> 00:05:21.218 A pop ptosis of this tumor cells?

NOTE Confidence: 0.88896275

 $00:05:21.220 \longrightarrow 00:05:23.831$ So the studies which put this on

NOTE Confidence: 0.88896275

 $00{:}05{:}23.831 \dashrightarrow 00{:}05{:}26.807$ the map and make it available to

NOTE Confidence: 0.88896275

 $00:05:26.807 \longrightarrow 00:05:29.453$ us are tower phase three study,

NOTE Confidence: 0.88896275

 $00:05:29.460 \longrightarrow 00:05:31.488$ which looked at Glenna to mob

 $00:05:31.488 \longrightarrow 00:05:32.840$ in relapsed refractory disease

NOTE Confidence: 0.88896275

 $00:05:32.902 \longrightarrow 00:05:34.819$ against conventional chemotherapy.

NOTE Confidence: 0.88896275

 $00:05:34.820 \longrightarrow 00:05:36.880$ And as you can see,

NOTE Confidence: 0.88896275

 $00:05:36.880 \longrightarrow 00:05:38.940$ there was a survival difference

NOTE Confidence: 0.88896275

 $00:05:38.940 \longrightarrow 00:05:41.000$ of 7.7 versus four months,

NOTE Confidence: 0.88896275

 $00:05:41.000 \longrightarrow 00:05:42.644$ which was statistically significant.

NOTE Confidence: 0.88896275

 $00:05:42.644 \longrightarrow 00:05:44.288$ Response rate was 44%,

NOTE Confidence: 0.88896275

 $00:05:44.290 \longrightarrow 00:05:46.350$ with 76% achieving mean negative,

NOTE Confidence: 0.88896275

 $00:05:46.350 \longrightarrow 00:05:47.562$ minimal residual disease.

NOTE Confidence: 0.88896275

 $00:05:47.562 \longrightarrow 00:05:49.986$ So this is all control study

NOTE Confidence: 0.88896275

 $00{:}05{:}49.986 \to 00{:}05{:}51.898$ also blinatumomab it's an.

NOTE Confidence: 0.88896275

00:05:51.900 --> 00:05:54.210 It's a phase two study single arm

NOTE Confidence: 0.88896275

00:05:54.210 --> 00:05:56.928 looking at BLT amount for Peach paused,

NOTE Confidence: 0.88896275

 $00:05:56.930 \longrightarrow 00:05:58.970$ available patients and again you can

NOTE Confidence: 0.88896275

 $00:05:58.970 \longrightarrow 00:06:01.517$ see that the survival here for this

NOTE Confidence: 0.88896275

 $00:06:01.517 \longrightarrow 00:06:03.387$ patients with relapsed refractory pH.

 $00:06:03.390 \longrightarrow 00:06:05.959$ Posted bail is about 7.1 months with

NOTE Confidence: 0.88896275

 $00:06:05.959 \longrightarrow 00:06:08.357$ response rate of 36% among those patients.

NOTE Confidence: 0.88896275

 $00:06:08.357 \longrightarrow 00:06:10.730$ So the drug is approved for both

NOTE Confidence: 0.88896275

00:06:10.796 --> 00:06:12.176 relapse refractory pH positive

NOTE Confidence: 0.88896275

 $00{:}06{:}12.176 \dashrightarrow 00{:}06{:}14.880$ and pH negative B cell L patients.

NOTE Confidence: 0.88896275

 $00{:}06{:}14.880 \dashrightarrow 00{:}06{:}17.600$ The next drug is in its mother's advice

NOTE Confidence: 0.88896275

00:06:17.600 --> 00:06:20.379 and its antibody drag Queen you get.

NOTE Confidence: 0.88896275

 $00{:}06{:}20.380 \dashrightarrow 00{:}06{:}22.852$ Which brings Felicia my son to

NOTE Confidence: 0.88896275

 $00{:}06{:}22.852 --> 00{:}06{:}25.410$ the B cell positive for CD 22.

NOTE Confidence: 0.88896275

 $00:06:25.410 \longrightarrow 00:06:26.302$ After internalization,

NOTE Confidence: 0.88896275

 $00{:}06{:}26.302 \dashrightarrow 00{:}06{:}29.424$ the drug is released inside the cell

NOTE Confidence: 0.88896275

 $00:06:29.424 \longrightarrow 00:06:32.427$ and code goes to the nucleus to cause

NOTE Confidence: 0.88896275

 $00:06:32.427 \longrightarrow 00:06:34.697$ cause DNA damage in a pop ptosis.

NOTE Confidence: 0.88896275

 $00:06:34.700 \longrightarrow 00:06:37.059$ Some of the drugs you can see

NOTE Confidence: 0.88896275

 $00:06:37.059 \longrightarrow 00:06:38.070$ can be flexed

00:06:38.151 --> 00:06:40.421 and circulating blood causing the

NOTE Confidence: 0.78378654

00:06:40.421 --> 00:06:43.354 main side effect of this medication

NOTE Confidence: 0.78378654

 $00:06:43.354 \longrightarrow 00:06:46.229$ in occlusive disease and deliver.

NOTE Confidence: 0.78378654

 $00:06:46.230 \longrightarrow 00:06:48.862$ So this study we as a Cancer Center

NOTE Confidence: 0.78378654

 $00:06:48.862 \longrightarrow 00:06:50.829$ participated in and contributed patients

NOTE Confidence: 0.78378654

00:06:50.829 --> 00:06:53.307 to innovate phase three study looked

NOTE Confidence: 0.78378654

 $00:06:53.307 \longrightarrow 00:06:56.142$ at the data some up again and relapse

NOTE Confidence: 0.78378654

 $00:06:56.142 \longrightarrow 00:06:58.245$ refractory B cell L patients including

NOTE Confidence: 0.78378654

 $00{:}06{:}58.245 \dashrightarrow 00{:}06{:}59.705$ Peach posed accomplish negative

NOTE Confidence: 0.78378654

 $00:06:59.705 \longrightarrow 00:07:01.564$ and showed improved survival when

NOTE Confidence: 0.78378654

 $00{:}07{:}01.564 \dashrightarrow 00{:}07{:}03.339$ compared to standard the rapy group.

NOTE Confidence: 0.78378654

 $00:07:03.340 \longrightarrow 00:07:06.070$ So the median overall survival was 7.7

NOTE Confidence: 0.78378654

 $00:07:06.070 \longrightarrow 00:07:08.624$ versus 6.7 months and response rate was

NOTE Confidence: 0.78378654

 $00:07:08.624 \longrightarrow 00:07:11.708$ kind of double of what we see in Blender.

NOTE Confidence: 0.78378654

00:07:11.710 --> 00:07:13.924 Two map studies about 80% again

NOTE Confidence: 0.78378654

 $00:07:13.924 \longrightarrow 00:07:16.288$ with most of the patients 17%.

00:07:16.290 --> 00:07:17.928 Accomplishing negative minimal

NOTE Confidence: 0.78378654

 $00:07:17.928 \longrightarrow 00:07:19.566$ residual disease status.

NOTE Confidence: 0.78378654

00:07:19.570 --> 00:07:23.946 So today I'm going to talk about four

NOTE Confidence: 0.78378654

 $00:07:23.946 \longrightarrow 00:07:27.620$ studies and basically all of them.

NOTE Confidence: 0.78378654

00:07:27.620 --> 00:07:29.640 Are about adult patients with

NOTE Confidence: 0.78378654

 $00:07:29.640 \longrightarrow 00:07:31.256$ the introduction of drugs,

NOTE Confidence: 0.78378654

00:07:31.260 --> 00:07:34.200 which I used in relapse refractory setting

NOTE Confidence: 0.78378654

 $00:07:34.200 \dashrightarrow 00:07:37.318$ in the frontline therapy for some of them.

NOTE Confidence: 0.78378654

 $00:07:37.320 \longrightarrow 00:07:40.752$ So we are trying to capitalize on the

NOTE Confidence: 0.78378654

 $00:07:40.752 \longrightarrow 00:07:42.748$ accomplishment and approval of this

NOTE Confidence: 0.78378654

 $00{:}07{:}42.748 \dashrightarrow 00{:}07{:}45.712$ drugs and try to move them up front

NOTE Confidence: 0.78378654

 $00:07:45.712 \longrightarrow 00:07:48.610$ to get our patients to have better

NOTE Confidence: 0.78378654

 $00{:}07{:}48.610 \dashrightarrow 00{:}07{:}50.264$ responses and ultimately survival.

NOTE Confidence: 0.78378654

 $00{:}07{:}50.264 \dashrightarrow 00{:}07{:}52.736$ So the studies are grouped based

NOTE Confidence: 0.78378654

00:07:52.736 --> 00:07:55.282 on our approach to management of

 $00:07:55.282 \longrightarrow 00:07:57.754$ these patients and refers to wall.

NOTE Confidence: 0.78378654

00:07:57.760 --> 00:08:00.190 Look at the patient age and

NOTE Confidence: 0.78378654

 $00:08:00.190 \longrightarrow 00:08:01.810$ then Peach chromosome status,

NOTE Confidence: 0.78378654

 $00:08:01.810 \longrightarrow 00:08:03.618$ pH positive and pH.

NOTE Confidence: 0.78378654

 $00:08:03.618 \longrightarrow 00:08:05.878$ Negative patients are treated quite

NOTE Confidence: 0.78378654

 $00:08:05.878 \longrightarrow 00:08:07.480$ differently as you will see.

NOTE Confidence: 0.78378654

 $00:08:07.480 \longrightarrow 00:08:10.824$ So the first study is from MD Anderson

NOTE Confidence: 0.78378654

00:08:10.824 --> 00:08:14.013 Cancer Center and I would like to thank

NOTE Confidence: 0.78378654

00:08:14.013 --> 00:08:16.813 all of the presenting authors who gave

NOTE Confidence: 0.78378654

00:08:16.813 --> 00:08:20.035 me their slides to share with you today.

NOTE Confidence: 0.78378654

 $00:08:20.035 \longrightarrow 00:08:22.870$ So the first study is about pH,

NOTE Confidence: 0.78378654

 $00:08:22.870 \longrightarrow 00:08:25.630$ negative B cell L adults who were treated

NOTE Confidence: 0.78378654

 $00:08:25.630 \longrightarrow 00:08:28.508$ with Hyper Civitan sequential blinatumomab.

NOTE Confidence: 0.78378654

 $00{:}08{:}28.510 \to 00{:}08{:}30.328$ And again, the speech negative patients.

NOTE Confidence: 0.78378654

 $00:08:30.330 \longrightarrow 00:08:32.778$ So let's have a look at the results of

NOTE Confidence: 0.78378654

 $00:08:32.778 \longrightarrow 00:08:35.195$ this phase two study from MD Anderson.

 $00:08:35.200 \longrightarrow 00:08:37.216$ So the primary endpoint of the study was

NOTE Confidence: 0.78378654

 $00{:}08{:}37.216 \dashrightarrow 00{:}08{:}39.150$ relapse free survival secondary endpoints.

NOTE Confidence: 0.78378654

 $00:08:39.150 \longrightarrow 00:08:41.530$ You can look at here including overall

NOTE Confidence: 0.78378654

 $00:08:41.530 \longrightarrow 00:08:43.829$ response rate and MRD negativity rate.

NOTE Confidence: 0.78378654

 $00:08:43.830 \longrightarrow 00:08:45.690$ So this you are newly

NOTE Confidence: 0.78378654

00:08:45.690 --> 00:08:47.178 diagnosed patients with pH,

NOTE Confidence: 0.78378654

00:08:47.180 --> 00:08:48.188 negative B cell,

NOTE Confidence: 0.78378654

 $00{:}08{:}48.188 \dashrightarrow 00{:}08{:}50.204$ LL patients could receive one cycle

NOTE Confidence: 0.78378654

 $00:08:50.204 \longrightarrow 00:08:52.387$ induction chemotherapy prior to enrollment.

NOTE Confidence: 0.78378654

 $00:08:52.390 \longrightarrow 00:08:55.216$ Of course they have to get to MD Anderson

NOTE Confidence: 0.78378654

 $00:08:55.216 \longrightarrow 00:08:57.590$ from elsewhere where they treated.

NOTE Confidence: 0.78378654

 $00{:}08{:}57.590 \dashrightarrow 00{:}09{:}00.250$ So that's why they kind of broaden

NOTE Confidence: 0.78378654

 $00{:}09{:}00.250 \dashrightarrow 00{:}09{:}02.060$ the inclusion criteria this way.

NOTE Confidence: 0.78378654

 $00:09:02.060 \longrightarrow 00:09:02.431$ Interestingly,

NOTE Confidence: 0.78378654

 $00:09:02.431 \longrightarrow 00:09:05.028$ they included patients age 14 and older,

 $00:09:05.030 \longrightarrow 00:09:07.382$ so this is usually going in the

NOTE Confidence: 0.78378654

 $00:09:07.382 \longrightarrow 00:09:09.499$ territory where Nina treats patients,

NOTE Confidence: 0.78378654

 $00:09:09.500 \longrightarrow 00:09:12.068$ so they allowed enrollment of younger

NOTE Confidence: 0.78378654

 $00:09:12.068 \longrightarrow 00:09:14.870$ patients on the study this patients.

NOTE Confidence: 0.78378654

 $00:09:14.870 \longrightarrow 00:09:17.360$ Have to be eligible for intensive

NOTE Confidence: 0.78378654

 $00:09:17.360 \longrightarrow 00:09:17.775$ chemotherapy.

NOTE Confidence: 0.78378654

 $00:09:17.780 \longrightarrow 00:09:19.785$ Equal Performance status of three

NOTE Confidence: 0.78378654

 $00:09:19.785 \longrightarrow 00:09:21.790$ or less adequate organ function

NOTE Confidence: 0.78378654

 $00{:}09{:}21.858 \dashrightarrow 00{:}09{:}24.018$ and no significant CNS involvement.

NOTE Confidence: 0.78378654

00:09:24.020 --> 00:09:26.100 So CNS patients patient was

NOTE Confidence: 0.78378654

00:09:26.100 --> 00:09:28.180 seen as leukemia were excluded,

NOTE Confidence: 0.78378654

 $00:09:28.180 \longrightarrow 00:09:31.508$ so this is the schema of the study.

NOTE Confidence: 0.78378654

 $00:09:31.510 \longrightarrow 00:09:34.422$ You can see this is 4 cycles

NOTE Confidence: 0.78378654

 $00{:}09{:}34.422 \to 00{:}09{:}36.502$ of hyper seaward, part A&B,

NOTE Confidence: 0.78378654

00:09:36.502 --> 00:09:39.830 with addition of Rituxan two patients for CD,

NOTE Confidence: 0.78378654

 $00:09:39.830 \longrightarrow 00:09:43.036$ 20 positive or over to map another

 $00{:}09{:}43.036 \dashrightarrow 00{:}09{:}44.410$ CD 20 antibody.

NOTE Confidence: 0.78378654

 $00:09:44.410 \longrightarrow 00:09:46.993$ As well as use of prophylactic it

NOTE Confidence: 0.78378654

 $00:09:46.993 \longrightarrow 00:09:48.850$ chemotherapy sectarian metrics 8 so

NOTE Confidence: 0.78378654

00:09:48.850 --> 00:09:50.580 after finishing this intensive phase,

NOTE Confidence: 0.78378654

 $00{:}09{:}50.580 \dashrightarrow 00{:}09{:}52.596$ patients would go to blender two

NOTE Confidence: 0.78378654

00:09:52.596 --> 00:09:54.790 more phase where they would receive

NOTE Confidence: 0.78378654

00:09:54.790 --> 00:09:56.745 6 four cycles of blinatumomab,

NOTE Confidence: 0.74640524

 $00:09:56.750 \longrightarrow 00:09:58.570$ four weeks on continuous infusion,

NOTE Confidence: 0.74640524

 $00:09:58.570 \longrightarrow 00:10:00.146$ two weeks off and.

NOTE Confidence: 0.74640524

 $00{:}10{:}00.146 \dashrightarrow 00{:}10{:}02.116$ Go to maintenance phase which

NOTE Confidence: 0.74640524

 $00{:}10{:}02.116 \dashrightarrow 00{:}10{:}04.956$ is actually 18 as opposed to 36

NOTE Confidence: 0.74640524

 $00{:}10{:}04.956 \dashrightarrow 00{:}10{:}07.929$ months and the blender two map is

NOTE Confidence: 0.74640524

 $00:10:07.929 \dashrightarrow 00:10:10.557$ incorporated between the cycles of pomp,

NOTE Confidence: 0.74640524

00:10:10.560 --> 00:10:11.814 chemotherapy and additional

NOTE Confidence: 0.74640524

00:10:11.814 --> 00:10:13.486 3 cycles of blinatumomab.

 $00:10:13.490 \longrightarrow 00:10:15.580$ As you can see here.

NOTE Confidence: 0.74640524

 $00:10:15.580 \longrightarrow 00:10:18.394$ So these are the patients who were

NOTE Confidence: 0.74640524

 $00:10:18.394 \longrightarrow 00:10:21.006$ enrolled in the study, 38 patients.

NOTE Confidence: 0.74640524

 $00:10:21.006 \longrightarrow 00:10:24.350$ And as you can see the age difference.

NOTE Confidence: 0.74640524

 $00:10:24.350 \longrightarrow 00:10:27.694$ The H variance was between 17 and 59.

NOTE Confidence: 0.74640524

00:10:27.700 --> 00:10:30.997 The patients about 32% of patients had.

NOTE Confidence: 0.74640524

00:10:31.000 --> 00:10:33.160 Adverse karyotype the pH like

NOTE Confidence: 0.74640524

00:10:33.160 --> 00:10:35.321 positive patients were 19% as

NOTE Confidence: 0.74640524

00:10:35.321 --> 00:10:37.907 defined by presence of CRLF 21.

NOTE Confidence: 0.74640524

00:10:37.910 --> 00:10:39.206 Flow cytometry testing,

NOTE Confidence: 0.74640524

 $00:10:39.206 \longrightarrow 00:10:42.656$ and 27% of patients get TP 53 mutation.

NOTE Confidence: 0.74640524

00:10:42.660 --> 00:10:45.900 So this is one of the secondary points

NOTE Confidence: 0.74640524

 $00{:}10{:}45.900 \dashrightarrow 00{:}10{:}48.630$ response rates CR after induction was

NOTE Confidence: 0.74640524

 $00:10:48.630 \longrightarrow 00:10:52.170$ accomplished in 81% of patients and then yes,

NOTE Confidence: 0.74640524

 $00:10:52.170 \longrightarrow 00:10:54.762$ you know they preceded with Blender

NOTE Confidence: 0.74640524

 $00:10:54.762 \longrightarrow 00:10:58.691$ two Mob and at the end of 32 patients

 $00:10:58.691 \longrightarrow 00:11:00.806$ accomplished a CR and MRD,

NOTE Confidence: 0.74640524

 $00:11:00.810 \longrightarrow 00:11:02.136$ negativity was 71%.

NOTE Confidence: 0.74640524

 $00:11:02.136 \longrightarrow 00:11:04.762$ After induction and 97% at anytime

NOTE Confidence: 0.74640524

00:11:04.762 --> 00:11:06.040 during the study,

NOTE Confidence: 0.74640524

00:11:06.040 --> 00:11:08.890 early mortality was at 0.

NOTE Confidence: 0.74640524 00:11:08.890 --> 00:11:09.310 So. NOTE Confidence: 0.74640524

 $00:11:09.310 \longrightarrow 00:11:10.570$ I relapse free.

NOTE Confidence: 0.74640524

00:11:10.570 --> 00:11:13.697 Survival was not one of the endpoints

NOTE Confidence: 0.74640524

00:11:13.697 --> 00:11:17.090 of the study, and as you can see,

NOTE Confidence: 0.74640524

 $00:11:17.090 \longrightarrow 00:11:20.050$ relapse free survival at two years is 71%.

NOTE Confidence: 0.74640524

00:11:20.050 --> 00:11:21.196 At one year,

NOTE Confidence: 0.74640524

 $00:11:21.196 \longrightarrow 00:11:24.490 80\%$ overall survival was at two years of 80%,

NOTE Confidence: 0.74640524

 $00:11:24.490 \longrightarrow 00:11:26.938$ so it's pretty impressive numbers for

NOTE Confidence: 0.74640524

 $00{:}11{:}26.938 \dashrightarrow 00{:}11{:}29.298$ patients for a dults with B cell LL.

NOTE Confidence: 0.74640524

 $00:11:29.300 \longrightarrow 00:11:32.569$ Of course you know this particular group

00:11:32.569 --> 00:11:34.970 included younger patients 17 and older.

NOTE Confidence: 0.74640524

 $00{:}11{:}34.970 \dashrightarrow 00{:}11{:}37.376$ So this is comparing the results

NOTE Confidence: 0.74640524

00:11:37.376 --> 00:11:39.986 of current study in blue with

NOTE Confidence: 0.74640524

 $00:11:39.986 \longrightarrow 00:11:42.764$ another study done in the same

NOTE Confidence: 0.74640524

 $00:11:42.764 \longrightarrow 00:11:44.230$ institution earlier hyper.

NOTE Confidence: 0.74640524

00:11:44.230 --> 00:11:47.016 See what with over to Mumbai think

NOTE Confidence: 0.74640524

 $00:11:47.016 \longrightarrow 00:11:49.485$ 60 plus patient 69 patients and

NOTE Confidence: 0.74640524

00:11:49.485 --> 00:11:52.271 you can see that both studies show

NOTE Confidence: 0.74640524

 $00:11:52.352 \longrightarrow 00:11:54.820$ comperable to overall survival,

NOTE Confidence: 0.74640524

00:11:54.820 --> 00:11:57.214 but the plateau of no mortality

NOTE Confidence: 0.74640524

 $00{:}11{:}57.214 \dashrightarrow 00{:}11{:}59.885$ after two years for the current

NOTE Confidence: 0.74640524

00:11:59.885 --> 00:12:01.869 study is very encouraging.

NOTE Confidence: 0.74640524

 $00:12:01.870 \longrightarrow 00:12:04.140$ So the side effects specifically

NOTE Confidence: 0.74640524

 $00:12:04.140 \longrightarrow 00:12:05.956$ adverse events of interest.

NOTE Confidence: 0.74640524

 $00:12:05.960 \longrightarrow 00:12:07.910$ Related to Blender two map

NOTE Confidence: 0.74640524

00:12:07.910 --> 00:12:09.470 highlighted in yellow side,

 $00:12:09.470 \longrightarrow 00:12:12.851$ The kind Release syndrome Grade 3 four

NOTE Confidence: 0.74640524

 $00{:}12{:}12.851 \dashrightarrow 00{:}12{:}16.170$ was only seen in one patient and.

NOTE Confidence: 0.74640524

00:12:16.170 --> 00:12:18.726 It in your logical amounts were

NOTE Confidence: 0.74640524

 $00:12:18.726 \longrightarrow 00:12:20.816$ seen in 13% of patients.

NOTE Confidence: 0.74640524

 $00:12:20.816 \longrightarrow 00:12:21.622$ One patient,

NOTE Confidence: 0.74640524

00:12:21.622 --> 00:12:24.710 discontinued blended home up due to toxicity.

NOTE Confidence: 0.74640524

00:12:24.710 --> 00:12:27.699 It was great to encephalopathy and dysphasia,

NOTE Confidence: 0.74640524

 $00:12:27.700 \longrightarrow 00:12:29.835$ so the conclusion of this

NOTE Confidence: 0.74640524

 $00:12:29.835 \longrightarrow 00:12:31.116$ presentation is here.

NOTE Confidence: 0.74640524

 $00:12:31.120 \longrightarrow 00:12:33.532$ Hyper Squad with Sequential

NOTE Confidence: 0.74640524

 $00:12:33.532 \longrightarrow 00:12:35.944$ Blinatumomab is highly effective.

NOTE Confidence: 0.74640524

 $00:12:35.950 \longrightarrow 00:12:38.242$ Frontline therapy for pH negative deal

NOTE Confidence: 0.74640524

00:12:38.242 --> 00:12:40.928 adults, MRD rate was 97% year old,

NOTE Confidence: 0.74640524

 $00:12:40.930 \longrightarrow 00:12:42.079$ survival was 80%.

NOTE Confidence: 0.74640524

 $00:12:42.079 \longrightarrow 00:12:44.760$ There are no relapses beyond two years.

00:12:44.760 --> 00:12:47.273 There was low rate of grade three

NOTE Confidence: 0.74640524

 $00{:}12{:}47.273 \dashrightarrow 00{:}12{:}49.139$ adverse events related to blinatum omab

NOTE Confidence: 0.74640524

 $00:12:49.139 \longrightarrow 00:12:51.652$ and at this time protocol is amended

NOTE Confidence: 0.74640524

 $00:12:51.652 \longrightarrow 00:12:54.327$ and now includes in autism observation.

NOTE Confidence: 0.74640524

00:12:54.330 --> 00:12:56.550 In addition to Blender tomorrow

NOTE Confidence: 0.74640524

 $00:12:56.550 \longrightarrow 00:12:58.770$ for frontline management of this

NOTE Confidence: 0.74640524

 $00:12:58.849 \longrightarrow 00:13:03.619$ group of patients. So the 2nd.

NOTE Confidence: 0.74640524

 $00:13:03.620 \longrightarrow 00:13:04.824$ Study or two studies.

NOTE Confidence: 0.74640524

 $00{:}13{:}04.824 \dashrightarrow 00{:}13{:}07.351$ I would like to talk about our about

NOTE Confidence: 0.74640524

 $00:13:07.351 \longrightarrow 00:13:08.981$ older adults and the definition

NOTE Confidence: 0.74640524

 $00:13:08.981 \longrightarrow 00:13:11.880$ of all the adults in BLL world is

NOTE Confidence: 0.74640524

 $00:13:11.880 \longrightarrow 00:13:13.360$ different in different places.

NOTE Confidence: 0.74640524

 $00:13:13.360 \longrightarrow 00:13:15.262$ The first study again from this

NOTE Confidence: 0.74640524

 $00{:}13{:}15.262 \dashrightarrow 00{:}13{:}17.060$ study is actually from Germany.

NOTE Confidence: 0.74640524

 $00:13:17.060 \longrightarrow 00:13:19.316$ German leukemia group and you know

NOTE Confidence: 0.74640524

 $00{:}13{:}19.316 \dashrightarrow 00{:}13{:}21.467$ their definition of older a dult was

 $00:13:21.467 \longrightarrow 00:13:23.771$ 55 and older and then there will be.

NOTE Confidence: 0.74640524

 $00{:}13{:}23.780 \dashrightarrow 00{:}13{:}25.886$ I will present results of meaning

NOTE Confidence: 0.74640524

 $00:13:25.886 \longrightarrow 00:13:27.290$ high perceived within autism

NOTE Confidence: 0.80523366

00:13:27.348 --> 00:13:29.160 up with or without Minotaur map.

NOTE Confidence: 0.80523366

 $00:13:29.160 \longrightarrow 00:13:31.840$ Here the definition is age 60 and older.

NOTE Confidence: 0.80523366

00:13:31.840 --> 00:13:34.199 So let's start from the German study.

NOTE Confidence: 0.80523366

 $00:13:34.200 \longrightarrow 00:13:36.672$ So this is. Initial one phase two trial

NOTE Confidence: 0.80523366

 $00{:}13{:}36.672 \dashrightarrow 00{:}13{:}38.516$ which looked at induction treatment

NOTE Confidence: 0.80523366

 $00{:}13{:}38.516 \dashrightarrow 00{:}13{:}40.838$ with three cycles of inotuzumab instead

NOTE Confidence: 0.80523366

 $00{:}13{:}40.838 \to 00{:}13{:}43.129$ of regular chemotherapy induction,

NOTE Confidence: 0.80523366

 $00:13:43.130 \longrightarrow 00:13:45.410$ followed by standard to consolidate if

NOTE Confidence: 0.80523366

00:13:45.410 --> 00:13:47.320 approach from Journal Leukemia Group,

NOTE Confidence: 0.80523366

 $00:13:47.320 \longrightarrow 00:13:50.370$ which as you can see, is reasonably intense.

NOTE Confidence: 0.80523366

 $00:13:50.370 \longrightarrow 00:13:51.890$ Includes a asparaginase administration.

NOTE Confidence: 0.80523366

 $00:13:51.890 \longrightarrow 00:13:53.800$ It looks like 3 times.

 $00:13:53.800 \longrightarrow 00:13:56.230$ Also for CD 20 positive patients

NOTE Confidence: 0.80523366

 $00:13:56.230 \longrightarrow 00:13:58.370$ there is rituximab and so on.

NOTE Confidence: 0.80523366

 $00:13:58.370 \longrightarrow 00:14:00.280$ So this consolidation requires admission.

NOTE Confidence: 0.80523366

 $00:14:00.280 \longrightarrow 00:14:02.872$ And then there is about you know half

NOTE Confidence: 0.80523366

 $00:14:02.872 \longrightarrow 00:14:05.759$ of 6 MP methotrexate maintenance.

NOTE Confidence: 0.80523366

 $00:14:05.760 \longrightarrow 00:14:09.320$ Uh, so. The results,

NOTE Confidence: 0.80523366

 $00{:}14{:}09.320 \dashrightarrow 00{:}14{:}11.140$ which were presented included

NOTE Confidence: 0.80523366

00:14:11.140 --> 00:14:12.505 mostly 31 patients,

NOTE Confidence: 0.80523366

 $00:14:12.510 \longrightarrow 00:14:15.192$ those who received at least one

NOTE Confidence: 0.80523366

00:14:15.192 --> 00:14:17.515 cycle Organism up induction and

NOTE Confidence: 0.80523366

 $00{:}14{:}17.515 \dashrightarrow 00{:}14{:}19.790$ could be assessed for remission.

NOTE Confidence: 0.80523366

 $00:14:19.790 \longrightarrow 00:14:22.495$ So the patient characteristics table

NOTE Confidence: 0.80523366

 $00:14:22.495 \longrightarrow 00:14:25.677$ shows that patients which were enrolled

NOTE Confidence: 0.80523366

 $00:14:25.677 \longrightarrow 00:14:28.837$ were between 56 and 80 years old and

NOTE Confidence: 0.80523366

 $00:14:28.837 \longrightarrow 00:14:32.198$ you can see that all of these patients

NOTE Confidence: 0.80523366

 $00{:}14{:}32.198 \dashrightarrow 00{:}14{:}34.494$ obviously had CD 22 expression.

00:14:34.494 --> 00:14:36.075 Different density of

NOTE Confidence: 0.80523366

 $00{:}14{:}36.075 \dashrightarrow 00{:}14{:}38.183$ expression is represented here.

NOTE Confidence: 0.80523366

00:14:38.190 --> 00:14:38.926 So, uh,

NOTE Confidence: 0.80523366

00:14:38.926 --> 00:14:41.134 the secondary point end point of

NOTE Confidence: 0.80523366

 $00:14:41.134 \longrightarrow 00:14:43.350$ the study was response rates,

NOTE Confidence: 0.80523366

 $00:14:43.350 \longrightarrow 00:14:46.614$ and you can see that out 31 patients

NOTE Confidence: 0.80523366

 $00:14:46.614 \longrightarrow 00:14:49.704$ they looked at 100% had response CRCR I.

NOTE Confidence: 0.80523366

 $00:14:49.704 \longrightarrow 00:14:52.520$ And now this actually, you know,

NOTE Confidence: 0.80523366

 $00:14:52.520 \longrightarrow 00:14:55.595$ for patients receive three cycles.

NOTE Confidence: 0.80523366

 $00:14:55.600 \longrightarrow 00:14:58.704$ 84% so some of them have their early

NOTE Confidence: 0.80523366

 $00:14:58.704 \longrightarrow 00:15:01.735$ relapses and there are no early deaths

NOTE Confidence: 0.80523366

 $00{:}15{:}01.735 \dashrightarrow 00{:}15{:}04.232$ and then MRD was accomplished in

NOTE Confidence: 0.80523366

 $00{:}15{:}04.232 \dashrightarrow 00{:}15{:}06.480$ 78% of patients with this strategy.

NOTE Confidence: 0.80523366

 $00{:}15{:}06.480 \dashrightarrow 00{:}15{:}08.495$ So there were some hae matological

NOTE Confidence: 0.80523366

 $00:15:08.495 \longrightarrow 00:15:09.704$ and molecular responses.

 $00:15:09.710 \longrightarrow 00:15:12.146$ As you can see total of three

NOTE Confidence: 0.80523366

 $00{:}15{:}12.146 \dashrightarrow 00{:}15{:}14.162$ and allogeneic stem transplant in

NOTE Confidence: 0.80523366

 $00:15:14.162 \longrightarrow 00:15:16.850$ remission was provided to three of

NOTE Confidence: 0.80523366

 $00:15:16.850 \longrightarrow 00:15:19.409$ those patients and one patient went

NOTE Confidence: 0.80523366

00:15:19.409 --> 00:15:21.797 to transplant after relapse so only

NOTE Confidence: 0.80523366

 $00{:}15{:}21.800 \dashrightarrow 00{:}15{:}23.408$ four patients were transplanted

NOTE Confidence: 0.80523366

 $00:15:23.408 \longrightarrow 00:15:25.956$ out of this 31. So this is.

NOTE Confidence: 0.80523366

00:15:25.956 --> 00:15:28.140 The primary endpoint is on the right

NOTE Confidence: 0.80523366

00:15:28.214 --> 00:15:30.296 event free survival at one year,

NOTE Confidence: 0.80523366

 $00:15:30.300 \longrightarrow 00:15:31.101$ so was 87%.

NOTE Confidence: 0.80523366

 $00{:}15{:}31.101 \dashrightarrow 00{:}15{:}32.970$ So for all the group of patients

NOTE Confidence: 0.80523366

 $00{:}15{:}33.034 \dashrightarrow 00{:}15{:}35.074$ is actually pretty good and then

NOTE Confidence: 0.80523366

 $00:15:35.074 \longrightarrow 00:15:37.013$ overall survival at one year was

NOTE Confidence: 0.80523366

 $00:15:37.013 \longrightarrow 00:15:38.601$ also 87% events were defined,

NOTE Confidence: 0.80523366

 $00:15:38.601 \longrightarrow 00:15:41.100$ it persisting one marrable us after two

NOTE Confidence: 0.80523366

 $00:15:41.166 \longrightarrow 00:15:43.670$ cycles went into some of relapse or death.

 $00:15:43.670 \longrightarrow 00:15:46.451$ So this is a side effects are in relation

NOTE Confidence: 0.80523366

 $00:15:46.451 \longrightarrow 00:15:49.159$ to inductions within a two zone map.

NOTE Confidence: 0.80523366

00:15:49.160 --> 00:15:50.996 As you can see after initial

NOTE Confidence: 0.80523366

 $00:15:50.996 \longrightarrow 00:15:52.930$ induction that are more cytopenias.

NOTE Confidence: 0.80523366

 $00:15:52.930 \longrightarrow 00:15:55.352$ But you know this kind of decreases

NOTE Confidence: 0.80523366

 $00:15:55.352 \longrightarrow 00:15:56.779$ overtime obviously and then

NOTE Confidence: 0.80523366

 $00:15:56.779 \longrightarrow 00:15:58.419$ the side effect of interest.

NOTE Confidence: 0.80523366

 $00:15:58.420 \longrightarrow 00:16:00.712$ Here adverse event of interest would

NOTE Confidence: 0.80523366

00:16:00.712 --> 00:16:02.606 be LFT abnormalities because we

NOTE Confidence: 0.80523366

 $00{:}16{:}02.606 \dashrightarrow 00{:}16{:}04.436$ inclusive disease is one of those

NOTE Confidence: 0.80523366

 $00{:}16{:}04.436 \dashrightarrow 00{:}16{:}07.062$ things we watch for and then some of

NOTE Confidence: 0.80523366

 $00:16:07.062 \longrightarrow 00:16:08.707$ treated patients and LFTS elevation

NOTE Confidence: 0.80523366

 $00{:}16{:}08.710 \dashrightarrow 00{:}16{:}10.768$ were not common and no patients

NOTE Confidence: 0.80523366

00:16:10.768 --> 00:16:12.140 had been occlusive disease.

NOTE Confidence: 0.80523366

 $00:16:12.140 \longrightarrow 00:16:13.460$ Of course only four.

00:16:13.460 --> 00:16:15.977 Patients out of city one went to

NOTE Confidence: 0.80523366

 $00{:}16{:}15.977 \dashrightarrow 00{:}16{:}17.829$ allogeneic stem cell transplant.

NOTE Confidence: 0.80523366

 $00:16:17.830 \longrightarrow 00:16:19.867$ The conclusion of the study in this

NOTE Confidence: 0.80523366

 $00:16:19.867 \longrightarrow 00:16:22.552$ map seems to be highly effective as

NOTE Confidence: 0.80523366

 $00:16:22.552 \longrightarrow 00:16:24.300$ monotherapy and using haematological

NOTE Confidence: 0.80523366

 $00:16:24.300 \longrightarrow 00:16:26.607$ remission in all patients with MRD

NOTE Confidence: 0.80523366

00:16:26.607 --> 00:16:28.692 accomplished in more than 70% of

NOTE Confidence: 0.80523366

 $00:16:28.692 \longrightarrow 00:16:30.140$ patients had acceptable toxicity.

NOTE Confidence: 0.80523366

 $00:16:30.140 \longrightarrow 00:16:32.548$ No early deaths observed.

NOTE Confidence: 0.80523366

00:16:32.548 --> 00:16:34.354 Novena occlusive disease.

NOTE Confidence: 0.80523366

 $00{:}16{:}34.360 \dashrightarrow 00{:}16{:}35.796$ Promising survival 80% overall

NOTE Confidence: 0.80523366

00:16:35.796 --> 00:16:37.591 survival benefit survival at one

NOTE Confidence: 0.80523366

 $00:16:37.591 \longrightarrow 00:16:39.758$ year and finally another man has a

NOTE Confidence: 0.80523366

 $00{:}16{:}39.758 \dashrightarrow 00{:}16{:}41.325$ great potential to become standard

NOTE Confidence: 0.80523366

00:16:41.325 --> 00:16:43.419 induction option in all the patients

NOTE Confidence: 0.80523366

00:16:43.419 --> 00:16:44.466 with newly diagnosed

00:16:44.470 --> 00:16:47.158 BLL. So we're not using this regiment at

NOTE Confidence: 0.7981414

00:16:47.158 --> 00:16:49.635 Yale, and I don't think it is frequently

NOTE Confidence: 0.7981414

 $00:16:49.635 \longrightarrow 00:16:52.558$ used in the United States, so we're kind

NOTE Confidence: 0.7981414

00:16:52.558 --> 00:16:54.574 of more interested in high perceived,

NOTE Confidence: 0.7981414

 $00:16:54.580 \longrightarrow 00:16:57.212$ which is of course the Backbone Regiment for

NOTE Confidence: 0.7981414

 $00{:}16{:}57.212 \dashrightarrow 00{:}16{:}59.639$ MD Anderson Cancer Center and many hyper.

NOTE Confidence: 0.7981414

 $00:16:59.640 \longrightarrow 00:17:01.590$ See what is something we used

NOTE Confidence: 0.7981414

 $00:17:01.590 \longrightarrow 00:17:03.340$ in some patients over years?

NOTE Confidence: 0.7981414

 $00:17:03.340 \longrightarrow 00:17:04.474$ Older patients with?

NOTE Confidence: 0.7981414

 $00{:}17{:}04.474 \dashrightarrow 00{:}17{:}07.900$ We sell LL as well as T cell LL.

NOTE Confidence: 0.7981414

 $00{:}17{:}07.900 \dashrightarrow 00{:}17{:}10.596$ So I'm going to share with you the

NOTE Confidence: 0.7981414

00:17:10.596 --> 00:17:13.678 results of this mini high perceived study,

NOTE Confidence: 0.7981414

 $00:17:13.680 \longrightarrow 00:17:16.200$ which added in a tumor band later

NOTE Confidence: 0.7981414

 $00:17:16.200 \longrightarrow 00:17:17.760$ one blinatumomab for management

NOTE Confidence: 0.7981414

 $00:17:17.760 \longrightarrow 00:17:20.220$ of all the patients with Vissel.

 $00:17:20.220 \longrightarrow 00:17:22.852$ So here, ages 60 or more before

NOTE Confidence: 0.7981414

 $00:17:22.852 \longrightarrow 00:17:24.840$ on status up to three.

NOTE Confidence: 0.7981414

 $00:17:24.840 \longrightarrow 00:17:26.632$ Adequate organ function ejection

NOTE Confidence: 0.7981414

 $00:17:26.632 \longrightarrow 00:17:29.320$ fraction should be more than 40%.

NOTE Confidence: 0.7981414

 $00:17:29.320 \longrightarrow 00:17:31.654$ So those reduced so-called meaning hyper

NOTE Confidence: 0.7981414

 $00:17:31.654 \longrightarrow 00:17:33.775$ see what consists of cyclophosphamide

NOTE Confidence: 0.7981414

 $00:17:33.775 \longrightarrow 00:17:35.684$ reduced by 50% dexamethasone,

NOTE Confidence: 0.7981414

 $00:17:35.684 \longrightarrow 00:17:37.380$ again reduced by 50%.

NOTE Confidence: 0.7981414

 $00{:}17{:}37.380 \dashrightarrow 00{:}17{:}39.924$ There is no under cycling metrics

NOTE Confidence: 0.7981414

 $00:17:39.924 \longrightarrow 00:17:41.620$ take high dose metrics,

NOTE Confidence: 0.7981414

 $00{:}17{:}41.620 \dashrightarrow 00{:}17{:}44.158$ a reduced by 75% anhydrous site,

NOTE Confidence: 0.7981414

 $00:17:44.160 \longrightarrow 00:17:45.435$ urban by 83%.

NOTE Confidence: 0.7981414

 $00:17:45.435 \longrightarrow 00:17:49.250$ So the inner tubes mob was added one day,

NOTE Confidence: 0.7981414

 $00:17:49.250 \longrightarrow 00:17:52.281$ three for the first 4 courses and

NOTE Confidence: 0.7981414

00:17:52.281 --> 00:17:55.330 rituximab was used as usual on D2 and

NOTE Confidence: 0.7981414

 $00:17:55.330 \longrightarrow 00:17:58.579$ eight with four CD 20 positive patients.

 $00:17:58.580 \longrightarrow 00:18:00.700$ Patients already also received it.

NOTE Confidence: 0.7981414

 $00{:}18{:}00.700 \dashrightarrow 00{:}18{:}01.576$ Chemotherapy prophylaxis.

NOTE Confidence: 0.7981414

 $00:18:01.576 \longrightarrow 00:18:05.080$ So this is the schema of the study.

NOTE Confidence: 0.7981414

 $00:18:05.080 \longrightarrow 00:18:07.840$ You can see that there are the eight

NOTE Confidence: 0.7981414

 $00:18:07.840 \longrightarrow 00:18:09.857$ cycles with it chemotherapy administered

NOTE Confidence: 0.7981414

 $00:18:09.857 \longrightarrow 00:18:13.860$ during the first 4 as well as in ministered.

NOTE Confidence: 0.7981414

00:18:13.860 --> 00:18:15.444 As I specified overtime,

NOTE Confidence: 0.7981414

 $00:18:15.444 \longrightarrow 00:18:18.290$ the dozing off into some other Wolf

NOTE Confidence: 0.7981414

 $00:18:18.290 \longrightarrow 00:18:20.666$ first six patients higher dose than

NOTE Confidence: 0.7981414

 $00:18:20.666 \longrightarrow 00:18:23.439$ those was like lower dose than hide.

NOTE Confidence: 0.7981414

 $00:18:23.440 \longrightarrow 00:18:24.784$ Those was escalated,

NOTE Confidence: 0.7981414

 $00:18:24.784 \longrightarrow 00:18:28.354$ and then finally at the end they settled

NOTE Confidence: 0.7981414

 $00:18:28.354 \longrightarrow 00:18:31.900$ on a dose of 1.3 on cycle one and one.

NOTE Confidence: 0.7981414

 $00:18:31.900 \longrightarrow 00:18:33.001$ On Cycle 2,

NOTE Confidence: 0.7981414

 $00:18:33.001 \longrightarrow 00:18:33.368$ four.

 $00:18:33.368 \longrightarrow 00:18:35.570$ So the study was further modified

NOTE Confidence: 0.7981414

00:18:35.651 --> 00:18:37.956 after enrollment of 49 patients,

NOTE Confidence: 0.7981414

 $00:18:37.960 \longrightarrow 00:18:40.204$ and here you can see that

NOTE Confidence: 0.7981414

00:18:40.204 --> 00:18:42.400 four out of eight cycles,

NOTE Confidence: 0.7981414

 $00:18:42.400 \longrightarrow 00:18:45.228$ we only have 4 cycles of chemotherapy.

NOTE Confidence: 0.7981414

00:18:45.230 --> 00:18:48.058 Now Inotuzumab is given twice per cycle,

NOTE Confidence: 0.7981414

 $00:18:48.060 \longrightarrow 00:18:51.696$ and the dozing is here and blender to map.

NOTE Confidence: 0.7981414

00:18:51.700 --> 00:18:54.563 4 cycles of blinatumomab I added in

NOTE Confidence: 0.7981414

 $00{:}18{:}54.563 \dashrightarrow 00{:}18{:}56.248$ consolidation phase and maintenance

NOTE Confidence: 0.7981414

 $00:18:56.248 \longrightarrow 00:18:58.534$ was reduced from 36 months to

NOTE Confidence: 0.7981414

 $00{:}18{:}58.534 \dashrightarrow 00{:}19{:}01.124$ 18 months and now also includes

NOTE Confidence: 0.7981414

00:19:01.124 --> 00:19:02.948 four cycles of blinatumomab.

NOTE Confidence: 0.7981414

 $00:19:02.950 \longrightarrow 00:19:03.985$ So once again,

NOTE Confidence: 0.7981414

 $00:19:03.985 \longrightarrow 00:19:06.055$ this is starting from patient 50.

NOTE Confidence: 0.7981414

 $00:19:06.060 \longrightarrow 00:19:07.785$ An further total number of

NOTE Confidence: 0.7981414

 $00{:}19{:}07.785 \dashrightarrow 00{:}19{:}09.510$ patients enrolled in this phase.

 $00:19:09.510 \longrightarrow 00:19:11.230$ Two trial with 70 patients.

NOTE Confidence: 0.7981414

 $00:19:11.230 \dashrightarrow 00:19:13.645$ So 20 patients receive treatment this way.

NOTE Confidence: 0.7981414

 $00:19:13.650 \longrightarrow 00:19:16.058$ So this is characteristics of the patients.

NOTE Confidence: 0.7981414

00:19:16.060 --> 00:19:18.922 And as you can see that you know these

NOTE Confidence: 0.7981414

 $00:19:18.922 \longrightarrow 00:19:21.530$ are all the patients 6281 and there

NOTE Confidence: 0.7981414

 $00:19:21.530 \longrightarrow 00:19:24.340$ are 41% of them are 70 or older.

NOTE Confidence: 0.7981414

 $00:19:24.340 \longrightarrow 00:19:26.776$ The complex karyotype as well as other

NOTE Confidence: 0.7981414

00:19:26.776 --> 00:19:28.202 cytogenetic abnormalities which I

NOTE Confidence: 0.7981414

 $00{:}19{:}28.202 \dashrightarrow 00{:}19{:}29.857$ usually associate with worse outcomes.

NOTE Confidence: 0.7981414

 $00:19:29.860 \longrightarrow 00:19:33.660$ I seen in at least a third of those patients.

NOTE Confidence: 0.7981414

 $00:19:33.660 \longrightarrow 00:19:36.243$ As well as quite a few patients

NOTE Confidence: 0.7981414

00:19:36.243 --> 00:19:38.955 had that Peach like disease and

NOTE Confidence: 0.7981414

 $00:19:38.955 \longrightarrow 00:19:40.479$ TP53 mutated disease,

NOTE Confidence: 0.7981414

 $00:19:40.480 \longrightarrow 00:19:43.455$ so the overall response rate was 98%.

NOTE Confidence: 0.7981414

 $00:19:43.460 \longrightarrow 00:19:44.669$ This includes CR,

 $00:19:44.669 \longrightarrow 00:19:48.140$ CR P&CRI and there were no early deaths.

NOTE Confidence: 0.7981414

 $00{:}19{:}48.140 \dashrightarrow 00{:}19{:}51.974$ MRD response on the 21 I was observed in

NOTE Confidence: 0.7981414

 $00:19:51.974 \longrightarrow 00:19:55.389$ 78% and overall in 96% of the patients.

NOTE Confidence: 0.7981414

 $00:19:55.390 \longrightarrow 00:19:57.940$ So the reason that why numbers

NOTE Confidence: 0.7981414

 $00:19:57.940 \longrightarrow 00:19:59.900$ are all different, there's been.

NOTE Confidence: 0.7981414

 $00:19:59.900 \longrightarrow 00:20:01.600$ Five patients were enrolled in

NOTE Confidence: 0.7981414

 $00:20:01.600 \longrightarrow 00:20:02.620$ CR on this

NOTE Confidence: 0.812878906363636

 $00:20:02.688 \longrightarrow 00:20:04.908$ study. This is the patients who received

NOTE Confidence: 0.812878906363636

 $00{:}20{:}04.908 \dashrightarrow 00{:}20{:}06.740$ one cycle before they were enrolled

NOTE Confidence: 0.812878906363636

 $00:20:06.740 \longrightarrow 00:20:08.892$ because they have to make it to MD

NOTE Confidence: 0.812878906363636

 $00{:}20{:}08.952 \dashrightarrow 00{:}20{:}10.857$ Anderson to start their treatment.

NOTE Confidence: 0.812878906363636

 $00:20:10.860 \longrightarrow 00:20:12.384$ So these are grade three adverse

NOTE Confidence: 0.812878906363636

 $00:20:12.384 \longrightarrow 00:20:14.288$ events and I just highlighted here

NOTE Confidence: 0.812878906363636

00:20:14.288 --> 00:20:16.164 being occlusive disease, which was

NOTE Confidence: 0.812878906363636

00:20:16.164 --> 00:20:18.348 seen only in nine percent of patients.

NOTE Confidence: 0.83798635

 $00:20:20:360 \longrightarrow 00:20:22.894$ So this is the complete remission duration,

 $00:20:22.900 \longrightarrow 00:20:25.078$ which at three years was 79%.

NOTE Confidence: 0.83798635

 $00:20:25.080 \longrightarrow 00:20:26.890$ That's the top blue line.

NOTE Confidence: 0.83798635

 $00:20:26.890 \longrightarrow 00:20:29.068$ The Red line is overall survival

NOTE Confidence: 0.83798635

 $00:20:29.068 \longrightarrow 00:20:30.808$ line 56% at three years.

NOTE Confidence: 0.83798635

 $00{:}20{:}30.808 \dashrightarrow 00{:}20{:}33.160$ Once again these are all the patients

NOTE Confidence: 0.83798635

 $00:20:33.229 \longrightarrow 00:20:35.359$ and there's a pretty good results

NOTE Confidence: 0.83798635

 $00:20:35.359 \longrightarrow 00:20:37.420$ for this population of patients.

NOTE Confidence: 0.83798635

 $00{:}20{:}37.420 \dashrightarrow 00{:}20{:}39.706$ So this slide highlights worse outcomes

NOTE Confidence: 0.83798635

 $00:20:39.706 \longrightarrow 00:20:42.139$ in patients who are 70 and older.

NOTE Confidence: 0.83798635

 $00:20:42.140 \longrightarrow 00:20:43.960$ This is the blue line.

NOTE Confidence: 0.83798635

 $00:20:43.960 \longrightarrow 00:20:45.612$ As you can see,

NOTE Confidence: 0.83798635

 $00{:}20{:}45.612 \dashrightarrow 00{:}20{:}48.090$ three azerate three year survival rate

NOTE Confidence: 0.83798635

 $00:20:48.171 \longrightarrow 00:20:51.301$ was 65 for patients who are 60 to 69 and.

NOTE Confidence: 0.83798635

 $00:20:51.310 \longrightarrow 00:20:54.894$ Only 43 for patients 470 and older.

NOTE Confidence: 0.83798635

 $00:20:54.900 \longrightarrow 00:20:58.610$ So I think you can see that.

 $00:20:58.610 \longrightarrow 00:21:00.896$ Conclusions are based on this results.

NOTE Confidence: 0.83798635

00:21:00.900 --> 00:21:02.800 Overall response rate was 98%

NOTE Confidence: 0.83798635

 $00:21:02.800 \longrightarrow 00:21:04.324$ margin negativity in 96%.

NOTE Confidence: 0.83798635

 $00:21:04.324 \longrightarrow 00:21:06.229$ There were no early deaths.

NOTE Confidence: 0.83798635

 $00:21:06.230 \longrightarrow 00:21:08.140$ 3 SCR duration was 79.

NOTE Confidence: 0.83798635

 $00:21:08.140 \longrightarrow 00:21:09.660$ Overall survival of 56%.

NOTE Confidence: 0.83798635

 $00:21:09.660 \longrightarrow 00:21:11.180$ Best outcomes of course.

NOTE Confidence: 0.83798635

 $00:21:11.180 \longrightarrow 00:21:13.956$ In patients who are 60 to 69 and

NOTE Confidence: 0.83798635

 $00{:}21{:}13.956 \dashrightarrow 00{:}21{:}16.116$ style studies now amended to

NOTE Confidence: 0.83798635

 $00:21:16.116 \longrightarrow 00:21:17.960$ eliminate chemotherapy for patients

NOTE Confidence: 0.83798635

 $00:21:17.960 \longrightarrow 00:21:20.629$ for 70 and older and older.

NOTE Confidence: 0.83798635

 $00:21:20.630 \longrightarrow 00:21:22.544$ A longer follow-up is of course

NOTE Confidence: 0.83798635

 $00{:}21{:}22.544 \dashrightarrow 00{:}21{:}24.838$ needed to determine if a low dose

NOTE Confidence: 0.83798635

 $00:21:24.838 \longrightarrow 00:21:26.433$ fractionated into some oven blender

NOTE Confidence: 0.83798635

00:21:26.433 --> 00:21:28.608 to warm up will improve outcomes.

NOTE Confidence: 0.83798635

 $00:21:28.610 \longrightarrow 00:21:30.908$ So finally the last study is

00:21:30.908 --> 00:21:33.210 about pH positive DLL patients.

NOTE Confidence: 0.83798635

 $00{:}21{:}33.210 \dashrightarrow 00{:}21{:}36.963$ Again, this is a study from MD Anderson Ann.

NOTE Confidence: 0.83798635

00:21:36.970 --> 00:21:39.189 Its interim results of the Phase 1

NOTE Confidence: 0.83798635

00:21:39.189 --> 00:21:41.646 two study of the Fanatic Phonetic

NOTE Confidence: 0.83798635

 $00:21:41.646 \longrightarrow 00:21:43.562$ locks and dexamethasone for

NOTE Confidence: 0.83798635

00:21:43.562 --> 00:21:46.190 patients with relapsed or refractory

NOTE Confidence: 0.83798635

 $00:21:46.190 \longrightarrow 00:21:48.438$ Philadelphia chromosome positive LL.

NOTE Confidence: 0.83798635

 $00:21:48.440 \longrightarrow 00:21:49.436$ So as you know,

NOTE Confidence: 0.83798635

 $00:21:49.436 \longrightarrow 00:21:50.930$ the never clocks is the drug

NOTE Confidence: 0.83798635

 $00:21:50.990 \longrightarrow 00:21:53.310$ which is currently approved for

NOTE Confidence: 0.83798635

 $00:21:53.310 \longrightarrow 00:21:55.166$ frontline treatment together with

NOTE Confidence: 0.83798635

 $00:21:55.166 \longrightarrow 00:21:56.869$ hyperventilating agents with FI LL

NOTE Confidence: 0.83798635

 $00:21:56.869 \longrightarrow 00:21:58.633$ also approved for treatment of CLL

NOTE Confidence: 0.83798635

 $00{:}21{:}58.640 \dashrightarrow 00{:}22{:}02.360$ and so this is a BCL two inhibitor.

NOTE Confidence: 0.83798635

 $00:22:02.360 \longrightarrow 00:22:04.649$ So what is the logic of trying

00:22:04.649 --> 00:22:07.657 this drug in patients with DLL Now

NOTE Confidence: 0.83798635

 $00{:}22{:}07.657 \dashrightarrow 00{:}22{:}10.092$ the outcomes of relapse refractory

NOTE Confidence: 0.83798635

 $00{:}22{:}10.092 \dashrightarrow 00{:}22{:}12.710$ disease in Peach posted below poor.

NOTE Confidence: 0.83798635

 $00:22:12.710 \longrightarrow 00:22:15.092$ So the PACE trial showed that

NOTE Confidence: 0.83798635

 $00:22:15.092 \longrightarrow 00:22:17.206$ the native can induce responses

NOTE Confidence: 0.83798635

 $00{:}22{:}17.206 \dashrightarrow 00{:}22{:}20.220$ and 40% of patients but one year

NOTE Confidence: 0.83798635

 $00{:}22{:}20.220 \dashrightarrow 00{:}22{:}22.650$ progression free survival is only 8%.

NOTE Confidence: 0.83798635

00:22:22.650 --> 00:22:25.219 So pH positive LL is highly dependent

NOTE Confidence: 0.83798635

 $00{:}22{:}25.219 \dashrightarrow 00{:}22{:}28.235$ on BCL two protein for its survival

NOTE Confidence: 0.83798635

 $00:22:28.235 \longrightarrow 00:22:30.989$ and that's why potentially there is

NOTE Confidence: 0.83798635

 $00:22:31.066 \longrightarrow 00:22:33.820$ a the rapeutic role for phonetic lax.

NOTE Confidence: 0.83798635

 $00:22:33.820 \longrightarrow 00:22:35.420$ Preclinical studies also showed

NOTE Confidence: 0.83798635

 $00:22:35.420 \longrightarrow 00:22:37.820$ that platinum can cooperate with an

NOTE Confidence: 0.83798635

 $00:22:37.885 \longrightarrow 00:22:40.069$ attic locks and be synergistic in

NOTE Confidence: 0.83798635

 $00:22:40.069 \longrightarrow 00:22:41.950$ attacking Peach positive LL cells.

NOTE Confidence: 0.83798635

 $00:22:41.950 \longrightarrow 00:22:44.659$ So there is synergistic inhibition of growth.

00:22:44.660 --> 00:22:46.472 An induction of Opelousas,

NOTE Confidence: 0.83798635

 $00{:}22{:}46.472 \dashrightarrow 00{:}22{:}49.707$ and perhaps the reason for it is

NOTE Confidence: 0.83798635

00:22:49.707 --> 00:22:52.759 inhibition of Lynn tires in Chinese by

NOTE Confidence: 0.83798635

00:22:52.759 --> 00:22:55.500 platinum and it increases beam and.

NOTE Confidence: 0.83798635

 $00{:}22{:}55.500 \to 00{:}22{:}58.038$ Which prevents MCL one upregulation MCL.

NOTE Confidence: 0.83798635

 $00:22:58.040 \longrightarrow 00:23:01.253$ One is another anti up anti optic

NOTE Confidence: 0.83798635

00:23:01.253 --> 00:23:04.202 protein and usually in escape route

NOTE Confidence: 0.83798635

 $00:23:04.202 \longrightarrow 00:23:07.660$ when BCL two anti apoptosis is inhibited.

NOTE Confidence: 0.83798635

00:23:07.660 --> 00:23:09.556 So the results which were presented

NOTE Confidence: 0.83798635

00:23:09.556 --> 00:23:12.033 at ASH 2020 were results of the phase

NOTE Confidence: 0.83798635

00:23:12.033 --> 00:23:14.108 one of the study. Only nine patients.

NOTE Confidence: 0.83798635

00:23:14.108 --> 00:23:15.026 But you know,

NOTE Confidence: 0.83798635

 $00{:}23{:}15.030 \to 00{:}23{:}17.375$ they are quite interesting and that's why

NOTE Confidence: 0.83798635

 $00:23:17.375 \longrightarrow 00:23:19.908$ I selected this for the discussion today.

NOTE Confidence: 0.83798635

00:23:19.910 --> 00:23:22.340 My so the point of Phase one studies of

 $00:23:22.340 \longrightarrow 00:23:24.217$ course to identify maximal tolerated

NOTE Confidence: 0.83798635

 $00{:}23{:}24.217 \dashrightarrow 00{:}23{:}26.539$ dose of another class in combination

NOTE Confidence: 0.83798635

 $00:23:26.602 \longrightarrow 00:23:28.478$ with platinum and dexamethasone.

NOTE Confidence: 0.83798635

 $00:23:28.480 \longrightarrow 00:23:30.265$ There are secondary endpoint including

NOTE Confidence: 0.83798635

00:23:30.265 --> 00:23:32.050 CMR 8 Relapse free survival,

NOTE Confidence: 0.83798635

 $00:23:32.050 \longrightarrow 00:23:34.283$ overall survival and of course, safety.

NOTE Confidence: 0.83798635 00:23:34.283 --> 00:23:34.736 So.

NOTE Confidence: 0.83798635

00:23:34.736 --> 00:23:37.454 The patients who were included on

NOTE Confidence: 0.83798635

 $00:23:37.454 \longrightarrow 00:23:38.360$ the study

NOTE Confidence: 0.7313096

 $00:23:38.449 \longrightarrow 00:23:40.625$ where patients with relapsed

NOTE Confidence: 0.7313096

 $00{:}23{:}40.625 \operatorname{--}{>} 00{:}23{:}43.345$ refractory Peach positive LL with

NOTE Confidence: 0.7313096

00:23:43.345 --> 00:23:46.448 CML in lymphoid blah space and they

NOTE Confidence: 0.7313096

 $00:23:46.448 \longrightarrow 00:23:49.756$ have to be treated by at least one

NOTE Confidence: 0.7313096

 $00:23:49.756 \longrightarrow 00:23:52.240$ desireable TTI prior to the study.

NOTE Confidence: 0.7313096

 $00:23:52.240 \longrightarrow 00:23:55.250$ Age was 18 and older.

NOTE Confidence: 0.7313096

00:23:55.250 --> 00:23:56.366 Oclock performance status

 $00:23:56.366 \longrightarrow 00:23:57.854$ like in previous study.

NOTE Confidence: 0.7313096

 $00:23:57.860 \longrightarrow 00:23:59.725$ Adequate organ function nor uncontrolled

NOTE Confidence: 0.7313096

 $00:23:59.725 \longrightarrow 00:24:00.844$ active cardiovascular disease.

NOTE Confidence: 0.7313096

00:24:00.850 --> 00:24:03.088 Becausw Anatomy was known to have

NOTE Confidence: 0.7313096

 $00:24:03.088 \longrightarrow 00:24:04.580$ cardiovascular toxicity arterial occlusive,

NOTE Confidence: 0.7313096

00:24:04.580 --> 00:24:05.324 occlusive events,

NOTE Confidence: 0.7313096

00:24:05.324 --> 00:24:07.928 and no prior use of genetic lacks.

NOTE Confidence: 0.7313096

 $00:24:07.930 \longrightarrow 00:24:10.914$ So this is the schema of the study.

NOTE Confidence: 0.7313096

00:24:10.920 --> 00:24:11.292 Initially,

NOTE Confidence: 0.7313096

00:24:11.292 --> 00:24:14.268 patients were open at 9:45 for seven days,

NOTE Confidence: 0.7313096

 $00{:}24{:}14.270 \dashrightarrow 00{:}24{:}17.350$ then the network locks ramp up together with

NOTE Confidence: 0.7313096

 $00:24:17.350 \longrightarrow 00:24:19.870$ dexamethasone for four days at 40 milligrams,

NOTE Confidence: 0.7313096

 $00:24:19.870 \longrightarrow 00:24:21.735$ so the phase one included

NOTE Confidence: 0.7313096

00:24:21.735 --> 00:24:23.600 ramping up to 400 milligrams,

NOTE Confidence: 0.7313096

 $00:24:23.600 \longrightarrow 00:24:24.932$ or 800 milligrams.

 $00:24:24.932 \longrightarrow 00:24:26.708$ So this were two.

NOTE Confidence: 0.7313096

 $00{:}24{:}26.710 \dashrightarrow 00{:}24{:}29.170$ Those are some phonetic lacks which

NOTE Confidence: 0.7313096

 $00:24:29.170 \longrightarrow 00:24:31.290$ were accomplished in this study,

NOTE Confidence: 0.7313096

 $00:24:31.290 \longrightarrow 00:24:33.072$ so not new,

NOTE Confidence: 0.7313096

 $00:24:33.072 \longrightarrow 00:24:36.636$ but those was further reduced with.

NOTE Confidence: 0.7313096

 $00:24:36.640 \longrightarrow 00:24:38.675$ Haematological response to 30 milligrams

NOTE Confidence: 0.7313096

 $00{:}24{:}38.675 \dashrightarrow 00{:}24{:}40.710$ and for patients with accomplished

NOTE Confidence: 0.7313096

 $00:24:40.774 \longrightarrow 00:24:42.458$ complete molecular response to.

NOTE Confidence: 0.7313096

 $00:24:42.460 \longrightarrow 00:24:43.396$ 15 milligrams.

NOTE Confidence: 0.7313096

 $00:24:43.396 \longrightarrow 00:24:46.204$ To avoid arterial occlusive events and

NOTE Confidence: 0.7313096

 $00{:}24{:}46.204 \dashrightarrow 00{:}24{:}49.119$ other side effects so as you can see,

NOTE Confidence: 0.7313096

 $00:24:49.120 \longrightarrow 00:24:51.510$ patients also received CNS prophylaxis

NOTE Confidence: 0.7313096

 $00:24:51.510 \longrightarrow 00:24:55.118$ and Rituxan if they were CD 20 positive.

NOTE Confidence: 0.7313096

 $00:24:55.120 \longrightarrow 00:24:57.745$ So this is the characteristic of this.

NOTE Confidence: 0.7313096

 $00:24:57.750 \longrightarrow 00:25:00.000$ Nine patients enrolled on this phase.

NOTE Confidence: 0.7313096

 $00:25:00.000 \longrightarrow 00:25:02.821$ One of the study you can see

 $00:25:02.821 \longrightarrow 00:25:05.249$ that the issue is 26 to 73.

NOTE Confidence: 0.7313096

 $00{:}25{:}05.250 \dashrightarrow 00{:}25{:}07.452$ There were no patience with the

NOTE Confidence: 0.7313096

00:25:07.452 --> 00:25:09.370 with performance status of three,

NOTE Confidence: 0.7313096

 $00:25:09.370 \longrightarrow 00:25:12.370$ so half of the patients had T315I mutations.

NOTE Confidence: 0.7313096

 $00:25:12.370 \longrightarrow 00:25:15.258$ And as you can see it was very

NOTE Confidence: 0.7313096

 $00:25:15.258 \longrightarrow 00:25:16.500$ heavily pretreated group.

NOTE Confidence: 0.7313096

00:25:16.500 --> 00:25:18.435 17\% order received platinum probably

NOTE Confidence: 0.7313096

 $00:25:18.435 \longrightarrow 00:25:21.370$ going to my treatment and 56% of patients

NOTE Confidence: 0.7313096

 $00:25:21.370 \longrightarrow 00:25:23.988$ and prior transplant in 67% of patients.

NOTE Confidence: 0.7313096

 $00:25:23.988 \longrightarrow 00:25:26.202$ So nine but very heavily pretreated

NOTE Confidence: 0.7313096

 $00:25:26.202 \longrightarrow 00:25:28.670$ patients with relapsed refractory disease.

NOTE Confidence: 0.7313096

00:25:28.670 --> 00:25:30.650 So we're not even look like

NOTE Confidence: 0.7313096

00:25:30.650 --> 00:25:32.484 Sundecks didn't cause any deal

NOTE Confidence: 0.7313096

 $00:25:32.484 \longrightarrow 00:25:34.276$ tease those limited toxicities.

NOTE Confidence: 0.7313096

 $00:25:34.280 \longrightarrow 00:25:36.518$ Maximal tolerated dose was not reached.

 $00:25:36.520 \longrightarrow 00:25:38.450$ Three patients were treated or

NOTE Confidence: 0.7313096

00:25:38.450 --> 00:25:40.380 magnetic locks 400 milligram those

NOTE Confidence: 0.7313096

 $00:25:40.441 \longrightarrow 00:25:42.685$ level one and six patients receive

NOTE Confidence: 0.7313096

 $00{:}25{:}42.685 \dashrightarrow 00{:}25{:}44.583$ genetic lacks 800 milligrams and

NOTE Confidence: 0.7313096

 $00:25:44.583 \longrightarrow 00:25:46.617$ this was selected to be recommended.

NOTE Confidence: 0.7313096

 $00:25:46.620 \longrightarrow 00:25:47.679$ Phase two dose.

NOTE Confidence: 0.7313096

 $00{:}25{:}47.679 \dashrightarrow 00{:}25{:}49.797$ There are no early mortality so

NOTE Confidence: 0.7313096

 $00{:}25{:}49.797 \dashrightarrow 00{:}25{:}52.226$ the side effects are listed here.

NOTE Confidence: 0.7313096

 $00{:}25{:}52.230 \dashrightarrow 00{:}25{:}54.911$ I think 1 interesting side effect in

NOTE Confidence: 0.7313096

 $00:25:54.911 \longrightarrow 00:25:57.264$ this storm Bolick event which occurred

NOTE Confidence: 0.7313096

 $00{:}25{:}57.264 \dashrightarrow 00{:}26{:}00.540$ in one patient and was graded as Grade 3.

NOTE Confidence: 0.7313096

 $00:26:00.540 \longrightarrow 00:26:02.196$ Patient had DVT MP.

NOTE Confidence: 0.7313096

 $00:26:02.196 \longrightarrow 00:26:04.266$ There are patients who had

NOTE Confidence: 0.7313096

00:26:04.266 --> 00:26:06.667 great for Trump aside opinion,

NOTE Confidence: 0.7313096

00:26:06.670 --> 00:26:08.860 neutropenia but no febrile neutropenia.

NOTE Confidence: 0.7313096

 $00:26:08.860 \longrightarrow 00:26:10.174$ Not great four.

 $00:26:10.174 \longrightarrow 00:26:11.488$ So reasonably acceptable.

NOTE Confidence: 0.7313096

 $00:26:11.490 \longrightarrow 00:26:13.470$ Side effect profile for this

NOTE Confidence: 0.7313096

00:26:13.470 --> 00:26:15.054 heavily pretreated group of

NOTE Confidence: 0.7313096

 $00:26:15.054 \longrightarrow 00:26:16.750$ relapse refractory patients.

NOTE Confidence: 0.7313096

 $00:26:16.750 \longrightarrow 00:26:19.366$ So the response rate was 56%.

NOTE Confidence: 0.7313096

00:26:19.370 --> 00:26:20.246 Of course,

NOTE Confidence: 0.7313096

00:26:20.246 --> 00:26:22.874 it's five out of nine patients,

NOTE Confidence: 0.7313096

 $00:26:22.880 \longrightarrow 00:26:27.260$ 44% of four now had CR and one had CR.

NOTE Confidence: 0.7313096

 $00:26:27.260 \longrightarrow 00:26:28.362$ I complete.

NOTE Confidence: 0.7313096

 $00{:}26{:}28.362 \dashrightarrow 00{:}26{:}30.566$ Molecular response was accomplished.

NOTE Confidence: 0.7313096

00:26:30.570 --> 00:26:33.186 I'm on 4 out of nine patients and

NOTE Confidence: 0.7313096

 $00{:}26{:}33.186 \dashrightarrow 00{:}26{:}34.683$ complete molecular response after

NOTE Confidence: 0.7313096

 $00:26:34.683 \longrightarrow 00:26:36.999$ first cycle was in three patients.

NOTE Confidence: 0.7313096

00:26:37.000 --> 00:26:38.960 One patient actually responded by

NOTE Confidence: 0.7313096

00:26:38.960 --> 00:26:40.528 decreasing blossom mirror from

 $00:26:40.528 \longrightarrow 00:26:42.351$ 94 to 6% had neutrophil recovery

NOTE Confidence: 0.7313096

 $00:26:42.351 \longrightarrow 00:26:43.779$ in place with recovery,

NOTE Confidence: 0.7313096

 $00{:}26{:}43.780 {\:{\circ}{\circ}{\circ}}>00{:}26{:}46.370$ but was not counted as responded because

NOTE Confidence: 0.7313096

 $00:26:46.370 \longrightarrow 00:26:49.002$ Blacks were still about 5% in the marrow.

NOTE Confidence: 0.7313096

 $00:26:49.002 \longrightarrow 00:26:51.200$ So this is to highlight that phonetic

NOTE Confidence: 0.7313096

00:26:51.266 --> 00:26:53.076 likes those 800 milligram patients

NOTE Confidence: 0.7313096

 $00:26:53.076 \longrightarrow 00:26:55.560$ are the only patients who responded.

NOTE Confidence: 0.7313096

 $00:26:55.560 \longrightarrow 00:26:57.410$ None of the three patients

NOTE Confidence: 0.7313096

 $00:26:57.410 \longrightarrow 00:26:59.260$ who received an attic LAX

NOTE Confidence: 0.8183674

 $00:26:59.341 \longrightarrow 00:27:02.717$ at 400. Those responded, but five out of 6.

NOTE Confidence: 0.8183674

 $00{:}27{:}02.720 \dashrightarrow 00{:}27{:}05.247$ Our patients in those two with 800

NOTE Confidence: 0.8183674

 $00:27:05.247 \longrightarrow 00:27:07.630$ milligrams of another class had response,

NOTE Confidence: 0.8183674

 $00:27:07.630 \longrightarrow 00:27:10.276$ so this is of course 9 patients.

NOTE Confidence: 0.8183674

 $00:27:10.280 \longrightarrow 00:27:11.788$ Potassium plus fanatical X

NOTE Confidence: 0.8183674

 $00:27:11.788 \longrightarrow 00:27:13.667$ one year old survival, 63%.

NOTE Confidence: 0.8183674

 $00:27:13.667 \longrightarrow 00:27:16.236$ Only two patients died and those were

 $00:27:16.236 \longrightarrow 00:27:18.598$ nonresponders they were not relapse patients.

NOTE Confidence: 0.8183674

00:27:18.600 --> 00:27:20.924 They did not respond to the magnet

NOTE Confidence: 0.8183674

 $00:27:20.924 \longrightarrow 00:27:22.750$ and Venetic lacks combination.

NOTE Confidence: 0.8183674

 $00:27:22.750 \longrightarrow 00:27:24.916$ And as you can see this

NOTE Confidence: 0.8183674

 $00:27:24.916 \longrightarrow 00:27:26.910$ is six months or less.

NOTE Confidence: 0.8183674

 $00:27:26.910 \longrightarrow 00:27:29.178$ 3 survival of 100% for five

NOTE Confidence: 0.8183674

 $00:27:29.178 \longrightarrow 00:27:30.690$ patients is reasonably reassuring.

NOTE Confidence: 0.8183674

00:27:30.690 --> 00:27:34.623 You once again it's a small phase one study.

NOTE Confidence: 0.8183674

 $00:27:34.630 \longrightarrow 00:27:35.659$ So in conclusion,

NOTE Confidence: 0.8183674

 $00{:}27{:}35.659 \dashrightarrow 00{:}27{:}37.717$ this is oral regimen of banana

NOTE Confidence: 0.8183674

00:27:37.717 --> 00:27:39.570 phonetic likes and dexamethasone,

NOTE Confidence: 0.8183674

 $00:27:39.570 \longrightarrow 00:27:41.850$ and this looks like safe and

NOTE Confidence: 0.8183674

 $00{:}27{:}41.850 \dashrightarrow 00{:}27{:}43.370$ effective in heavily pretreated,

NOTE Confidence: 0.8183674

 $00{:}27{:}43.370 \dashrightarrow 00{:}27{:}44.510$ relapsed refractory Peach

NOTE Confidence: 0.8183674

 $00:27:44.510 \longrightarrow 00:27:45.650$ post available patients.

00:27:45.650 --> 00:27:47.930 Maximal tolerated dose was not reached,

NOTE Confidence: 0.8183674

 $00{:}27{:}47.930 \dashrightarrow 00{:}27{:}50.975$ and those selected for phase two of

NOTE Confidence: 0.8183674

 $00{:}27{:}50.975 \dashrightarrow 00{:}27{:}54.297$ this study is 800 MG CR CR rate was

NOTE Confidence: 0.8183674

00:27:54.297 --> 00:27:56.670 56 on CMR rate was 44% responses

NOTE Confidence: 0.8183674

00:27:56.670 --> 00:27:58.190 were observed across subgroups,

NOTE Confidence: 0.8183674

 $00:27:58.190 \longrightarrow 00:28:00.850$ but may be high in Veneta clocks.

NOTE Confidence: 0.8183674

 $00{:}28{:}00.850 \dashrightarrow 00{:}28{:}03.130$ 800 milligram daily Group estimated one

NOTE Confidence: 0.8183674

00:28:03.130 --> 00:28:05.865 year old survival 63% no relapses today.

NOTE Confidence: 0.8183674

 $00{:}28{:}05.865 \dashrightarrow 00{:}28{:}07.080$ Correlative studies ongoing

NOTE Confidence: 0.8183674

 $00{:}28{:}07.080 \dashrightarrow 00{:}28{:}08.700$ to better understand mechanism

NOTE Confidence: 0.8183674

 $00:28:08.758 \longrightarrow 00:28:10.178$ of response and resistance.

NOTE Confidence: 0.8183674

 $00:28:10.180 \longrightarrow 00:28:13.673$ So what do we do with yell

NOTE Confidence: 0.8183674

 $00:28:13.673 \longrightarrow 00:28:16.419$ to introduce this new drugs?

NOTE Confidence: 0.8183674

00:28:16.420 --> 00:28:18.015 Our two frontline management of

NOTE Confidence: 0.8183674

00:28:18.015 --> 00:28:20.359 our patients so we are opening this

NOTE Confidence: 0.8183674

00:28:20.359 --> 00:28:22.074 alliance study phase two trial

 $00:28:22.074 \longrightarrow 00:28:23.990$ overnight as a mob induction,

NOTE Confidence: 0.8183674

 $00:28:23.990 \longrightarrow 00:28:25.958$ followed by Glenna to map consolidation

NOTE Confidence: 0.8183674

 $00:28:25.958 \longrightarrow 00:28:27.690$ for patients with newly diagnosed

NOTE Confidence: 0.8183674

 $00:28:27.690 \longrightarrow 00:28:29.146$ or relapse refractory CD.

NOTE Confidence: 0.8183674

 $00:28:29.150 \longrightarrow 00:28:30.430$ 22 points of DLL.

NOTE Confidence: 0.8183674

 $00:28:30.430 \longrightarrow 00:28:33.876$ I have to say that CD 19 and CD 22

NOTE Confidence: 0.8183674

 $00:28:33.876 \longrightarrow 00:28:36.042$ positivity is seen in more than

NOTE Confidence: 0.8183674

 $00:28:36.124 \longrightarrow 00:28:37.854$ 90% of patients with SLE,

NOTE Confidence: 0.8183674

 $00:28:37.854 \longrightarrow 00:28:40.080$ so this cohort one includes patients

NOTE Confidence: 0.8183674

 $00:28:40.148 \longrightarrow 00:28:42.500$ older than 60 and older and we will

NOTE Confidence: 0.8183674

00:28:42.500 --> 00:28:44.629 be looking at event free survival,

NOTE Confidence: 0.8183674

 $00:28:44.630 \longrightarrow 00:28:46.206$ one event free survival.

NOTE Confidence: 0.8183674

 $00{:}28{:}46.206 \dashrightarrow 00{:}28{:}48.176$ For this transplant in eligible

NOTE Confidence: 0.8183674

00:28:48.176 --> 00:28:50.489 patient group with newly diagnosed LL,

NOTE Confidence: 0.8183674

 $00:28:50.490 \longrightarrow 00:28:52.524$ the cohort two is for younger

 $00:28:52.524 \longrightarrow 00:28:54.336$ patients who have relapsed refractory

NOTE Confidence: 0.8183674

 $00{:}28{:}54.336 --> 00{:}28{:}55.888$ disease and you know,

NOTE Confidence: 0.8183674

 $00:28:55.890 \longrightarrow 00:28:57.984$ of course this patients potentially can

NOTE Confidence: 0.8183674

 $00:28:57.984 \longrightarrow 00:29:00.569$ go to transplant if they have response.

NOTE Confidence: 0.8183674

 $00:29:00.570 \longrightarrow 00:29:02.370$ So this combination makes sense

NOTE Confidence: 0.8183674

 $00:29:02.370 \longrightarrow 00:29:04.170$ because of the existing vanity.

NOTE Confidence: 0.8183674

 $00{:}29{:}04.170 \dashrightarrow 00{:}29{:}06.174$ Zoom up within occlusive disease post

NOTE Confidence: 0.8183674

 $00:29:06.174 \longrightarrow 00:29:08.130$ transplant and even without transplant.

NOTE Confidence: 0.8183674

 $00:29:08.130 \longrightarrow 00:29:10.419$ And that's why we would like to

NOTE Confidence: 0.8183674

 $00:29:10.419 \longrightarrow 00:29:12.247$ separate transplant by giving other

NOTE Confidence: 0.8183674

 $00{:}29{:}12.247 \dashrightarrow 00{:}29{:}14.605$ treatments to this patients in between.

NOTE Confidence: 0.8183674

00:29:14.610 --> 00:29:16.470 Another modern transplant itself.

NOTE Confidence: 0.8183674

 $00{:}29{:}16.470 \dashrightarrow 00{:}29{:}20.544$ So I would like to wrap it up at

NOTE Confidence: 0.8183674

00:29:20.544 --> 00:29:22.938 this point and next speaker doctor,

NOTE Confidence: 0.8183674

 $00:29:22.940 \longrightarrow 00:29:23.342$ Nina,

NOTE Confidence: 0.8183674

00:29:23.342 --> 00:29:25.754 Kate and Logic will be talking

 $00{:}29{:}25.754 \dashrightarrow 00{:}29{:}27.610$ about pediatric AOL studies.

NOTE Confidence: 0.7874477

00:29:38.910 --> 00:29:40.774 You know, now you have to share your

NOTE Confidence: 0.7874477

00:29:40.774 --> 00:29:43.530 slides. I just unshared. Thank you.

NOTE Confidence: 0.8930809

00:29:56.700 --> 00:29:57.768 So thank you,

NOTE Confidence: 0.8930809

 $00:29:57.768 \longrightarrow 00:30:00.260$ I'm going to now shift the focus.

NOTE Confidence: 0.8930809

 $00:30:00.260 \longrightarrow 00:30:02.740$ Two childhood adolescent and young

NOTE Confidence: 0.8930809

00:30:02.740 --> 00:30:05.812 adult ELL and I'm including young

NOTE Confidence: 0.8930809

 $00:30:05.812 \longrightarrow 00:30:08.372$ adult because often the eligibility

NOTE Confidence: 0.8930809

 $00:30:08.372 \longrightarrow 00:30:11.368$ for our studies extend well into

NOTE Confidence: 0.8930809

 $00:30:11.368 \longrightarrow 00:30:13.538$ the 20s and sometimes older.

NOTE Confidence: 0.83558816

 $00:30:16.440 \dashrightarrow 00:30:21.020$ So I'm going to focus most of my time on

NOTE Confidence: 0.83558816

 $00{:}30{:}21.139 \dashrightarrow 00{:}30{:}26.018$ the 1st three abstracts. The first is our.

NOTE Confidence: 0.8058765

 $00:30:29.110 \longrightarrow 00:30:31.978$ Presented the results of our recently

NOTE Confidence: 0.8058765

00:30:31.978 --> 00:30:34.630 closed T cell lymphoblastic leukemia.

NOTE Confidence: 0.8058765

00:30:34.630 --> 00:30:37.948 Lymphoma study AALL 1231 in which Per-

tuzumab

 $00:30:37.948 \longrightarrow 00:30:41.044$ was studied and which cranial radiation

NOTE Confidence: 0.8058765

 $00:30:41.044 \longrightarrow 00:30:44.144$ was illuminated for 90% of patients.

NOTE Confidence: 0.8058765

00:30:44.144 --> 00:30:47.553 Next, I'm going to discuss results of

NOTE Confidence: 0.8058765

00:30:47.553 --> 00:30:50.660 using Blue Netuma map versus intensive

NOTE Confidence: 0.8058765

00:30:50.660 --> 00:30:53.710 chemo in children in high risk.

NOTE Confidence: 0.8058765

00:30:53.710 --> 00:30:57.406 First, relapse of B cell LL.

NOTE Confidence: 0.8058765

 $00:30:57.410 \longrightarrow 00:31:00.518$ Anne, and then I'm going to

NOTE Confidence: 0.8058765

 $00{:}31{:}00.518 \dashrightarrow 00{:}31{:}02.590$ discuss some results regarding

NOTE Confidence: 0.8058765

00:31:02.687 --> 00:31:05.368 the prior use of Luna to mmap.

NOTE Confidence: 0.8058765

 $00{:}31{:}05.370 \dashrightarrow 00{:}31{:}11.090$ As associated with karty outcomes.

NOTE Confidence: 0.8058765

 $00:31:11.090 \longrightarrow 00:31:13.866$ And then I'm going to shift and talk

NOTE Confidence: 0.8058765

 $00{:}31{:}13.866 \dashrightarrow 00{:}31{:}16.594$ a bit about toxicity related to

NOTE Confidence: 0.8058765

 $00{:}31{:}16.594 \dashrightarrow 00{:}31{:}20.185$ as paragine ease and maybe some of the

NOTE Confidence: 0.8058765

 $00:31:20.185 \longrightarrow 00:31:23.075$ factors associated with that toxicity.

NOTE Confidence: 0.8309488

 $00:31:27.970 \longrightarrow 00:31:31.394$ The first study is by the study chair,

 $00:31:31.400 \longrightarrow 00:31:33.842$ Doctor Teachey and I would like

NOTE Confidence: 0.8309488

 $00:31:33.842 \longrightarrow 00:31:36.549$ to also thank all the authors,

NOTE Confidence: 0.8309488

 $00{:}31{:}36.550 \dashrightarrow 00{:}31{:}40.696$ investigators who slides I will present.

NOTE Confidence: 0.8309488

 $00:31:40.700 \longrightarrow 00:31:43.820$ And this is a ALL 1231.

NOTE Confidence: 0.8309488

 $00:31:43.820 \longrightarrow 00:31:47.396$ The reason that there is a

NOTE Confidence: 0.8309488

 $00:31:47.396 \longrightarrow 00:31:50.850$ T allow study even though.

NOTE Confidence: 0.8309488

 $00{:}31{:}50.850 \dashrightarrow 00{:}31{:}53.160$ Three year event free survival

NOTE Confidence: 0.8309488

 $00:31:53.160 \longrightarrow 00:31:55.942$ approaches 90% is that T cell

NOTE Confidence: 0.8309488

 $00:31:55.942 \longrightarrow 00:31:58.257$ patients can't really be salvage.

NOTE Confidence: 0.8309488

 $00:31:58.260 \longrightarrow 00:32:02.244$ They have really. Abysmal outcomes.

NOTE Confidence: 0.8309488

 $00{:}32{:}02.244 \dashrightarrow 00{:}32{:}07.038$ If they relapse, so the goal is to try

NOTE Confidence: 0.8309488

 $00:32:07.038 \longrightarrow 00:32:11.750$ to treat them up front as much as possible.

NOTE Confidence: 0.8309488

 $00:32:11.750 \longrightarrow 00:32:15.230$ So part is Amab is a proteasome inhibitor.

NOTE Confidence: 0.8309488

 $00:32:15.230 \longrightarrow 00:32:19.045$ It inhibits Dave teaching would call it

NOTE Confidence: 0.8309488

 $00:32:19.045 \longrightarrow 00:32:23.168$ the garbage can of the cell it inhibits.

NOTE Confidence: 0.8309488

 $00:32:23.170 \dashrightarrow 00:32:25.788$ And is supposed to be pretty old.

 $00:32:25.790 \longrightarrow 00:32:27.620$ Zones are supposed to take

NOTE Confidence: 0.8309488

 $00:32:27.620 \longrightarrow 00:32:29.900$ care of waste from the cell.

NOTE Confidence: 0.8309488

 $00:32:29.900 \longrightarrow 00:32:31.392$ Inhibitors inhibit a number

NOTE Confidence: 0.8309488

 $00:32:31.392 \longrightarrow 00:32:32.884$ of the regulatory proteins,

NOTE Confidence: 0.8309488

00:32:32.890 --> 00:32:33.895 including NF KB,

NOTE Confidence: 0.8309488

 $00:32:33.895 \longrightarrow 00:32:35.905$ which is very important in T

NOTE Confidence: 0.8309488

 $00:32:35.905 \longrightarrow 00:32:37.380$ cell LL pathogenesis.

NOTE Confidence: 0.8309488

 $00:32:37.380 \longrightarrow 00:32:39.930$ It's been shown in relapse studies

NOTE Confidence: 0.8309488

 $00:32:39.930 \longrightarrow 00:32:42.790$ to be well tolerated and effective.

NOTE Confidence: 0.8309488

 $00:32:42.790 \longrightarrow 00:32:45.766$ So therefore it was the basis of this

NOTE Confidence: 0.8309488

 $00{:}32{:}45.766 \dashrightarrow 00{:}32{:}49.867$ study and the Burtis amab is an upfront

NOTE Confidence: 0.8309488

 $00:32:49.867 \longrightarrow 00:32:52.051$ randomization randomization that starts

NOTE Confidence: 0.8309488

00:32:52.134 --> 00:32:54.269 an induction and those randomized

NOTE Confidence: 0.8309488

 $00:32:54.269 \longrightarrow 00:32:57.871$ get a total of eight doses of autism.

NOTE Confidence: 0.8309488

 $00:32:57.871 \longrightarrow 00:33:00.306$ The induction backbone changed for

 $00:33:00.306 \longrightarrow 00:33:03.446$ TLL compared to past studies in a

NOTE Confidence: 0.8309488

 $00{:}33{:}03.446 \dashrightarrow 00{:}33{:}05.536$ nonrandomized way based on British

NOTE Confidence: 0.8309488

00:33:05.617 --> 00:33:08.263 data in which all patients get

NOTE Confidence: 0.8309488

 $00:33:08.263 \longrightarrow 00:33:10.958$ dexamethasone and two doses of peg.

NOTE Confidence: 0.8309488

 $00:33:10.958 \longrightarrow 00:33:13.278$ Asparagine, Ace, and then randomization.

NOTE Confidence: 0.8309488

 $00:33:13.280 \longrightarrow 00:33:17.718$ Is based on end of consolidation MRD.

NOTE Confidence: 0.8309488

 $00:33:17.720 \longrightarrow 00:33:20.842$ So one is classified as standard res

NOTE Confidence: 0.8309488

00:33:20.842 --> 00:33:23.438 intermediate risk or very high risk.

NOTE Confidence: 0.8309488

 $00{:}33{:}23.440 \to 00{:}33{:}26.373$ Based on that and the backbone very

NOTE Confidence: 0.8309488

 $00{:}33{:}26.373 \dashrightarrow 00{:}33{:}29.082$ slightly in terms of the intensive

NOTE Confidence: 0.8309488

 $00{:}33{:}29.082 \dashrightarrow 00{:}33{:}31.357$ therapy based on risk status.

NOTE Confidence: 0.8309488

 $00:33:31.360 \longrightarrow 00:33:34.414$ The only group that gets radiation

NOTE Confidence: 0.8309488

 $00:33:34.414 \longrightarrow 00:33:37.929$ are the very high risk patients.

NOTE Confidence: 0.8309488

 $00:33:37.930 \longrightarrow 00:33:40.667$ For those who are seen as positive

NOTE Confidence: 0.8309488

 $00:33:40.667 \longrightarrow 00:33:41.449$ at diagnosis,

NOTE Confidence: 0.8309488

 $00:33:41.450 \longrightarrow 00:33:43.628$ 90% of patients do not get

 $00:33:43.628 \longrightarrow 00:33:45.750$ radiation and this was decided.

NOTE Confidence: 0.8309488

 $00:33:45.750 \longrightarrow 00:33:48.298$ And that was one of the decisions

NOTE Confidence: 0.8309488

 $00:33:48.298 \longrightarrow 00:33:49.879$ for using dexamethasone induction

NOTE Confidence: 0.8309488

 $00:33:49.879 \longrightarrow 00:33:52.399$ because of the tire CNS penetration.

NOTE Confidence: 0.8309488

 $00{:}33{:}52.400 \dashrightarrow 00{:}33{:}55.095$ There was a great goal in our

NOTE Confidence: 0.8309488

 $00:33:55.095 \longrightarrow 00:33:57.500$ group because of the high cure

NOTE Confidence: 0.8309488

 $00:33:57.500 \longrightarrow 00:33:59.435$ rates in the long term.

NOTE Confidence: 0.8309488

 $00{:}33{:}59.440 {\: -->\:} 00{:}34{:}01.390$ Late effects to try to

NOTE Confidence: 0.8309488

 $00:34:01.390 \longrightarrow 00:34:02.950$ eliminate this this radiation.

NOTE Confidence: 0.8259487

 $00{:}34{:}05.900 \dashrightarrow 00{:}34{:}08.060$ The T lymphoblastic lymphoma patients

NOTE Confidence: 0.8259487

 $00{:}34{:}08.060 \dashrightarrow 00{:}34{:}10.706$ were also eligible for this study

NOTE Confidence: 0.8259487

 $00:34:10.706 \longrightarrow 00:34:12.756$ and their end of consolidation.

NOTE Confidence: 0.8259487

 $00{:}34{:}12.760 \dashrightarrow 00{:}34{:}15.416$ MRD was based on Image Ng and I

NOTE Confidence: 0.8259487

 $00{:}34{:}15.416 \dashrightarrow 00{:}34{:}17.973$ do want to emphasize patients 1

NOTE Confidence: 0.8259487

 $00:34:17.973 \longrightarrow 00:34:21.257$ to 30 years were eligible and we

00:34:21.257 --> 00:34:23.682 do have patients throughout that

NOTE Confidence: 0.8259487

 $00{:}34{:}23.682 \to 00{:}34{:}26.920$ range so the majority are under 18.

NOTE Confidence: 0.77742743

 $00:34:29.620 \longrightarrow 00:34:33.176$ This time is expected to accrue 1400

NOTE Confidence: 0.77742743

00:34:33.176 --> 00:34:36.404 patients over 4.4 years, most powered

NOTE Confidence: 0.77742743

 $00:34:36.404 \longrightarrow 00:34:40.580$ for a 5% difference in four year EFS.

NOTE Confidence: 0.77742743

00:34:40.580 --> 00:34:43.700 However, it only enrolled 847 patients

NOTE Confidence: 0.77742743

 $00:34:43.700 \longrightarrow 00:34:47.383$ because went at that point to the

NOTE Confidence: 0.77742743

 $00:34:47.383 \longrightarrow 00:34:50.401$ results of the precursor study was

NOTE Confidence: 0.77742743

 $00{:}34{:}50.401 \dashrightarrow 00{:}34{:}53.108$ available in that precursor study.

NOTE Confidence: 0.77742743

00:34:53.110 --> 00:34:56.740 AALL 0434 randomized to know Larabee

NOTE Confidence: 0.77742743

 $00{:}34{:}56.740 --> 00{:}35{:}00.408$ nor not and was. Found to be.

NOTE Confidence: 0.7045952

00:35:02.800 --> 00:35:06.424 Very much an advantage to having

NOTE Confidence: 0.7045952

 $00:35:06.424 \longrightarrow 00:35:10.490$ allara been with event free survival.

NOTE Confidence: 0.7045952

 $00:35:10.490 \longrightarrow 00:35:13.730$ Advantage of about 5% and also

NOTE Confidence: 0.7045952

 $00{:}35{:}13.730 \dashrightarrow 00{:}35{:}16.500$ at lower CNS recurrence rate.

NOTE Confidence: 0.7045952

 $00:35:16.500 \longrightarrow 00:35:20.005$ So that's the study was

 $00:35:20.005 \longrightarrow 00:35:23.510$ amended and closed early and.

NOTE Confidence: 0.7045952

 $00:35:23.510 \dashrightarrow 00:35:27.136$ This is what was presented is the

NOTE Confidence: 0.7045952

 $00:35:27.136 \longrightarrow 00:35:30.581$ patients that were enrolled at 800

NOTE Confidence: 0.7045952

00:35:30.581 --> 00:35:34.163 approximately 800 patients and for TI.

NOTE Confidence: 0.7045952

 $00:35:34.170 \longrightarrow 00:35:38.658$ Don't know why this keeps moving for TLL,

NOTE Confidence: 0.7045952

 $00:35:38.660 \longrightarrow 00:35:42.576$ the. There was no difference.

NOTE Confidence: 0.7045952

00:35:42.576 --> 00:35:45.869 Arm A was the standard arm in ARM,

NOTE Confidence: 0.7045952

 $00:35:45.870 \longrightarrow 00:35:48.378$ B was upper to some arm.

NOTE Confidence: 0.7045952

 $00:35:48.380 \longrightarrow 00:35:50.780$ There was no difference in three

NOTE Confidence: 0.7045952

 $00:35:50.780 \longrightarrow 00:35:53.410$ year EFS or in three year.

NOTE Confidence: 0.7045952

 $00:35:53.410 \longrightarrow 00:35:56.498$ Overall survival by arm.

NOTE Confidence: 0.7045952

 $00:35:56.500 \longrightarrow 00:36:00.145$ But when one looked at it by risk group,

NOTE Confidence: 0.7045952

 $00:36:00.150 \longrightarrow 00:36:02.964$ those who were standard risk or who

NOTE Confidence: 0.7045952

 $00:36:02.964 \longrightarrow 00:36:06.388$ had the lowest MRD at the end of

NOTE Confidence: 0.7045952

 $00:36:06.388 \longrightarrow 00:36:08.518$ consolidation had a clear advantage

 $00:36:08.607 \longrightarrow 00:36:11.520$ of 92% versus 85% in three year FS.

NOTE Confidence: 0.7045952

 $00{:}36{:}11.520 \dashrightarrow 00{:}36{:}13.956$ And there was a similar advantage

NOTE Confidence: 0.7045952

 $00:36:13.956 \longrightarrow 00:36:15.580$ in their intermediate risk.

NOTE Confidence: 0.7045952

 $00:36:15.580 \longrightarrow 00:36:18.415$ There was no advantage for purchase map,

NOTE Confidence: 0.7045952

 $00:36:18.420 \longrightarrow 00:36:21.849$ but in fact those who got burnt to the

NOTE Confidence: 0.7045952

00:36:21.849 --> 00:36:25.326 map did worse for very high risk TLL.

NOTE Confidence: 0.7045952

 $00:36:25.330 \longrightarrow 00:36:27.646$ Those who had high.

NOTE Confidence: 0.7045952

00:36:27.646 --> 00:36:31.770 End of consolidation burden or who were?

NOTE Confidence: 0.7045952

 $00{:}36{:}31.770 \dashrightarrow 00{:}36{:}34.595$ Early relapse patients and this

NOTE Confidence: 0.7045952

00:36:34.595 --> 00:36:36.290 was statistically significant

NOTE Confidence: 0.7045952

 $00:36:36.290 \longrightarrow 00:36:38.120$ for unclear reasons,

NOTE Confidence: 0.7045952

 $00:36:38.120 \longrightarrow 00:36:41.956$ though it was speculated by the authors

NOTE Confidence: 0.7045952

 $00:36:41.956 \longrightarrow 00:36:46.198$ that this could relate to early toxicity.

NOTE Confidence: 0.7045952

 $00:36:46.200 \longrightarrow 00:36:49.080$ So in terms of the

NOTE Confidence: 0.7045952

00:36:49.080 --> 00:36:50.808 lymphoblastic lymphoma outcomes,

NOTE Confidence: 0.7045952

 $00:36:50.810 \longrightarrow 00:36:53.106$ there was an advantage.

00:36:53.106 --> 00:36:55.402 A statistically clear advantage

NOTE Confidence: 0.7045952

00:36:55.402 --> 00:36:57.160 of Virtusa ma'am,

NOTE Confidence: 0.7045952

 $00:36:57.160 \longrightarrow 00:37:00.295$ both for event free survival

NOTE Confidence: 0.7045952

 $00:37:00.295 \longrightarrow 00:37:02.176$ and overall survival.

NOTE Confidence: 0.7045952

 $00:37:02.180 \longrightarrow 00:37:05.390$ Up about 7 to 8%.

NOTE Confidence: 0.8308252

 $00:37:06.390 \longrightarrow 00:37:08.539$ We wanted to compare outcomes on 12th.

NOTE Confidence: 0.8308252

 $00:37:08.540 \longrightarrow 00:37:10.920$ Oh, that's what I did.

NOTE Confidence: 0.8308252

 $00{:}37{:}10.920 \dashrightarrow 00{:}37{:}14.590$ OK, so the differences in

NOTE Confidence: 0.8308252

 $00{:}37{:}14.590 \dashrightarrow 00{:}37{:}17.526$ induction the rapy were remarkable

NOTE Confidence: 0.8308252

 $00:37:17.526 \longrightarrow 00:37:21.219$ in that there was a higher.

NOTE Confidence: 0.8308252

 $00{:}37{:}21.220 \dashrightarrow 00{:}37{:}24.046$ So actually, going back with this

NOTE Confidence: 0.8308252

 $00:37:24.046 \dashrightarrow 00:37:27.088$ and with this study truncated and

NOTE Confidence: 0.8308252

00:37:27.088 --> 00:37:30.286 with the recent AALLO 434 results,

NOTE Confidence: 0.8308252

00:37:30.290 --> 00:37:33.400 there were some opportunities to

NOTE Confidence: 0.8308252

 $00:37:33.400 \longrightarrow 00:37:35.888$ compare some strategies because

 $00:37:35.888 \dashrightarrow 00:37:39.253$ the Miller Bing was not included

NOTE Confidence: 0.8308252

 $00:37:39.253 \longrightarrow 00:37:41.903$ in this current study because

NOTE Confidence: 0.8308252

 $00{:}37{:}42.001 \dashrightarrow 00{:}37{:}45.019$ those results were not known and.

NOTE Confidence: 0.8308252

 $00:37:45.020 \longrightarrow 00:37:50.870$ Therefore, the. The.

NOTE Confidence: 0.8308252

 $00:37:50.870 \longrightarrow 00:37:53.606$ First thing that was examined was

NOTE Confidence: 0.8308252

 $00:37:53.606 \longrightarrow 00:37:56.989$ in those who got a little over 3,

NOTE Confidence: 0.8308252

 $00:37:56.990 \longrightarrow 00:37:59.170$ four, which would be known

NOTE Confidence: 0.8308252

 $00:37:59.170 \longrightarrow 00:38:00.914$ allara being an induction,

NOTE Confidence: 0.8308252

 $00{:}38{:}00.920 \dashrightarrow 00{:}38{:}03.125$ but could get in conduct

NOTE Confidence: 0.8308252

 $00{:}38{:}03.125 \dashrightarrow 00{:}38{:}05.330$ consolidation and then now I'm

NOTE Confidence: 0.8308252

 $00{:}38{:}05.419 \dashrightarrow 00{:}38{:}08.342$ sorry this is end of induction, MRD.

NOTE Confidence: 0.8308252

 $00:38:08.342 \longrightarrow 00:38:10.934$ Those who got no LL Bean

NOTE Confidence: 0.8308252

 $00:38:10.934 \longrightarrow 00:38:13.159$ versus all comers for 1231.

NOTE Confidence: 0.8308252

 $00:38:13.160 \longrightarrow 00:38:15.782$ There was actually much higher MRD

NOTE Confidence: 0.8308252

 $00:38:15.782 \longrightarrow 00:38:18.839$ negativity in those in the later study.

NOTE Confidence: 0.8308252

 $00:38:18.840 \longrightarrow 00:38:21.798$ The 1231 that looked at Partism.

 $00:38:21.800 \longrightarrow 00:38:23.620$ Which is interesting because MRD

NOTE Confidence: 0.8308252

 $00:38:23.620 \longrightarrow 00:38:25.950$ says we typically think of as

NOTE Confidence: 0.8308252

00:38:25.950 --> 00:38:27.726 predictive of long-term outcomes,

NOTE Confidence: 0.8308252

 $00:38:27.730 \longrightarrow 00:38:28.458$ but not.

NOTE Confidence: 0.8308252

00:38:28.458 --> 00:38:30.642 It's not the only predictor in

NOTE Confidence: 0.8308252

 $00:38:30.642 \longrightarrow 00:38:32.860$ that kind of emphasizes that.

NOTE Confidence: 0.8308252

 $00:38:32.860 \longrightarrow 00:38:35.254$ The other thing that was really

NOTE Confidence: 0.8308252

 $00:38:35.254 \dashrightarrow 00:38:37.606$ remarkable was that there was a

NOTE Confidence: 0.8308252

 $00{:}38{:}37.606 \dashrightarrow 00{:}38{:}39.664$ lot more high grade toxicity in

NOTE Confidence: 0.8308252

00:38:39.664 --> 00:38:41.731 the PARTISM study compared to

NOTE Confidence: 0.8308252

00:38:41.731 --> 00:38:43.916 the previous Miller being study,

NOTE Confidence: 0.8308252

 $00:38:43.920 \longrightarrow 00:38:46.349$ and this is not clear why it's

NOTE Confidence: 0.8308252

 $00{:}38{:}46.349 \dashrightarrow 00{:}38{:}49.204$ speculated to be due to the dexame thasone

NOTE Confidence: 0.8308252

 $00:38:49.204 \longrightarrow 00:38:51.814$ and the extra peg as paragine ease.

NOTE Confidence: 0.8308252

 $00:38:51.820 \longrightarrow 00:38:53.152$ So while the?

00:38:53.152 --> 00:38:55.372 Total number of events or

NOTE Confidence: 0.8308252

00:38:55.372 --> 00:38:57.795 toxic events were higher in

NOTE Confidence: 0.8308252

 $00:38:57.795 \longrightarrow 00:39:00.200$ the precursor study that 0434.

NOTE Confidence: 0.8308252

 $00:39:00.200 \longrightarrow 00:39:02.804$ There was a much higher rate of

NOTE Confidence: 0.8308252

 $00:39:02.804 \longrightarrow 00:39:05.580$ higher grade ones and they were

NOTE Confidence: 0.8308252

 $00:39:05.580 \longrightarrow 00:39:07.680$ due to infections predominantly

NOTE Confidence: 0.8308252

 $00:39:07.680 \longrightarrow 00:39:10.170$ and particularly fungal infections.

NOTE Confidence: 0.8308252

00:39:10.170 --> 00:39:13.495 The next thing that was examined was

NOTE Confidence: 0.8308252

 $00{:}39{:}13.495 \dashrightarrow 00{:}39{:}15.870$ the cranial radiation, 'cause again,

NOTE Confidence: 0.8308252

 $00:39:15.870 \longrightarrow 00:39:20.182$ we had this opportunity to look in 043, four.

NOTE Confidence: 0.8308252

 $00:39:20.182 \longrightarrow 00:39:23.254 90\%$ of patients had cranial radiation.

NOTE Confidence: 0.8308252

 $00:39:23.260 \longrightarrow 00:39:26.730$ While in the current 1231,

NOTE Confidence: 0.8308252

 $00:39:26.730 \longrightarrow 00:39:32.266$ only 10% did and can see that the.

NOTE Confidence: 0.7734715

00:39:36.290 --> 00:39:41.954 The. CNS relapse rate was

NOTE Confidence: 0.7734715

 $00:39:41.954 \longrightarrow 00:39:46.109$ higher in the 1231 study.

NOTE Confidence: 0.7734715

00:39:46.110 --> 00:39:47.950 But not overall relapse,

 $00:39:47.950 \longrightarrow 00:39:51.670$ and that's what we call Pete sometimes.

NOTE Confidence: 0.7734715

 $00:39:51.670 \longrightarrow 00:39:54.520$ The Pillsbury Doughboy effect where you

NOTE Confidence: 0.7734715

 $00:39:54.520 \longrightarrow 00:39:57.729$ shift relapses to bone marrow relapses,

NOTE Confidence: 0.7734715

 $00:39:57.730 \longrightarrow 00:40:00.330$ but there was no diff.

NOTE Confidence: 0.7734715

 $00:40:00.330 \longrightarrow 00:40:01.965$ And overall relapses,

NOTE Confidence: 0.7734715

 $00:40:01.965 \longrightarrow 00:40:05.780$ so this was felt as justification that

NOTE Confidence: 0.7734715

 $00:40:05.875 \longrightarrow 00:40:09.420$ cranial radiation could be illuminated.

NOTE Confidence: 0.7734715

 $00{:}40{:}09.420 \dashrightarrow 00{:}40{:}12.489$ So next I'd like to go to an abstract

NOTE Confidence: 0.7734715

 $00:40:12.489 \longrightarrow 00:40:15.588$ that looks at Linda to mmap versus

NOTE Confidence: 0.7734715

00:40:15.588 --> 00:40:18.110 intensive chemo for first relapse,

NOTE Confidence: 0.7734715

 $00{:}40{:}18.110 \dashrightarrow 00{:}40{:}20.216$ standard of care in first relapse

NOTE Confidence: 0.7734715

00:40:20.216 --> 00:40:22.740 therapy is to give three blocks

NOTE Confidence: 0.7734715

 $00{:}40{:}22.740 \dashrightarrow 00{:}40{:}24.318$ of intensive chemotherapy.

NOTE Confidence: 0.7734715

 $00{:}40{:}24.320 \dashrightarrow 00{:}40{:}27.232$ This is from a European study and

NOTE Confidence: 0.7734715

 $00:40:27.232 \longrightarrow 00:40:30.143$ they call those blocks HC 1 HC 2

 $00:40:30.143 \longrightarrow 00:40:32.792$ and HD three in this study after

NOTE Confidence: 0.7734715

 $00:40:32.792 \longrightarrow 00:40:35.750$ the first 2 blocks patients were

NOTE Confidence: 0.7734715

 $00{:}40{:}35.750 \dashrightarrow 00{:}40{:}39.290$ randomized to blend into mmap or two.

NOTE Confidence: 0.7734715

 $00:40:39.290 \longrightarrow 00:40:41.992$ Third block and then they went to

NOTE Confidence: 0.7734715

00:40:41.992 --> 00:40:44.230 stem cell transplant if they could.

NOTE Confidence: 0.7734715

 $00:40:44.230 \longrightarrow 00:40:46.660$ And this study also ended early.

NOTE Confidence: 0.7734715

00:40:46.660 --> 00:40:48.982 It was supposed to enroll 202

NOTE Confidence: 0.7734715

 $00:40:48.982 \longrightarrow 00:40:51.429$ patients and only 100 patients or

NOTE Confidence: 0.7734715

 $00{:}40{:}51.429 \dashrightarrow 00{:}40{:}53.889$ so were enrolled because there was

NOTE Confidence: 0.7734715

 $00{:}40{:}53.889 \dashrightarrow 00{:}40{:}56.795$ a clear result that there was an

NOTE Confidence: 0.7734715

00:40:56.795 --> 00:41:00.820 advantage of blended to mmap both in.

NOTE Confidence: 0.7734715

00:41:00.820 --> 00:41:01.672 Add.

NOTE Confidence: 0.7734715

 $00{:}41{:}01.672 \dashrightarrow 00{:}41{:}06.784$ Event free survival and in time

NOTE Confidence: 0.7734715

 $00:41:06.784 \longrightarrow 00:41:10.760$ from diagnosis to relapse.

NOTE Confidence: 0.7734715

 $00:41:10.760 \longrightarrow 00:41:12.780$ There is also an advantage.

NOTE Confidence: 0.7734715

00:41:12.780 --> 00:41:14.885 A significant advantage in overall

 $00:41:14.885 \longrightarrow 00:41:17.610$ survival in the blue netuma Bab arm.

NOTE Confidence: 0.79039747

 $00:41:20.030 \longrightarrow 00:41:23.060$ There was superior MRD remission that

NOTE Confidence: 0.79039747

 $00:41:23.060 \longrightarrow 00:41:26.365$ was assessed by PCR in the billing

NOTE Confidence: 0.79039747

 $00:41:26.365 \longrightarrow 00:41:29.701$ to mmap arm overall and it was more

NOTE Confidence: 0.79039747

00:41:29.701 --> 00:41:32.865 remarkable or in those that had a

NOTE Confidence: 0.79039747

00:41:32.865 --> 00:41:35.495 higher tumor burden load initially,

NOTE Confidence: 0.79039747

 $00:41:35.495 \longrightarrow 00:41:39.520$ so it was most remarkable in those

NOTE Confidence: 0.79039747

 $00:41:39.630 \longrightarrow 00:41:42.558$ who had more MRD at baseline.

NOTE Confidence: 0.79039747

 $00:41:42.560 \longrightarrow 00:41:45.435$ There was very notably much

NOTE Confidence: 0.79039747

 $00:41:45.435 \longrightarrow 00:41:46.585$ decreased toxicity,

NOTE Confidence: 0.79039747

00:41:46.590 --> 00:41:50.040 so while overall toxicity was similar,

NOTE Confidence: 0.79039747

 $00:41:50.040 \longrightarrow 00:41:54.135$ there was a much lower rate of

NOTE Confidence: 0.79039747

 $00:41:54.135 \longrightarrow 00:41:57.510$ serious toxicity of 24% versus 43%,

NOTE Confidence: 0.79039747

 $00:41:57.510 \longrightarrow 00:42:01.535$ and those are greater than Grade 3,

NOTE Confidence: 0.79039747

 $00:42:01.540 \longrightarrow 00:42:04.399$ so this changes.

 $00:42:04.400 \longrightarrow 00:42:05.706$ The construct,

NOTE Confidence: 0.79039747

 $00{:}42{:}05.706 {\:{\circ}{\circ}{\circ}}>00{:}42{:}08.318$ because previously the standard,

NOTE Confidence: 0.79039747

 $00:42:08.320 \longrightarrow 00:42:14.186$ was to get three blocks of chemotherapy.

NOTE Confidence: 0.79039747

 $00:42:14.190 \longrightarrow 00:42:15.930$ Before transplant in first relapse

NOTE Confidence: 0.79039747

 $00:42:15.930 \longrightarrow 00:42:18.063$ and this also mirrors a similar

NOTE Confidence: 0.79039747

 $00:42:18.063 \longrightarrow 00:42:20.331$ see OG study that also found some

NOTE Confidence: 0.79039747

 $00:42:20.331 \longrightarrow 00:42:22.487$ results that were reported last year.

NOTE Confidence: 0.78015244

00:42:26.870 --> 00:42:29.372 What there is always concerned about

NOTE Confidence: 0.78015244

 $00:42:29.372 \longrightarrow 00:42:31.040$ neurological toxicity with cytokine

NOTE Confidence: 0.78015244

 $00:42:31.100 \longrightarrow 00:42:32.780$ release syndrome with netuma.

NOTE Confidence: 0.78015244

 $00:42:32.780 \longrightarrow 00:42:34.464$ But while there were

NOTE Confidence: 0.78015244

 $00:42:34.464 \longrightarrow 00:42:35.727$ more neurological events,

NOTE Confidence: 0.78015244

 $00:42:35.730 \longrightarrow 00:42:38.530$ there were no Grade 3 or higher

NOTE Confidence: 0.78015244

 $00:42:38.530 \longrightarrow 00:42:41.638$ events in CR S and there weren't.

NOTE Confidence: 0.78015244

 $00:42:41.640 \longrightarrow 00:42:44.752$ There was really not an increase in severe

NOTE Confidence: 0.78015244

 $00{:}42{:}44.752 \dashrightarrow 00{:}42{:}47.549$ events or moderate or severe events,

 $00:42:47.550 \longrightarrow 00:42:50.742$ so the third study that also relates

NOTE Confidence: 0.78015244

 $00:42:50.742 \longrightarrow 00:42:54.162$ to blend into my map has to do

NOTE Confidence: 0.78015244

00:42:54.162 --> 00:42:56.580 with whether Blend into my map.

NOTE Confidence: 0.78015244

 $00:42:56.580 \longrightarrow 00:43:01.690$ Treatment prior to car affects car outcomes.

NOTE Confidence: 0.78015244

 $00:43:01.690 \longrightarrow 00:43:04.630$ And this is a multi site study.

NOTE Confidence: 0.78015244

 $00:43:04.630 \longrightarrow 00:43:07.150$ I'm so just there will be

NOTE Confidence: 0.78015244

 $00:43:07.150 \longrightarrow 00:43:08.830$ a separate car session,

NOTE Confidence: 0.78015244

 $00:43:08.830 \longrightarrow 00:43:11.693$ but this slide is here if people

NOTE Confidence: 0.78015244

 $00:43:11.693 \longrightarrow 00:43:14.288$ want to look at this later.

NOTE Confidence: 0.78015244

 $00{:}43{:}14.290 \dashrightarrow 00{:}43{:}17.332$ But basically a patients T cells

NOTE Confidence: 0.78015244

00:43:17.332 --> 00:43:19.926 are harvested and then they

NOTE Confidence: 0.78015244

 $00:43:19.926 \longrightarrow 00:43:22.770$ are expanded and then they are.

NOTE Confidence: 0.78015244

 $00{:}43{:}22.770 \dashrightarrow 00{:}43{:}28.446$ They. Are transfected to T cells

NOTE Confidence: 0.78015244

 $00:43:28.446 \longrightarrow 00:43:32.230$ via viral vector 2.

NOTE Confidence: 0.78015244

00:43:32.230 --> 00:43:36.365 Have T cell receptor gamma and

 $00:43:36.365 \longrightarrow 00:43:38.033$ then often something else.

NOTE Confidence: 0.78015244

 $00:43:38.040 \longrightarrow 00:43:41.384$ In this case it was for one BB,

NOTE Confidence: 0.78015244

 $00:43:41.390 \longrightarrow 00:43:45.184$ but it can be different things and

NOTE Confidence: 0.78015244

 $00:43:45.184 \longrightarrow 00:43:48.140$ it's reinfused and then it can.

NOTE Confidence: 0.78015244

 $00:43:48.140 \longrightarrow 00:43:51.035$ Go after the particular marker

NOTE Confidence: 0.78015244

 $00:43:51.035 \longrightarrow 00:43:53.930$ on the on the tumor.

NOTE Confidence: 0.78015244

 $00:43:53.930 \longrightarrow 00:43:56.744$ So sitting 19 modulation represents a

NOTE Confidence: 0.78015244

00:43:56.744 --> 00:43:59.870 mechanism of resistance to CD 19 targeting.

NOTE Confidence: 0.78015244

 $00:43:59.870 \longrightarrow 00:44:03.142$ It's both blue 2:00 AM AB and CD19

NOTE Confidence: 0.78015244

 $00:44:03.142 \longrightarrow 00:44:07.130$ car T cells are associated lineages.

NOTE Confidence: 0.78015244

 $00:44:07.130 \longrightarrow 00:44:08.396$ Switch CD 19.

NOTE Confidence: 0.78015244

 $00:44:08.396 \longrightarrow 00:44:09.240$ Lawson CD.

NOTE Confidence: 0.78015244

00:44:09.240 --> 00:44:11.340 19 antigen downregulation becoming dim,

NOTE Confidence: 0.78015244

 $00{:}44{:}11.340 \dashrightarrow 00{:}44{:}13.818$ and there's just limited impact on

NOTE Confidence: 0.78015244

 $00:44:13.818 \longrightarrow 00:44:16.390$ the how they impact each other.

NOTE Confidence: 0.78015244

 $00:44:16.390 \longrightarrow 00:44:18.500$ This was a multicenter study.

 $00:44:18.500 \longrightarrow 00:44:20.605$ There were three different car

NOTE Confidence: 0.78015244

 $00:44:20.605 \longrightarrow 00:44:21.868$ T cell constructs,

NOTE Confidence: 0.78015244

 $00{:}44{:}21.870 \dashrightarrow 00{:}44{:}24.810$ and it was a seven site study.

NOTE Confidence: 0.78015244

 $00:44:24.810 \longrightarrow 00:44:27.540$ Their median post infusion followed was

NOTE Confidence: 0.78015244

00:44:27.540 --> 00:44:31.480 2.3 years and this occurred over seven years.

NOTE Confidence: 0.78015244 00:44:31.480 --> 00:44:32.008 Um,

NOTE Confidence: 0.78015244

00:44:32.008 --> 00:44:35.704 75 of the 420 patients had had

NOTE Confidence: 0.78015244

 $00:44:35.704 \longrightarrow 00:44:36.760$ previous blenner,

NOTE Confidence: 0.78015244

 $00:44:36.760 \longrightarrow 00:44:40.084$ of which 57.3% achieved CR and

NOTE Confidence: 0.78015244

 $00{:}44{:}40.084 \dashrightarrow 00{:}44{:}43.609$ the median time from last minute

NOTE Confidence: 0.78015244

 $00:44:43.609 \longrightarrow 00:44:47.197$ to the current Fusion in these

NOTE Confidence: 0.78015244

00:44:47.197 --> 00:44:49.480 patients was 129 days.

NOTE Confidence: 0.78015244

 $00:44:49.480 \longrightarrow 00:44:52.350$ So there was no difference in those

NOTE Confidence: 0.78015244

 $00{:}44{:}52.350 \dashrightarrow 00{:}44{:}55.378$ who had had Blender and prior blenna

NOTE Confidence: 0.78015244

 $00:44:55.378 \longrightarrow 00:44:59.778$ and those who did not in terms of MRD status,

 $00:44:59.780 \longrightarrow 00:45:03.212$ whether they had an empty or M3 marrow

NOTE Confidence: 0.78015244

 $00:45:03.212 \longrightarrow 00:45:04.926$ CNS status, extramedullary disease,

NOTE Confidence: 0.78015244

 $00:45:04.926 \longrightarrow 00:45:06.210$ or circulating glass.

NOTE Confidence: 0.78015244

00:45:06.210 --> 00:45:09.846 There was a higher rate in those who had

NOTE Confidence: 0.78015244

00:45:09.846 --> 00:45:13.495 prior brunette with the KM T2A R mutation,

NOTE Confidence: 0.78015244

 $00:45:13.500 \longrightarrow 00:45:17.070$ maybe indicating that there were more younger

NOTE Confidence: 0.78015244

 $00:45:17.070 \longrightarrow 00:45:20.457$ patients 'cause that occurs more in infants.

NOTE Confidence: 0.78015244

 $00{:}45{:}20.460 \dashrightarrow 00{:}45{:}24.093$ And and the overall response to the

NOTE Confidence: 0.78015244

00:45:24.093 --> 00:45:28.098 car was great in these 120 patients,

NOTE Confidence: 0.78015244

 $00:45:28.100 \longrightarrow 00:45:29.741$ 91% achieved CR,

NOTE Confidence: 0.78015244

 $00{:}45{:}29.741 \dashrightarrow 00{:}45{:}33.023$ 88% were MRD negative and the

NOTE Confidence: 0.78015244

 $00:45:33.023 \longrightarrow 00:45:35.200$ relapse rate was 39.8%,

NOTE Confidence: 0.78015244

 $00:45:35.200 \longrightarrow 00:45:35.696$ however.

NOTE Confidence: 0.78015244

 $00:45:35.696 \longrightarrow 00:45:38.176$ Blender patients are the ones

NOTE Confidence: 0.78015244

00:45:38.176 --> 00:45:41.206 who had previously know were more

NOTE Confidence: 0.78015244

 $00:45:41.206 \longrightarrow 00:45:43.606$ likely to have residual disease.

 $00:45:43.610 \longrightarrow 00:45:45.378$ Post CD 19 car,

NOTE Confidence: 0.78015244

 $00:45:45.378 \longrightarrow 00:45:49.365$ so it was 18% if one had prior blina

NOTE Confidence: 0.78015244

 $00:45:49.365 \longrightarrow 00:45:52.910$ and only 7% if there was previous blender.

NOTE Confidence: 0.78015244

 $00:45:52.910 \longrightarrow 00:45:55.574$ This also corresponded to worse relapse

NOTE Confidence: 0.78015244

 $00:45:55.574 \longrightarrow 00:45:58.230$ free survival both at six months.

NOTE Confidence: 0.78015244

 $00:45:58.230 \longrightarrow 00:46:01.324$ Anna, 12 months and the median relapse.

NOTE Confidence: 0.78015244

 $00:46:01.330 \longrightarrow 00:46:03.540$ Free survival was twenty months.

NOTE Confidence: 0.78015244

 $00:46:03.540 \longrightarrow 00:46:07.236$ If one had had previous planner and 45

NOTE Confidence: 0.78015244

 $00:46:07.236 \longrightarrow 00:46:08.930$ months. If there had been no blender.

NOTE Confidence: 0.8373493

 $00:46:11.940 \longrightarrow 00:46:13.760$ So we're not is associated.

NOTE Confidence: 0.8373493

 $00:46:13.760 \longrightarrow 00:46:16.259$ Also was also associated with a higher

NOTE Confidence: 0.8373493

 $00{:}46{:}16.259 \dashrightarrow 00{:}46{:}18.859$ incidence of CD 19 modulation pre car.

NOTE Confidence: 0.8373493

 $00:46:18.860 \longrightarrow 00:46:21.038$ So the incidents of CD 19,

NOTE Confidence: 0.8373493

00:46:21.040 --> 00:46:22.768 negative, dim or partial

NOTE Confidence: 0.8373493

 $00:46:22.768 \longrightarrow 00:46:25.360$ expression prior to the car was.

00:46:25.360 --> 00:46:28.006 Was higher in prior blender patients,

NOTE Confidence: 0.8373493

 $00{:}46{:}28.010 \dashrightarrow 00{:}46{:}31.626$ 13% versus 6% and in patients in which

NOTE Confidence: 0.8373493

 $00:46:31.626 \longrightarrow 00:46:35.550$ there was a pre and post Lena CD 19

NOTE Confidence: 0.8373493

 $00:46:35.550 \longrightarrow 00:46:38.150$ expression 11% had evolution to CD.

NOTE Confidence: 0.8373493

 $00:46:38.150 \longrightarrow 00:46:39.470$ 19 dim expression.

NOTE Confidence: 0.84853727

 $00:46:42.460 \longrightarrow 00:46:45.484$ Going to change gears now and talk a

NOTE Confidence: 0.84853727

 $00:46:45.484 \longrightarrow 00:46:47.822$ little bit about toxicities because

NOTE Confidence: 0.84853727

 $00:46:47.822 \longrightarrow 00:46:50.816$ and listen to young adults were

NOTE Confidence: 0.84853727

 $00:46:50.816 \longrightarrow 00:46:53.330$ found to have inferior outcomes

NOTE Confidence: 0.84853727

 $00:46:53.330 \longrightarrow 00:46:56.228$ compared to children and do better

NOTE Confidence: 0.84853727

 $00{:}46{:}56.230 \dashrightarrow 00{:}47{:}00.416$ when they are treated with PD type.

NOTE Confidence: 0.84853727

 $00:47:00.420 \longrightarrow 00:47:04.004$ Regiments we can talk about this a little

NOTE Confidence: 0.84853727

 $00:47:04.004 \longrightarrow 00:47:07.140$ bit more, but there's some trade offs.

NOTE Confidence: 0.84853727

 $00:47:07.140 \longrightarrow 00:47:10.716$ And so as especially in the early 20s,

NOTE Confidence: 0.84853727

 $00:47:10.720 \longrightarrow 00:47:13.624$ there is an advantage with pediatric

NOTE Confidence: 0.84853727

 $00{:}47{:}13.624 \dashrightarrow 00{:}47{:}16.099$ regiments rather than this C vad,

 $00:47:16.100 \longrightarrow 00:47:19.364$ this has to be reassessed in

NOTE Confidence: 0.84853727

00:47:19.364 --> 00:47:22.570 the era of cellular therapy.

NOTE Confidence: 0.84853727

 $00:47:22.570 \longrightarrow 00:47:25.639$ So the goal of this study was to look

NOTE Confidence: 0.84853727

00:47:25.639 --> 00:47:28.474 at bone toxicities and it was found

NOTE Confidence: 0.84853727

 $00:47:28.474 \longrightarrow 00:47:31.272$ that this is a retrospective study

NOTE Confidence: 0.84853727

 $00:47:31.272 \longrightarrow 00:47:34.042$ of Dana Farber consortia patients

NOTE Confidence: 0.84853727

 $00:47:34.042 \longrightarrow 00:47:37.750$ who were up to 50 years and initially

NOTE Confidence: 0.84853727

 $00{:}47{:}37.750 \dashrightarrow 00{:}47{:}40.715$ they were true with the coli based

NOTE Confidence: 0.84853727

 $00:47:40.715 \longrightarrow 00:47:43.634$ ones and had 30 weeks of asparagine

NOTE Confidence: 0.84853727

 $00:47:43.634 \longrightarrow 00:47:46.219$ ace depletion and then later,

NOTE Confidence: 0.84853727

 $00:47:46.220 \longrightarrow 00:47:48.276$ this changed to PEG.

NOTE Confidence: 0.84853727

 $00{:}47{:}48.276 \dashrightarrow 00{:}47{:}50.846$ And steroid Dennis Progenies associates

NOTE Confidence: 0.84853727

 $00{:}47{:}50.846 \dashrightarrow 00{:}47{:}53.517$ Austin across is glucose corduroy,

NOTE Confidence: 0.84853727

 $00:47:53.520 \longrightarrow 00:47:53.985$ corticoids,

NOTE Confidence: 0.84853727

 $00:47:53.985 \longrightarrow 00:47:56.310$ disrupt osteoblasts and cause ischaemia.

 $00:47:56.310 \longrightarrow 00:47:59.124$ It's not really clear how asparagine

NOTE Confidence: 0.84853727

00:47:59.124 --> 00:48:01.889 ease results in Aston across is,

NOTE Confidence: 0.84853727

 $00:48:01.890 \longrightarrow 00:48:04.220$ but it is highly associated,

NOTE Confidence: 0.84853727

 $00:48:04.220 \longrightarrow 00:48:06.740$ maybe due to hypercoagulability in

NOTE Confidence: 0.84853727

 $00:48:06.740 \longrightarrow 00:48:09.260$ altered lipid metabolism and previous

NOTE Confidence: 0.84853727

 $00:48:09.336 \longrightarrow 00:48:11.808$ ranges and kids was incidents of

NOTE Confidence: 0.84853727

00:48:11.808 --> 00:48:14.574 osteonecrosis of 69% much higher in

NOTE Confidence: 0.84853727

 $00:48:14.574 \longrightarrow 00:48:18.919$ adolescence as high in the high teens or 20s.

NOTE Confidence: 0.84853727

00:48:18.920 --> 00:48:22.441 And a good proportion needs surgery and

NOTE Confidence: 0.84853727

 $00:48:22.441 \longrightarrow 00:48:25.598$ and joint replacement as as 20 year olds.

NOTE Confidence: 0.84853727

 $00:48:25.600 \longrightarrow 00:48:28.096$ So the goal is to understand

NOTE Confidence: 0.84853727

 $00:48:28.096 \longrightarrow 00:48:30.490$ this incidence and risk factors.

NOTE Confidence: 0.84853727

 $00:48:30.490 \longrightarrow 00:48:33.652$ This has this study had 367

NOTE Confidence: 0.84853727

 $00:48:33.652 \longrightarrow 00:48:35.760$ patients from 25 institutions.

NOTE Confidence: 0.84853727

 $00:48:35.760 \longrightarrow 00:48:39.876$ And it was found that 17% of them

NOTE Confidence: 0.84853727

 $00{:}48{:}39.876 \dashrightarrow 00{:}48{:}42.068$ developed osteonecrosis and a

 $00:48:42.068 \longrightarrow 00:48:45.544$ median time to event was 1.6 years

NOTE Confidence: 0.84853727

 $00:48:45.544 \longrightarrow 00:48:48.764$ and 12% developed a fracture with

NOTE Confidence: 0.84853727

 $00:48:48.764 \longrightarrow 00:48:53.200$ median time to event of 1.4 years.

NOTE Confidence: 0.84853727

 $00:48:53.200 \longrightarrow 00:48:55.576$ When one looked at risk factors,

NOTE Confidence: 0.84853727

 $00:48:55.580 \longrightarrow 00:48:58.789$ those under 30 years had a 21% risk,

NOTE Confidence: 0.84853727

 $00:48:58.789 \longrightarrow 00:49:01.792$ so this is really a condition of

NOTE Confidence: 0.84853727

 $00:49:01.792 \longrightarrow 00:49:03.770$ adolescents and young adults.

NOTE Confidence: 0.84853727

 $00{:}49{:}03.770 \dashrightarrow 00{:}49{:}06.618$ With only 8% in those over 30 years

NOTE Confidence: 0.84853727

 $00:49:06.618 \longrightarrow 00:49:09.115$ and there was a much higher risk

NOTE Confidence: 0.84853727

 $00:49:09.115 \longrightarrow 00:49:12.009$ in those who had peg based therapy.

NOTE Confidence: 0.84853727

 $00:49:12.010 \longrightarrow 00:49:13.258$ Rather than E.

NOTE Confidence: 0.84853727

00:49:13.258 --> 00:49:14.506 Coli based therapy,

NOTE Confidence: 0.84853727

 $00:49:14.510 \longrightarrow 00:49:18.110$ almost a fivefold increased risk.

NOTE Confidence: 0.84853727

 $00{:}49{:}18.110 \dashrightarrow 00{:}49{:}20.565$ So the potential mechanisms are

NOTE Confidence: 0.84853727

 $00:49:20.565 \longrightarrow 00:49:23.570$ not known in the later eras,

 $00:49:23.570 \longrightarrow 00:49:25.550$ along with Pegasus Virginis

NOTE Confidence: 0.84853727

 $00:49:25.550 \longrightarrow 00:49:26.540$ more dexamethasone.

NOTE Confidence: 0.84853727

00:49:26.540 --> 00:49:28.845 Dexamethasone is uniformly used and

NOTE Confidence: 0.84853727

 $00:49:28.845 \longrightarrow 00:49:31.150$ it was proposed that asparagine

NOTE Confidence: 0.84853727

00:49:31.219 --> 00:49:33.487 ease could cause hypoalbuminemia,

NOTE Confidence: 0.84853727

 $00:49:33.490 \longrightarrow 00:49:35.786$ which decreases dex clearance,

NOTE Confidence: 0.84853727

 $00:49:35.786 \longrightarrow 00:49:39.230$ and dexamethasone is a steroid more

NOTE Confidence: 0.84853727

 $00:49:39.325 \longrightarrow 00:49:42.457$ than Prednisone that is a much

NOTE Confidence: 0.84853727

 $00{:}49{:}42.457 \dashrightarrow 00{:}49{:}44.545$ higher risk of osteonecrosis.

NOTE Confidence: 0.84853727

00:49:44.550 --> 00:49:46.325 And Asperges clearance is higher

NOTE Confidence: 0.84853727

00:49:46.325 --> 00:49:48.448 free collide that Nino Peg Lated

NOTE Confidence: 0.84853727

 $00:49:48.448 \longrightarrow 00:49:50.450$ is meant to be there along time,

NOTE Confidence: 0.84853727

 $00:49:50.450 \longrightarrow 00:49:51.630$ and maybe that's it.

NOTE Confidence: 0.84853727

 $00{:}49{:}51.630 \dashrightarrow 00{:}49{:}53.400$ The investigators plan to look at

NOTE Confidence: 0.84853727

 $00:49:53.457 \longrightarrow 00:49:56.026$ asparagine ace levels more closely, and this.

NOTE Confidence: 0.84853727

 $00:49:56.026 \longrightarrow 00:49:57.338$ I'll just summarize this.

 $00:49:57.340 \longrightarrow 00:50:00.382$ This abstract would seem to be made for this.

NOTE Confidence: 0.84853727

 $00{:}50{:}00.390 \dashrightarrow 00{:}50{:}03.974$ In which this group looked at asperges

NOTE Confidence: 0.84853727

00:50:03.974 --> 00:50:06.869 levels and toxicity and found that

NOTE Confidence: 0.84853727

 $00:50:06.869 \longrightarrow 00:50:09.830$ high levels of this urge nice was

NOTE Confidence: 0.84853727

 $00:50:09.927 \longrightarrow 00:50:12.177$ not associated with an increased

NOTE Confidence: 0.84853727

00:50:12.177 --> 00:50:15.366 risk of any of the known toxicities,

NOTE Confidence: 0.84853727

00:50:15.366 --> 00:50:16.770 including pancreatitis, thromboembolism,

NOTE Confidence: 0.84853727

 $00:50:16.770 \longrightarrow 00:50:18.800$ or osteonecrosis.

NOTE Confidence: 0.84853727

 $00:50:18.800 \longrightarrow 00:50:22.238$ So the the answer it may be not as

NOTE Confidence: 0.84853727

 $00:50:22.238 \longrightarrow 00:50:25.199$ simple as that and may have to be

NOTE Confidence: 0.84853727

 $00:50:25.199 \longrightarrow 00:50:28.229$ looked at a little more closely.

NOTE Confidence: 0.84853727

 $00{:}50{:}28.230 \dashrightarrow 00{:}50{:}30.744$ We have several studies open here

NOTE Confidence: 0.84853727

 $00:50:30.744 \longrightarrow 00:50:32.420$ at Yale that build

NOTE Confidence: 0.8508311

 $00:50:32.505 \longrightarrow 00:50:36.530$ on this. We have a study of.

NOTE Confidence: 0.8508311

00:50:36.530 --> 00:50:39.446 Tessa Jean Luc's Loosle Carty 19.

00:50:39.450 --> 00:50:42.360 Made by Novartis in first line,

NOTE Confidence: 0.8508311

 $00:50:42.360 \longrightarrow 00:50:45.209$ high risk patients who are MRD positive

NOTE Confidence: 0.8508311

00:50:45.209 --> 00:50:48.147 and end up consolidation that goes up

NOTE Confidence: 0.8508311

00:50:48.147 --> 00:50:51.398 to 25 years of age were investigating

NOTE Confidence: 0.8508311

00:50:51.398 --> 00:50:54.998 blinatumomab in standard risk patients,

NOTE Confidence: 0.8508311

 $00:50:55.000 \longrightarrow 00:50:58.465$ again with a similar goal of trying

NOTE Confidence: 0.8508311

 $00{:}50{:}58.465 \dashrightarrow 00{:}51{:}00.520$ to limit chemotherapy eventually

NOTE Confidence: 0.8508311

 $00:51:00.520 \longrightarrow 00:51:03.388$ and then we're staying in achoose

NOTE Confidence: 0.8508311

 $00{:}51{:}03.388 \dashrightarrow 00{:}51{:}06.907$ the map in high risk PML patients.

NOTE Confidence: 0.8508311

 $00:51:06.910 \longrightarrow 00:51:09.898$ To 25 years and we have a study of

NOTE Confidence: 0.8508311

 $00{:}51{:}09.898 {\:\raisebox{--}{--}}{>}\ 00{:}51{:}12.272$ Pseudomonas derived as paragine ease for

NOTE Confidence: 0.8508311

 $00:51:12.272 \longrightarrow 00:51:15.440$ those who had hypersensitive reaction to E.

NOTE Confidence: 0.8508311

 $00:51:15.440 \longrightarrow 00:51:17.060$ Coli drive, despair genese.

NOTE Confidence: 0.8508311

 $00:51:17.060 \longrightarrow 00:51:18.275$ That's any age.

NOTE Confidence: 0.8508311

 $00:51:18.280 \longrightarrow 00:51:22.016$ And finally, we have a study where bout

NOTE Confidence: 0.8508311

 $00:51:22.016 \longrightarrow 00:51:25.839$ to open a blender to mmap with Nivo.

 $00:51:25.840 \longrightarrow 00:51:28.010$ And first relapse for patients

NOTE Confidence: 0.8508311

 $00:51:28.010 \longrightarrow 00:51:29.746$ up to 31 years.

NOTE Confidence: 0.8508311

 $00:51:29.750 \longrightarrow 00:51:30.620$ So with that,

NOTE Confidence: 0.8508311

00:51:30.620 --> 00:51:33.132 I think you and I hand the floor

NOTE Confidence: 0.8508311

 $00{:}51{:}33.132 \dashrightarrow 00{:}51{:}35.556$ over to moderate are Doctor Shaw.

NOTE Confidence: 0.7141595

 $00{:}51{:}36.950 \dashrightarrow 00{:}51{:}40.766$ Thank you very much Doctor Nikolai and talk

NOTE Confidence: 0.7141595

00:51:40.766 --> 00:51:44.997 to Nina for summarizing on the newer data,

NOTE Confidence: 0.7141595

 $00:51:45.000 \longrightarrow 00:51:49.795$ which were presented at ASH last year.

NOTE Confidence: 0.7141595

00:51:49.800 --> 00:51:52.296 Regarding both pediatric, any Delta LL.

NOTE Confidence: 0.7141595

 $00:51:52.300 \longrightarrow 00:51:55.205$ So now session is open for questions

NOTE Confidence: 0.7141595

00:51:55.205 --> 00:51:58.950 and when we are waiting for so I think

NOTE Confidence: 0.8004364

 $00:51:58.950 \longrightarrow 00:52:02.278$ there are some questions there in the chat.

NOTE Confidence: 0.8004364

 $00:52:02.280 \longrightarrow 00:52:05.260$ Yeah I saw that.

NOTE Confidence: 0.8004364

 $00:52:05.260 \longrightarrow 00:52:08.554$ Some of them are just comments, but you know.

NOTE Confidence: 0.8004364

 $00:52:08.554 \longrightarrow 00:52:11.470$ So one of them is addressed to me.

00:52:11.470 --> 00:52:14.186 Yeah, would you use Hyper C Vad

NOTE Confidence: 0.8004364

 $00{:}52{:}14.186 \dashrightarrow 00{:}52{:}16.250$ plus blinatumomab approach in your

NOTE Confidence: 0.8004364

00:52:16.250 --> 00:52:18.310 practice today to avoid transplant?

NOTE Confidence: 0.8004364

 $00:52:18.310 \dashrightarrow 00:52:21.390$ So I do have to mention that in that study

NOTE Confidence: 0.8004364

00:52:21.468 --> 00:52:24.478 which I think enrolled about 39 patients,

NOTE Confidence: 0.8004364

00:52:24.480 --> 00:52:27.016 12 patients went to transplant and you know

NOTE Confidence: 0.8004364

 $00:52:27.016 \longrightarrow 00:52:29.929$ 10 of them actually went before relapse.

NOTE Confidence: 0.8004364

 $00:52:29.930 \longrightarrow 00:52:31.904$ So even folks in MD Anderson

NOTE Confidence: 0.8004364

 $00:52:31.904 \longrightarrow 00:52:33.920$ who are using this approach,

NOTE Confidence: 0.8004364

 $00:52:33.920 \longrightarrow 00:52:36.174$ they still using transplant as a modality

NOTE Confidence: 0.8004364

 $00:52:36.174 \longrightarrow 00:52:38.406$ for this patient after they accomplished

NOTE Confidence: 0.8004364

 $00:52:38.406 \longrightarrow 00:52:40.812$ CR with without minimal residual disease.

NOTE Confidence: 0.8004364

 $00:52:40.820 \longrightarrow 00:52:43.588$ So I think the transplant is reserved for

NOTE Confidence: 0.8004364

 $00:52:43.588 \longrightarrow 00:52:46.288$ high risk patients as defined by their

NOTE Confidence: 0.8004364

00:52:46.288 --> 00:52:48.770 karyotype of maletis pH like status.

NOTE Confidence: 0.8004364

00:52:48.770 --> 00:52:49.775 Anti P53 expression.

 $00:52:49.775 \longrightarrow 00:52:53.239$ I have TP 53 mutations so I don't think it.

NOTE Confidence: 0.8004364

 $00:52:53.240 \longrightarrow 00:52:55.247$ I think it is too soon to say that

NOTE Confidence: 0.8004364

 $00:52:55.247 \longrightarrow 00:52:57.230$ this particular approach will eliminate

NOTE Confidence: 0.8004364

 $00:52:57.230 \longrightarrow 00:52:59.350$ the transplant but certainly gives

NOTE Confidence: 0.8004364

 $00:52:59.350 \longrightarrow 00:53:01.716$ hope to patients who cannot have

NOTE Confidence: 0.8004364

 $00{:}53{:}01.716 --> 00{:}53{:}03.220$ transplant for whatever reason.

NOTE Confidence: 0.8004364

 $00:53:03.220 \longrightarrow 00:53:05.484$ An at least maybe a choice for some

NOTE Confidence: 0.8004364

00:53:05.484 --> 00:53:07.766 of those patients who have disease

NOTE Confidence: 0.8004364

 $00:53:07.766 \longrightarrow 00:53:09.410$ with less risky features.

NOTE Confidence: 0.8807261

 $00{:}53{:}10.420 \dashrightarrow 00{:}53{:}13.970$ So I and I would say that that is a

NOTE Confidence: 0.8807261

 $00:53:14.078 \longrightarrow 00:53:18.038$ point of convergence in our literature.

NOTE Confidence: 0.8807261

 $00:53:18.040 \longrightarrow 00:53:20.890$ So a patient in their 20s,

NOTE Confidence: 0.8807261

 $00{:}53{:}20.890 \dashrightarrow 00{:}53{:}24.222$ if they came in through a pediatric

NOTE Confidence: 0.8807261

 $00:53:24.222 \longrightarrow 00:53:27.211$ treatment center, would not accept

NOTE Confidence: 0.8807261

 $00:53:27.211 \longrightarrow 00:53:29.919$ for certain molecular findings.

 $00:53:29.920 \longrightarrow 00:53:32.060$ Would not automatically get transplanted

NOTE Confidence: 0.8807261

 $00:53:32.060 \longrightarrow 00:53:34.440$ first remission because we have it.

NOTE Confidence: 0.8807261

 $00:53:34.440 \longrightarrow 00:53:37.317$ We don't use the high perceived backbone,

NOTE Confidence: 0.8807261

 $00:53:37.320 \longrightarrow 00:53:40.920$ we use the BFM backbone.

NOTE Confidence: 0.8807261

 $00:53:40.920 \longrightarrow 00:53:43.452$ And use a lot more asparagine

NOTE Confidence: 0.8807261

 $00:53:43.452 \longrightarrow 00:53:44.718$ ease and methotrexate.

NOTE Confidence: 0.8807261

 $00:53:44.720 \longrightarrow 00:53:46.830$ But the and and antimetabolites,

NOTE Confidence: 0.8807261

 $00:53:46.830 \longrightarrow 00:53:51.006$ but the we have we have survival event free

NOTE Confidence: 0.8807261

 $00:53:51.006 \longrightarrow 00:53:54.419$ survival in the in the 80s in that group,

NOTE Confidence: 0.8807261

 $00:53:54.420 \longrightarrow 00:53:55.964$ but what I think.

NOTE Confidence: 0.8807261

 $00{:}53{:}55.964 \dashrightarrow 00{:}53{:}58.760$ But I think the challenges and what

NOTE Confidence: 0.8807261

 $00{:}53{:}58.760 {\:{\circ}{\circ}{\circ}}>00{:}54{:}01.912$ we're learning more and This is why I

NOTE Confidence: 0.8807261

 $00:54:01.912 \longrightarrow 00:54:04.968$ wanted to highlight the toxicity issue.

NOTE Confidence: 0.8807261

 $00:54:04.970 \longrightarrow 00:54:07.847$ I think what we want to learn

NOTE Confidence: 0.8807261

 $00:54:07.847 \longrightarrow 00:54:10.949$ more is that it does seem like.

NOTE Confidence: 0.8807261

00:54:10.950 --> 00:54:13.505 Even in patients in their 20s who

 $00:54:13.510 \longrightarrow 00:54:15.705$ we call the older patients rather,

NOTE Confidence: 0.8807261

 $00:54:15.705 \longrightarrow 00:54:17.895$ they have higher rates of infection.

NOTE Confidence: 0.8807261

 $00:54:17.900 \longrightarrow 00:54:20.096$ They have higher rates of AVN.

NOTE Confidence: 0.8807261

 $00:54:20.100 \longrightarrow 00:54:21.930$ They have had higher rates

NOTE Confidence: 0.8807261

 $00:54:21.930 \longrightarrow 00:54:23.028$ of pancreatitis and,

NOTE Confidence: 0.8807261

 $00:54:23.030 \longrightarrow 00:54:25.226$ and it's not clear how to

NOTE Confidence: 0.8807261

00:54:25.226 --> 00:54:26.690 balance those two things,

NOTE Confidence: 0.8807261

 $00:54:26.690 \longrightarrow 00:54:28.772$ but they would be treated very

NOTE Confidence: 0.8807261

 $00:54:28.772 \longrightarrow 00:54:30.618$ differently and they would have

NOTE Confidence: 0.8807261

 $00{:}54{:}30.618 \dashrightarrow 00{:}54{:}32.178$ good disease free outcomes.

NOTE Confidence: 0.7732424

 $00:54:33.590 \longrightarrow 00:54:35.500$ So we just want comment.

NOTE Confidence: 0.7732424

 $00:54:35.500 \longrightarrow 00:54:37.420$ We do use pediatric protocols.

NOTE Confidence: 0.7732424

 $00{:}54{:}37.420 {\:{\circ}{\circ}{\circ}}>00{:}54{:}38.928$ Pediatric like protocols become

NOTE Confidence: 0.7732424

 $00{:}54{:}38.928 \dashrightarrow 00{:}54{:}40.436$ backbone protocols and we're

NOTE Confidence: 0.7732424

 $00:54:40.436 \longrightarrow 00:54:42.397$ participating in Lion study which

00:54:42.397 --> 00:54:43.549 uses inotuzumab randomization.

NOTE Confidence: 0.7732424

 $00:54:43.550 \longrightarrow 00:54:46.224$ So phase three study after initial induction,

NOTE Confidence: 0.7732424

 $00:54:46.230 \longrightarrow 00:54:48.150$ randomizing patients to two cycles in

NOTE Confidence: 0.7732424

 $00:54:48.150 \longrightarrow 00:54:50.819$ a tourism up or regular consolidation.

NOTE Confidence: 0.7732424

 $00:54:50.820 \longrightarrow 00:54:53.118$ This is between H20 and 39,

NOTE Confidence: 0.7732424

00.54.53.120 --> 00.54.56.040 so you know how I perceive what is

NOTE Confidence: 0.7732424

 $00{:}54{:}56.040 {\:\dashrightarrow\:} 00{:}54{:}58.024$ usually something you would consider

NOTE Confidence: 0.7732424

 $00:54:58.024 \longrightarrow 00:55:00.775$ for patients who are older than that.

NOTE Confidence: 0.7732424

 $00{:}55{:}00.780 \dashrightarrow 00{:}55{:}03.797$ And we tried to use again DFM.

NOTE Confidence: 0.7732424

 $00:55:03.800 \longrightarrow 00:55:05.252$ Backbone augmented BFM backbone

NOTE Confidence: 0.7732424

 $00{:}55{:}05.252 \dashrightarrow 00{:}55{:}06.704$ protocols for younger patients,

NOTE Confidence: 0.7732424

 $00:55:06.710 \longrightarrow 00:55:09.614$ so there is a question in the chat.

NOTE Confidence: 0.7732424

 $00:55:09.620 \dashrightarrow 00:55:11.612$ I think both Amarillo Heath and

NOTE Confidence: 0.7732424

 $00:55:11.612 \longrightarrow 00:55:14.447$ the doctors 8 and that was it was

NOTE Confidence: 0.7732424

 $00:55:14.447 \longrightarrow 00:55:16.242$ our introduction which reduced us

NOTE Confidence: 0.7732424

00:55:16.242 --> 00:55:19.376 and Doctor Gowda who is one of our

 $00:55:19.376 \longrightarrow 00:55:22.320$ adult transplanters asking about.

NOTE Confidence: 0.7732424

 $00:55:22.320 \longrightarrow 00:55:24.190$ Blender two map consolidation instead

NOTE Confidence: 0.7732424

 $00:55:24.190 \longrightarrow 00:55:26.455$ of usage of tag as paraginase which

NOTE Confidence: 0.7732424

00:55:26.455 --> 00:55:28.125 is certainly much more difficult

NOTE Confidence: 0.7732424

 $00:55:28.125 \longrightarrow 00:55:30.056$ for all the patients to tolerate

NOTE Confidence: 0.7732424

 $00:55:30.056 \longrightarrow 00:55:31.918$ and one of the reasons why you

NOTE Confidence: 0.7732424

 $00:55:31.918 \longrightarrow 00:55:34.003$ know a lot of people who all the

NOTE Confidence: 0.7732424

 $00:55:34.003 \longrightarrow 00:55:36.139$ cannot go on pediatric protocols.

NOTE Confidence: 0.7732424

 $00:55:36.140 \longrightarrow 00:55:38.436$ Can this eliminate usable in a tomb?

NOTE Confidence: 0.7732424

00:55:38.440 --> 00:55:40.736 Up eliminate need for US Virgin eyes?

NOTE Confidence: 0.7732424

00:55:40.740 --> 00:55:42.988 And how do we explain so good outcomes

NOTE Confidence: 0.7732424

 $00:55:42.988 \longrightarrow 00:55:45.118$ with high perceived cannot be cause

NOTE Confidence: 0.7732424

 $00{:}55{:}45.118 \dashrightarrow 00{:}55{:}47.368$ younger patients were enrolled well so

NOTE Confidence: 0.7732424

 $00:55:47.435 \longrightarrow 00:55:49.955$ they tried to enroll patients 14 and older.

NOTE Confidence: 0.7732424

 $00:55:49.960 \longrightarrow 00:55:52.529$ I think the youngest patients was 17.

00:55:52.530 --> 00:55:56.247 On that study and the oldest patient was 59,

NOTE Confidence: 0.7732424

 $00:55:56.250 \longrightarrow 00:55:58.798$ so certainly some of the outcomes can

NOTE Confidence: 0.7732424

 $00:55:58.798 \longrightarrow 00:56:01.200$ be explained by patient selection,

NOTE Confidence: 0.7732424

 $00:56:01.200 \longrightarrow 00:56:03.265$ but decent number of these

NOTE Confidence: 0.7732424

00:56:03.265 --> 00:56:05.330 patients have the you know,

NOTE Confidence: 0.7732424

 $00:56:05.330 \longrightarrow 00:56:06.188$ karyotype abnormalities,

NOTE Confidence: 0.7732424

 $00:56:06.188 \longrightarrow 00:56:08.333$ Peach like disease and very

NOTE Confidence: 0.7732424

00:56:08.333 --> 00:56:10.700 high number had TP 53 mutations,

NOTE Confidence: 0.7732424

 $00{:}56{:}10.700 \dashrightarrow 00{:}56{:}13.325$ so it's challenging to say and again

NOTE Confidence: 0.7732424

00:56:13.325 --> 00:56:16.275 you know comparing head to head tag

NOTE Confidence: 0.7732424

 $00{:}56{:}16.275 \dashrightarrow 00{:}56{:}18.023$ as paraginase containing BFM type

NOTE Confidence: 0.7732424

00:56:18.023 --> 00:56:20.200 protocols with MD Anderson Hyper.

NOTE Confidence: 0.7732424

 $00:56:20.200 \longrightarrow 00:56:23.980$ See what will not be possible but you know.

NOTE Confidence: 0.7732424

 $00:56:23.980 \longrightarrow 00:56:24.944$ This is ongoing argument.

NOTE Confidence: 0.7732424

00:56:24.944 --> 00:56:26.830 Which one is better for adult patients?

NOTE Confidence: 0.82373655

 $00:56:29.170 \longrightarrow 00:56:31.767$ And I think there is one more

00:56:31.767 --> 00:56:33.612 discussion question to both of

NOTE Confidence: 0.82373655

 $00{:}56{:}33.612 \dashrightarrow 00{:}56{:}35.580$ you with all this novel Agents

NOTE Confidence: 0.82373655

 $00:56:35.580 \longrightarrow 00:56:37.750$ of Lena Nine. It is a man.

NOTE Confidence: 0.82373655

 $00:56:37.750 \longrightarrow 00:56:40.817$ Can you see the use of car T still

NOTE Confidence: 0.82373655

 $00:56:40.817 \longrightarrow 00:56:43.087$ in the relapse refractory patients?

NOTE Confidence: 0.82373655

00:56:43.090 --> 00:56:44.518 Yeah, you know. So

NOTE Confidence: 0.82373655

 $00:56:44.520 \longrightarrow 00:56:45.944$ I think there's certainly

NOTE Confidence: 0.82373655

 $00:56:45.944 \longrightarrow 00:56:47.724$ enroll for car T cells,

NOTE Confidence: 0.82373655

 $00:56:47.730 \longrightarrow 00:56:50.278$ and we recently had a discussion about

NOTE Confidence: 0.82373655

 $00:56:50.278 \longrightarrow 00:56:52.730$ young adult who I'm taking care of.

NOTE Confidence: 0.82373655

 $00{:}56{:}52.730 \dashrightarrow 00{:}56{:}55.978$ And she's actually going for car T cells

NOTE Confidence: 0.82373655

 $00:56:55.978 \longrightarrow 00:56:59.547$ after she didn't respond to Blender to map.

NOTE Confidence: 0.82373655

 $00{:}56{:}59.550 \dashrightarrow 00{:}57{:}02.638$ And you know, for some of these patients,

NOTE Confidence: 0.82373655

 $00:57:02.640 \longrightarrow 00:57:04.950$ it can be a curative treatment.

NOTE Confidence: 0.82373655

 $00:57:04.950 \longrightarrow 00:57:06.678$ Depending on the construct.

 $00:57:06.678 \longrightarrow 00:57:10.503$ So I still hope that some of those patients

NOTE Confidence: 0.82373655

 $00{:}57{:}10.503 \dashrightarrow 00{:}57{:}13.740$ who fail or who are failed by transplant

NOTE Confidence: 0.82373655

 $00:57:13.740 \dashrightarrow 00:57:17.508$ can be rescued and some well known cases.

NOTE Confidence: 0.82373655

 $00:57:17.510 \longrightarrow 00:57:19.080$ Nationally where this happened and

NOTE Confidence: 0.82373655

 $00:57:19.080 \longrightarrow 00:57:21.240$ people survive for many years afterwards.

NOTE Confidence: 0.82373655

00:57:21.240 --> 00:57:23.472 So certainly car T cells is a nice

NOTE Confidence: 0.82373655

 $00:57:23.472 \longrightarrow 00:57:25.687$ addition to the armamentarium we have

NOTE Confidence: 0.82373655

 $00:57:25.687 \longrightarrow 00:57:27.677$ for management of these patients.

NOTE Confidence: 0.82373655

00:57:27.680 --> 00:57:28.018 Unfortunately,

NOTE Confidence: 0.82373655

00:57:28.018 --> 00:57:30.046 right now is only for patients

NOTE Confidence: 0.8324077

 $00{:}57{:}30.050 \dashrightarrow 00{:}57{:}31.410$ or twenty 1625 in.

NOTE Confidence: 0.8313616

 $00{:}57{:}32.890 \longrightarrow 00{:}57{:}34.462$ Is only approved for this group

NOTE Confidence: 0.8313616

 $00{:}57{:}34.462 \dashrightarrow 00{:}57{:}36.125$ of patients and I didn't touch

NOTE Confidence: 0.8313616

 $00:57:36.125 \longrightarrow 00:57:37.793$ on those studies because I hope

NOTE Confidence: 0.8313616

 $00:57:37.793 \longrightarrow 00:57:39.500$ some of them will be addressed

NOTE Confidence: 0.8313616

 $00:57:39.500 \longrightarrow 00:57:41.444$ by the session for two weeks so,

 $00:57:41.444 \longrightarrow 00:57:42.964$ but we're hoping that this

NOTE Confidence: 0.8313616

 $00{:}57{:}42.964 \dashrightarrow 00{:}57{:}44.476$ treatment will become safer and

NOTE Confidence: 0.8313616

 $00:57:44.476 \longrightarrow 00:57:46.128$ may be used for patients who are

NOTE Confidence: 0.8313616

00:57:46.128 --> 00:57:47.477 all that is definitely something

NOTE Confidence: 0.8313616

 $00:57:47.477 \longrightarrow 00:57:49.660$ we would like to see for our old

NOTE Confidence: 0.8313616

00:57:49.660 --> 00:57:50.719 LL patients. Yeah,

NOTE Confidence: 0.8313616

 $00:57:50.719 \longrightarrow 00:57:53.587$ but I'm an maybe at that time we

NOTE Confidence: 0.8313616

00:57:53.587 --> 00:57:56.139 need to just keep in mind that data.

NOTE Confidence: 0.8313616

 $00:57:56.140 \longrightarrow 00:57:59.086$ Mirali presented with Nina, included in

NOTE Confidence: 0.8313616

 $00:57:59.086 \longrightarrow 00:58:03.209$ her today is that the prior Lena exposure.

NOTE Confidence: 0.8313616

 $00{:}58{:}03.210 \dashrightarrow 00{:}58{:}05.499$ May have effect on the Carty outcome,

NOTE Confidence: 0.8313616

 $00{:}58{:}05.500 \dashrightarrow 00{:}58{:}07.980$ so I think there should be some selection

NOTE Confidence: 0.8313616

 $00:58:07.980 \longrightarrow 00:58:11.055$ of the patients where we need to right away.

NOTE Confidence: 0.8313616

00:58:11.060 --> 00:58:12.974 Start cleaner if you are really

NOTE Confidence: 0.8313616

00:58:12.974 --> 00:58:14.650 thinking of them offering Cardi,

00:58:14.650 --> 00:58:17.106 we need to double check whether we need

NOTE Confidence: 0.8313616

 $00{:}58{:}17.106 \dashrightarrow 00{:}58{:}19.888$ to give those glena front option or not.

NOTE Confidence: 0.8313616

 $00:58:19.890 \dashrightarrow 00:58:22.306$ So I think there should be some selection

NOTE Confidence: 0.8313616

 $00:58:22.306 \longrightarrow 00:58:25.120$ of the patients who one of the mechanisms

NOTE Confidence: 0.8348592

 $00:58:25.120 \longrightarrow 00:58:27.196$ of resistance is of course loss

NOTE Confidence: 0.8348592

 $00:58:27.196 \longrightarrow 00:58:29.588$ of CD 19 expression right so and

NOTE Confidence: 0.8348592

00:58:29.588 --> 00:58:31.772 then you know you lose the target

NOTE Confidence: 0.8348592

 $00.58:31.844 \longrightarrow 00.58:33.944$ for car T cells so should link.

NOTE Confidence: 0.8348592

 $00{:}58{:}33.950 \dashrightarrow 00{:}58{:}36.506$ Fortunately it doesn't happen too frequently.

NOTE Confidence: 0.8348592

 $00:58:36.510 \longrightarrow 00:58:39.046$ So, but nevertheless, the point in world is

NOTE Confidence: 0.8002771

00:58:39.050 --> 00:58:40.946 well taken. Yes no, I agree,

NOTE Confidence: 0.8002771

 $00{:}58{:}40.950 \dashrightarrow 00{:}58{:}43.641$ and I think one of the things that the

NOTE Confidence: 0.8002771

 $00:58:43.641 \longrightarrow 00:58:45.936$ investigation that study discussed in this

NOTE Confidence: 0.8002771

 $00:58:45.936 \longrightarrow 00:58:47.866$ session afterwards with the questions.

NOTE Confidence: 0.8002771

00:58:47.870 --> 00:58:51.195 Is that they would like to understand

NOTE Confidence: 0.8002771

00:58:51.195 --> 00:58:54.168 what was their response to the

00:58:54.168 --> 00:58:56.588 blender and weather because it

NOTE Confidence: 0.8002771

 $00:58:56.588 \longrightarrow 00:58:59.939$ may be that even with the karty.

NOTE Confidence: 0.8002771

00:58:59.940 --> 00:59:03.804 I'm sorry even with the CD 19 expression,

NOTE Confidence: 0.8002771

00:59:03.810 --> 00:59:05.970 there's something different about

NOTE Confidence: 0.8002771

 $00{:}59{:}05.970 \dashrightarrow 00{:}59{:}08.670$ those individuals that needs to

NOTE Confidence: 0.8002771

 $00:59:08.670 \longrightarrow 00:59:11.680$ be recognized and then the other.

NOTE Confidence: 0.8002771

00:59:11.680 --> 00:59:14.008 Thing is that I think just pairing it

NOTE Confidence: 0.8002771

00:59:14.008 --> 00:59:16.448 with that other study that I presented

NOTE Confidence: 0.8002771

 $00:59:16.448 \longrightarrow 00:59:19.050$ where the outcomes are better if one

NOTE Confidence: 0.8002771

 $00:59:19.050 \dashrightarrow 00:59:20.905$ receives blina prior to transplant.

NOTE Confidence: 0.8002771

 $00{:}59{:}20.910 \dashrightarrow 00{:}59{:}23.689$ So one can think about I definitely

NOTE Confidence: 0.8002771

00:59:23.689 --> 00:59:25.250 agree about having car.

NOTE Confidence: 0.8002771

 $00:59:25.250 \longrightarrow 00:59:27.644$ T in the arm and it arium.

NOTE Confidence: 0.8002771

 $00:59:27.650 \longrightarrow 00:59:29.798$ But whether one should think about

NOTE Confidence: 0.8002771

 $00:59:29.798 \longrightarrow 00:59:32.110$ transplant versus party as the next step,

00:59:32.110 --> 00:59:34.413 and then I think those are those

NOTE Confidence: 0.8002771

00:59:34.413 --> 00:59:36.167 are the complicated equations and

NOTE Confidence: 0.8002771

 $00:59:36.167 \longrightarrow 00:59:38.624$ we almost have too many choices now.

NOTE Confidence: 0.8002771

00:59:38.630 --> 00:59:39.656 Well, you know,

NOTE Confidence: 0.8002771

 $00:59:39.656 \longrightarrow 00:59:41.708$ it's nice to have more choices

NOTE Confidence: 0.81426054

 $00:59:41.710 \longrightarrow 00:59:43.822$ and I wish we have more

NOTE Confidence: 0.81426054

 $00:59:43.822 \longrightarrow 00:59:45.490$ choices for T cell L.

NOTE Confidence: 0.81426054

00:59:45.490 --> 00:59:47.807 As you know, adults with this disease

NOTE Confidence: 0.81426054

00:59:47.807 --> 00:59:50.290 do not do as well as children.

NOTE Confidence: 0.81426054

 $00:59:50.290 \longrightarrow 00:59:51.316$ Certainly Laura being.

NOTE Confidence: 0.81426054

00:59:51.316 --> 00:59:52.684 Is that reasonable option,

NOTE Confidence: 0.81426054

 $00:59:52.690 \longrightarrow 00:59:56.180$ but there are no studies in adults on T cell.

NOTE Confidence: 0.81426054

 $00:59:56.180 \longrightarrow 00:59:57.254$ Disease of course.

NOTE Confidence: 0.81426054

 $00{:}59{:}57.254 \dashrightarrow 01{:}00{:}00.416$ Most of the patients have diesel L 85% only.

NOTE Confidence: 0.81426054

 $01:00:00.416 \longrightarrow 01:00:02.346$ 15% have T cell disease,

NOTE Confidence: 0.81426054

 $01:00:02.350 \longrightarrow 01:00:03.910$ but this is certainly unmet

 $01:00:03.910 \longrightarrow 01:00:06.499$ need as not a lot of studies

NOTE Confidence: 0.81426054

 $01:00:06.499 \longrightarrow 01:00:08.399$ addressing this patients right

NOTE Confidence: 0.7824309

01:00:08.400 --> 01:00:10.776 now, especially adults, and one of

NOTE Confidence: 0.7824309

01:00:10.776 --> 01:00:13.117 the questions which Lloyd is just

NOTE Confidence: 0.7824309

 $01:00:13.117 \longrightarrow 01:00:15.175$ asking with regard to this discussion

NOTE Confidence: 0.7824309

 $01:00:15.175 \longrightarrow 01:00:17.849$ of car T versus other newer regions.

NOTE Confidence: 0.7824309

 $01:00:17.850 \longrightarrow 01:00:20.489$ Can these new region across the CNS?

NOTE Confidence: 0.7824309

 $01:00:20.490 \longrightarrow 01:00:23.109$ Yeah, you know.

NOTE Confidence: 0.7824309

01:00:23.110 --> 01:00:24.886 It's challenging questions,

NOTE Confidence: 0.7824309

 $01:00:24.886 \longrightarrow 01:00:27.846$ so you know we know.

NOTE Confidence: 0.7824309

01:00:27.850 --> 01:00:29.494 That you know we're not counting

NOTE Confidence: 0.7824309

 $01{:}00{:}29.494 \dashrightarrow 01{:}00{:}31.910$ on Blender to my boy Natuzzi map to

NOTE Confidence: 0.7824309

 $01:00:31.910 \longrightarrow 01:00:33.794$ address CNS disease in these patients

NOTE Confidence: 0.7824309

01:00:33.850 --> 01:00:35.700 were excluded from those studies,

NOTE Confidence: 0.7824309

 $01:00:35.700 \longrightarrow 01:00:37.674$ so we don't really have those

01:00:37.674 --> 01:00:39.361 questions answered by the studies

NOTE Confidence: 0.7824309

 $01{:}00{:}39.361 \dashrightarrow 01{:}00{:}41.496$ which led to the approval of these

NOTE Confidence: 0.7824309

 $01{:}00{:}41.496 \dashrightarrow 01{:}00{:}43.547$ drugs in regards to car T cells.

NOTE Confidence: 0.7824309

01:00:43.550 --> 01:00:45.314 Again, you know this patients with

NOTE Confidence: 0.7824309

01:00:45.314 --> 01:00:47.000 CNS disease are usually excluded,

NOTE Confidence: 0.7824309

 $01:00:47.000 \longrightarrow 01:00:48.332$ so we don't know.

NOTE Confidence: 0.7824309

 $01:00:48.332 \longrightarrow 01:00:49.997$ But we presume that this

NOTE Confidence: 0.7824309

 $01:00:49.997 \longrightarrow 01:00:51.090$ has to be addressed

NOTE Confidence: 0.8195335

 $01{:}00{:}51.090 \dashrightarrow 01{:}00{:}52.398$ separately from systemic the rapies

NOTE Confidence: 0.8195335

 $01:00:52.398 \longrightarrow 01:00:54.360$ and there is there are some

NOTE Confidence: 0.8195335

 $01{:}00{:}54.419 \dashrightarrow 01{:}00{:}56.105$ data from CHOP actually for car,

NOTE Confidence: 0.8195335

01:00:56.110 --> 01:00:57.745 T for CNS positivity and

NOTE Confidence: 0.8195335

01:00:57.745 --> 01:00:59.380 maybe Doctor shopping go into.

NOTE Confidence: 0.8195335

 $01:00:59.380 \longrightarrow 01:01:01.210$ To that a little more,

NOTE Confidence: 0.8195335

01:01:01.210 --> 01:01:03.040 but there's it's small numbers,

NOTE Confidence: 0.8195335

 $01:01:03.040 \longrightarrow 01:01:05.968$ but it seems to be covering CNS disease,

 $01{:}01{:}05.970 \dashrightarrow 01{:}01{:}07.430$ not necessarily testicular disease.

NOTE Confidence: 0.8195335

01:01:07.430 --> 01:01:08.530 But yes, that

NOTE Confidence: 0.76860124

01:01:08.530 --> 01:01:11.458 is the same as penetration with the Carty,

NOTE Confidence: 0.76860124

 $01:01:11.460 \longrightarrow 01:01:13.656$ and we have seen the success

NOTE Confidence: 0.76860124

 $01:01:13.656 \longrightarrow 01:01:15.058$ rate particularly, and again,

NOTE Confidence: 0.76860124

 $01:01:15.058 \longrightarrow 01:01:17.396$ it's need to be now as parties

NOTE Confidence: 0.76860124

 $01:01:17.396 \longrightarrow 01:01:18.410$ commercially available.

NOTE Confidence: 0.76860124

 $01{:}01{:}18.410 \dashrightarrow 01{:}01{:}21.386$ We need to review those data also down

NOTE Confidence: 0.76860124

 $01:01:21.386 \longrightarrow 01:01:24.630$ the rain so you know, for us, it's a

NOTE Confidence: 0.76860124

01:01:24.630 --> 01:01:26.094 move to, you know,

NOTE Confidence: 0.76860124

01:01:26.094 --> 01:01:28.290 to zoom out Blender to map,

NOTE Confidence: 0.76860124

 $01:01:28.290 \longrightarrow 01:01:30.200$ you know, without the systemic

NOTE Confidence: 0.76860124

 $01{:}01{:}30.200 \dashrightarrow 01{:}01{:}31.728$ administration of site error.

NOTE Confidence: 0.76860124

 $01:01:31.730 \longrightarrow 01:01:33.368$ Why does it say Terminatrix 8?

NOTE Confidence: 0.76860124

 $01:01:33.370 \longrightarrow 01:01:35.008$ So you know this is certainly

01:01:35.008 --> 01:01:36.100 a very pertinent issue,

NOTE Confidence: 0.76860124

 $01:01:36.100 \longrightarrow 01:01:37.630$ which puts a lot of pressure

NOTE Confidence: 0.76860124

01:01:37.630 --> 01:01:38.997 on giving out chemotherapy in

NOTE Confidence: 0.76860124

 $01:01:38.997 \longrightarrow 01:01:40.467$ adequate numbers to those patients.

NOTE Confidence: 0.76860124

01:01:40.470 --> 01:01:41.830 As we don't know really,

NOTE Confidence: 0.76860124

01:01:41.830 --> 01:01:44.006 you know about the effects of the tool.

NOTE Confidence: 0.7827345

 $01:01:46.830 \longrightarrow 01:01:49.990$ My last question to Doctor Nikolai and

NOTE Confidence: 0.7827345

01:01:49.990 --> 01:01:52.560 I'm I'm pediatric transplant are so,

NOTE Confidence: 0.7827345

 $01{:}01{:}52.560 \dashrightarrow 01{:}01{:}54.765$ but looking at this good

NOTE Confidence: 0.7827345

 $01:01:54.765 \longrightarrow 01:01:56.529$ day to our financials,

NOTE Confidence: 0.7827345

 $01:01:56.530 \longrightarrow 01:01:58.294$ demandment cleaner to ma'am.

NOTE Confidence: 0.7827345

01:01:58.294 --> 01:02:00.940 Would you consider this in this?

NOTE Confidence: 0.7827345

01:02:00.940 --> 01:02:04.468 You're more than 60 year old older adult,

NOTE Confidence: 0.7827345

01:02:04.470 --> 01:02:06.997 so how you see in changing your

NOTE Confidence: 0.7827345

 $01:02:06.997 \longrightarrow 01:02:08.648$ practice or your treatment

NOTE Confidence: 0.7827345

 $01:02:08.648 \longrightarrow 01:02:11.582$ algorithm for those group of LL

 $01:02:11.582 \longrightarrow 01:02:13.730$ patient highly scalable patients

NOTE Confidence: 0.7827345

01:02:13.730 --> 01:02:16.466 so you know I think 4.

NOTE Confidence: 0.7827345

 $01:02:16.470 \longrightarrow 01:02:19.300$ Older patients, the question about

NOTE Confidence: 0.7827345

 $01:02:19.300 \longrightarrow 01:02:22.130$ transplant is more difficult because

NOTE Confidence: 0.7827345

 $01:02:22.216 \longrightarrow 01:02:24.766$ you know the outcomes are worse.

NOTE Confidence: 0.7827345

 $01:02:24.770 \longrightarrow 01:02:26.961$ And the administration of this new drugs

NOTE Confidence: 0.7827345

 $01:02:26.961 \longrightarrow 01:02:29.356$ give hope that some of these patients

NOTE Confidence: 0.7827345

 $01{:}02{:}29.356 \dashrightarrow 01{:}02{:}31.096$ may be cured without transplant.

NOTE Confidence: 0.7827345

01:02:31.100 --> 01:02:33.764 Having said that, I don't think we know

NOTE Confidence: 0.7827345

01:02:33.764 --> 01:02:36.419 yet how many of them will be cured,

NOTE Confidence: 0.7827345

 $01:02:36.420 \longrightarrow 01:02:38.418$ so that's why I cannot clearly

NOTE Confidence: 0.7827345

 $01:02:38.418 \longrightarrow 01:02:39.417$ answer that question.

NOTE Confidence: 0.7827345

 $01{:}02{:}39.420 --> 01{:}02{:}40.398$ And I apologize.

NOTE Confidence: 0.7827345

01:02:40.398 --> 01:02:42.354 I have to leave because I'm

NOTE Confidence: 0.7827345

01:02:42.354 --> 01:02:43.748 running that your board,

 $01:02:43.750 \longrightarrow 01:02:45.420$ which starts at 1:00 o'clock.

NOTE Confidence: 0.79139125

01:02:45.420 --> 01:02:48.076 When on that note, thank you so much.

NOTE Confidence: 0.79139125

 $01{:}02{:}48.080 \dashrightarrow 01{:}02{:}50.446$ Tower speakers at Doctor Baddour said doctor

NOTE Confidence: 0.79139125

 $01:02:50.446 \longrightarrow 01:02:52.155$ catalytic and overloaded and moderate

NOTE Confidence: 0.79139125

 $01{:}02{:}52.155 \dashrightarrow 01{:}02{:}54.069$ are Doctor Nikita Shad excellent talks.

NOTE Confidence: 0.79139125

 $01:02:54.070 \longrightarrow 01:02:56.506$ And if you have any additional questions.

NOTE Confidence: 0.79139125

 $01:02:56.510 \longrightarrow 01:02:59.065$ Feel free to follow up directly with

NOTE Confidence: 0.79139125

 $01:02:59.065 \longrightarrow 01:03:02.061$ the speakers and we look forward to our

NOTE Confidence: 0.79139125

01:03:02.061 --> 01:03:04.386 next session next Friday about benign

NOTE Confidence: 0.79139125

 $01{:}03{:}04.386 \dashrightarrow 01{:}03{:}06.924$ hematology and have a great weekend.

NOTE Confidence: 0.79139125

01:03:06.930 --> 01:03:08.088 Everyone take care.

NOTE Confidence: 0.82131004

 $01:03:09.760 \longrightarrow 01:03:10.240$ Bye bye.