WEBVTT

NOTE duration:"00:56:13" NOTE recognizability:0.815

NOTE language:en-us

NOTE Confidence: 0.9023378835

00:00:03.200 --> 00:00:05.590 All right. Good afternoon, everybody,

NOTE Confidence: 0.9023378835

 $00{:}00{:}05.590 \dashrightarrow 00{:}00{:}07.980$  and we lcome to the classical

NOTE Confidence: 0.9023378835

 $00:00:08.056 \dashrightarrow 00:00:10.446$  hematology review of the American

NOTE Confidence: 0.9023378835

00:00:10.446 --> 00:00:13.296 Society of Hematology meeting in 2022.

NOTE Confidence: 0.9023378835

 $00:00:13.296 \longrightarrow 00:00:15.576$  Thank you for joining us.

NOTE Confidence: 0.9023378835

 $00:00:15.580 \longrightarrow 00:00:16.860$  My name is Robert Bona.

NOTE Confidence: 0.9023378835

 $00:00:16.860 \longrightarrow 00:00:19.668$  I work here at Yale in the section of

NOTE Confidence: 0.9023378835

 $00:00:19.668 \longrightarrow 00:00:22.119$  hematology and I'm very excited and happy

NOTE Confidence: 0.9023378835

 $00:00:22.119 \longrightarrow 00:00:24.540$  to introduce our three speakers today.

NOTE Confidence: 0.9023378835

 $00:00:24.540 \longrightarrow 00:00:26.521$  I will be brief with their introductions

NOTE Confidence: 0.9023378835

00:00:26.521 --> 00:00:28.531 since I don't want to take away

NOTE Confidence: 0.9023378835

 $00:00:28.531 \longrightarrow 00:00:30.193$  time from the important things that

NOTE Confidence: 0.9023378835

 $00:00:30.253 \longrightarrow 00:00:32.136$  they're going to talk with us about.

 $00:00:32.140 \longrightarrow 00:00:34.366$  Lila van Doren. We'll begin our discussion.

NOTE Confidence: 0.9023378835

 $00:00:34.370 \longrightarrow 00:00:35.030$  Lila joined.

NOTE Confidence: 0.9023378835

 $00:00:35.030 \longrightarrow 00:00:37.010$  All three of our faculty actually

NOTE Confidence: 0.9023378835

 $00:00:37.010 \longrightarrow 00:00:38.869$  have joined the classical hematology

NOTE Confidence: 0.9023378835

 $00:00:38.869 \longrightarrow 00:00:41.143$  program at Yale this academic year.

NOTE Confidence: 0.9023378835

00:00:41.150 --> 00:00:43.187 And Lila joined us from Columbia and

NOTE Confidence: 0.9023378835

 $00:00:43.187 \longrightarrow 00:00:45.251$  she brings a wealth of experience

NOTE Confidence: 0.9023378835

 $00:00:45.251 \longrightarrow 00:00:46.747$  and knowledge with her.

NOTE Confidence: 0.9023378835

 $00{:}00{:}46.750 --> 00{:}00{:}49.262$  And at Yale she is going to be

NOTE Confidence: 0.9023378835

00:00:49.262 --> 00:00:51.791 focusing on sickle cell diseases and

NOTE Confidence: 0.9023378835

 $00{:}00{:}51.791 \dashrightarrow 00{:}00{:}54.071$ iron disorders of iron hemostasis

NOTE Confidence: 0.9023378835

00:00:54.071 --> 00:00:56.370 in particular iron homeostasis in

NOTE Confidence: 0.9023378835

 $00:00:56.370 \longrightarrow 00:01:00.442$  particular in the area of of Women's Health.

NOTE Confidence: 0.9023378835

00:01:00.442 --> 00:01:01.864 Doctor Gashua,

NOTE Confidence: 0.9023378835

 $00:01:01.864 \longrightarrow 00:01:03.286$  Yale fellow.

NOTE Confidence: 0.9023378835

 $00{:}01{:}03.290 \dashrightarrow 00{:}01{:}05.240$  And graduate of the Harvard Public

 $00:01:05.240 \longrightarrow 00:01:07.664$  School of Health is focusing his work

NOTE Confidence: 0.9023378835

 $00{:}01{:}07.664 \dashrightarrow 00{:}01{:}10.530$  research work here at Yale on decision

NOTE Confidence: 0.9023378835

 $00:01:10.530 \longrightarrow 00:01:13.660$  science analysis and hematologic disorders.

NOTE Confidence: 0.9023378835

00:01:13.660 --> 00:01:15.704 And Annie Sharda joined us from the

NOTE Confidence: 0.9023378835

 $00:01:15.704 \longrightarrow 00:01:17.400$  Beth Israel Deaconess Medical Center.

NOTE Confidence: 0.9023378835

00:01:17.400 --> 00:01:20.376 He has a active laboratory program

NOTE Confidence: 0.9023378835

 $00:01:20.376 \longrightarrow 00:01:22.923$  looking at endothelial function and

NOTE Confidence: 0.9023378835

 $00:01:22.923 \longrightarrow 00:01:25.328$  in particular the expression and

NOTE Confidence: 0.9023378835

 $00:01:25.328 \longrightarrow 00:01:27.860$  secretion of von Willebrand factor.

NOTE Confidence: 0.9023378835

00:01:27.860 --> 00:01:28.444 So again,

NOTE Confidence: 0.9023378835 00:01:28.444 --> 00:01:28.736 we're, NOTE Confidence: 0.9023378835

 $00:01:28.736 \longrightarrow 00:01:31.153$  I'm very excited to to have them

NOTE Confidence: 0.9023378835

 $00{:}01{:}31.153 \dashrightarrow 00{:}01{:}33.633$  present their work to us today or their.

NOTE Confidence: 0.9023378835

 $00{:}01{:}33.640 \dashrightarrow 00{:}01{:}37.245$  Their review of some of the ash.

NOTE Confidence: 0.9023378835

 $00:01:37.250 \longrightarrow 00:01:40.256$  Up hot abstracts and please put

 $00:01:40.256 \longrightarrow 00:01:43.093$  your questions in the chat room

NOTE Confidence: 0.9023378835

 $00:01:43.093 \longrightarrow 00:01:45.550$  or in the Q&A and we'll get to

NOTE Confidence: 0.9023378835

 $00:01:45.550 \longrightarrow 00:01:47.020$  those at the end of the session.

NOTE Confidence: 0.9023378835

 $00:01:47.020 \longrightarrow 00:01:49.324$  Each of our presenters will present

NOTE Confidence: 0.9023378835

 $00:01:49.324 \longrightarrow 00:01:51.631$  for about 15 minutes and then

NOTE Confidence: 0.9023378835

 $00:01:51.631 \longrightarrow 00:01:53.737$  we'll take questions at the end.

NOTE Confidence: 0.9023378835

00:01:53.740 --> 00:01:55.452 So without further ado,

NOTE Confidence: 0.9023378835

00:01:55.452 --> 00:01:56.736 Doctor Van Dorn,

NOTE Confidence: 0.9023378835

 $00{:}01{:}56.740 \dashrightarrow 00{:}01{:}58.364$  would you like to get us started?

NOTE Confidence: 0.817732886666667

 $00:01:59.840 \longrightarrow 00:02:05.906$  Share my screen. And. There we go.

NOTE Confidence: 0.817732886666667

 $00:02:05.906 \longrightarrow 00:02:09.178$  OK, these are my disclosures. All right.

NOTE Confidence: 0.817732886666667

 $00:02:09.180 \longrightarrow 00:02:10.530$  These are the two abstracts that

NOTE Confidence: 0.817732886666667

 $00:02:10.530 \longrightarrow 00:02:12.280$  I'm going to be discussing today,

NOTE Confidence: 0.817732886666667

 $00:02:12.280 \longrightarrow 00:02:13.936$  so we'll just jump into it.

NOTE Confidence: 0.817732886666667

 $00{:}02{:}13.940 \dashrightarrow 00{:}02{:}16.412$  The first abstract is focused on

NOTE Confidence: 0.817732886666667

 $00:02:16.412 \longrightarrow 00:02:18.060$  inherited thrombophilia and pregnancy,

00:02:18.060 --> 00:02:21.640 anticoagulation and thrombophilia testing.

NOTE Confidence: 0.817732886666667

 $00:02:21.640 \longrightarrow 00:02:24.080$  So I wanted to start out with the case first.

NOTE Confidence: 0.817732886666667

00:02:24.080 --> 00:02:26.952 It's a 38 year old patient who presents

NOTE Confidence: 0.817732886666667

 $00:02:26.952 \longrightarrow 00:02:29.138$  for evaluation at 8 weeks gestation.

NOTE Confidence: 0.817732886666667

 $00:02:29.140 \longrightarrow 00:02:31.384$  She's the history of three miscarriages

NOTE Confidence: 0.817732886666667

 $00:02:31.384 \longrightarrow 00:02:33.787$  in the first trimester anti phospholipid

NOTE Confidence: 0.817732886666667

 $00:02:33.787 \longrightarrow 00:02:36.319$  antibody testing was previously negative but

NOTE Confidence: 0.817732886666667

 $00:02:36.319 \longrightarrow 00:02:39.279$  she was found to be positive for Factor 5,

NOTE Confidence: 0.817732886666667

 $00{:}02{:}39.280 \to 00{:}02{:}40.558$  Leiden heterozygous mutation.

NOTE Confidence: 0.817732886666667

 $00:02:40.558 \longrightarrow 00:02:43.540$  And the question is would you recommend

NOTE Confidence: 0.817732886666667

00:02:43.605 --> 00:02:45.825 anticoagulation during pregnancy for this

NOTE Confidence: 0.817732886666667

00:02:45.825 --> 00:02:48.979 patient to increase her chance of live birth?

NOTE Confidence: 0.817732886666667

 $00{:}02{:}48.980 \dashrightarrow 00{:}02{:}51.122$  So the background is that studies

NOTE Confidence: 0.817732886666667

 $00:02:51.122 \longrightarrow 00:02:52.550$  have shown an association.

NOTE Confidence: 0.817732886666667

00:02:52.550 --> 00:02:54.920 Between recurrent miscarriage and inherited

00:02:54.920 --> 00:02:57.620 thrombophilia for women with a PLS,

NOTE Confidence: 0.817732886666667

 $00:02:57.620 \longrightarrow 00:02:59.879$  we know that the use of heparin or low

NOTE Confidence: 0.817732886666667

 $00:02:59.879 \longrightarrow 00:03:01.332$  molecular weight heparin and combined

NOTE Confidence: 0.817732886666667

 $00:03:01.332 \longrightarrow 00:03:03.594$  with low dose aspirin is an effective

NOTE Confidence: 0.817732886666667

 $00:03:03.594 \longrightarrow 00:03:05.518$  treatment for recurrent miscarriage.

NOTE Confidence: 0.817732886666667

 $00:03:05.520 \longrightarrow 00:03:08.411$  And the thought about the role of

NOTE Confidence: 0.817732886666667

00:03:08.411 --> 00:03:09.650 thrombophilia recurrent miscarriage

NOTE Confidence: 0.817732886666667

 $00:03:09.712 \longrightarrow 00:03:11.889$  is that it can be explained partially

NOTE Confidence: 0.817732886666667

 $00:03:11.889 \longrightarrow 00:03:14.502$  by the concept of thrombosis of the

NOTE Confidence: 0.817732886666667

 $00:03:14.502 \longrightarrow 00:03:16.118$  microvasculature of the placenta.

NOTE Confidence: 0.817732886666667

 $00:03:16.120 \longrightarrow 00:03:18.486$  And so it is thought that anticoagulant

NOTE Confidence: 0.817732886666667

 $00:03:18.486 \longrightarrow 00:03:20.504$  therapy might reduce miscarriages and

NOTE Confidence: 0.817732886666667

 $00:03:20.504 \longrightarrow 00:03:22.869$  adverse pregnancy outcomes in patients

NOTE Confidence: 0.817732886666667

 $00:03:22.869 \longrightarrow 00:03:24.799$  with inherited thrombophilia as well.

NOTE Confidence: 0.817732886666667 00:03:24.800 --> 00:03:25.208 However, NOTE Confidence: 0.817732886666667

 $00:03:25.208 \longrightarrow 00:03:27.248$  there's a lack of solid

 $00:03:27.248 \longrightarrow 00:03:28.880$  evidence for this practice.

NOTE Confidence: 0.817732886666667

 $00:03:28.880 \longrightarrow 00:03:32.536$  And so in 2010 a study was published,

NOTE Confidence: 0.817732886666667

 $00{:}03{:}32.540 \longrightarrow 00{:}03{:}35.676$  a life study that was a randomized

NOTE Confidence: 0.817732886666667

00:03:35.680 --> 00:03:37.393 placebo-controlled study investigating

NOTE Confidence: 0.817732886666667

 $00:03:37.393 \longrightarrow 00:03:40.248$  whether aspirin plus low molecular

NOTE Confidence: 0.817732886666667

00:03:40.248 --> 00:03:42.672 weight heparin or aspirin alone

NOTE Confidence: 0.817732886666667

00:03:42.672 --> 00:03:44.400 combined on compared to placebo

NOTE Confidence: 0.817732886666667

 $00:03:44.400 \longrightarrow 00:03:46.050$  would improve the live birth.

NOTE Confidence: 0.817732886666667

 $00:03:46.050 \longrightarrow 00:03:47.019$  Among 364 women,

NOTE Confidence: 0.817732886666667

 $00{:}03{:}47.019 \dashrightarrow 00{:}03{:}48.957$  so there were three different arms

NOTE Confidence: 0.817732886666667

 $00{:}03{:}48.957 \dashrightarrow 00{:}03{:}50.962$  and what this study showed was

NOTE Confidence: 0.817732886666667

 $00{:}03{:}50.962 \dashrightarrow 00{:}03{:}52.958$  that there was no difference in

NOTE Confidence: 0.817732886666667

 $00{:}03{:}52.958 \dashrightarrow 00{:}03{:}54.842$  the live birth rates between the

NOTE Confidence: 0.817732886666667

 $00:03:54.842 \longrightarrow 00:03:56.926$  study groups with the relative risk

NOTE Confidence: 0.817732886666667

 $00:03:56.926 \longrightarrow 00:04:00.070$  of 1.03 and in patient specific.

00:04:00.070 --> 00:04:00.438 Thrombophilia,

NOTE Confidence: 0.817732886666667

00:04:00.438 --> 00:04:02.278 there was also no difference,

NOTE Confidence: 0.817732886666667

00:04:02.280 --> 00:04:04.155 although the number of patients

NOTE Confidence: 0.817732886666667

 $00:04:04.155 \longrightarrow 00:04:06.552$  in the study with an inherited

NOTE Confidence: 0.817732886666667

 $00:04:06.552 \longrightarrow 00:04:09.646$  thrombophilia were was very low and so.

NOTE Confidence: 0.817732886666667

 $00:04:09.650 \longrightarrow 00:04:12.305$  Which brings us to the a life two study,

NOTE Confidence: 0.817732886666667

 $00:04:12.310 \longrightarrow 00:04:13.678$  the first abstract,

NOTE Confidence: 0.817732886666667

00:04:13.678 --> 00:04:16.110 which was a late breaking abstract

NOTE Confidence: 0.817732886666667

 $00:04:16.110 \longrightarrow 00:04:17.905$  at ASH in December 2022,

NOTE Confidence: 0.817732886666667

 $00:04:17.905 \longrightarrow 00:04:20.105$  and it was ten years in the making.

NOTE Confidence: 0.817732886666667

 $00{:}04{:}20.110 \dashrightarrow 00{:}04{:}22.758$  So the objective of the A life two

NOTE Confidence: 0.817732886666667

00:04:22.758 --> 00:04:25.064 study was specifically to evaluate

NOTE Confidence: 0.817732886666667

 $00:04:25.064 \longrightarrow 00:04:27.026$  the efficacy of low molecular weight

NOTE Confidence: 0.817732886666667

 $00:04:27.026 \longrightarrow 00:04:29.508$  heparin and women with an inherited

NOTE Confidence: 0.817732886666667

 $00:04:29.508 \longrightarrow 00:04:31.280$  thrombophilia with recurrent miscarriage.

NOTE Confidence: 0.817732886666667

 $00{:}04{:}31.280 \dashrightarrow 00{:}04{:}33.268$  And so the way this study was

 $00:04:33.268 \longrightarrow 00:04:35.516$  designed is that patients who had a

NOTE Confidence: 0.817732886666667

00:04:35.516 --> 00:04:37.514 history of two or more miscarriages

NOTE Confidence: 0.817732886666667

00:04:37.583 --> 00:04:39.559 with an inherited thrombophilia,

NOTE Confidence: 0.817732886666667

 $00:04:39.560 \longrightarrow 00:04:41.576$  no more than seven weeks gestational

NOTE Confidence: 0.817732886666667

 $00:04:41.576 \longrightarrow 00:04:42.920$  age could be enrolled.

NOTE Confidence: 0.817732886666667

 $00:04:42.920 \longrightarrow 00:04:44.838$  They were randomized 1 to one to

NOTE Confidence: 0.817732886666667

 $00:04:44.838 \longrightarrow 00:04:46.752$  receive either a low molecular weight

NOTE Confidence: 0.817732886666667

 $00{:}04{:}46.752 \dashrightarrow 00{:}04{:}48.804$  he parin and those are the different

NOTE Confidence: 0.817732886666667

 $00:04:48.804 \longrightarrow 00:04:51.164$  ones that that were used in the study

NOTE Confidence: 0.817732886666667

 $00{:}04{:}51.164 \dashrightarrow 00{:}04{:}53.147$  plus the standard of pregnancy care

NOTE Confidence: 0.817732886666667

00:04:53.147 --> 00:04:55.800 or a standard of pregnancy care alone.

NOTE Confidence: 0.817732886666667

 $00:04:55.800 \longrightarrow 00:04:57.966$  The outcomes was the primary efficacy

NOTE Confidence: 0.817732886666667

 $00{:}04{:}57.966 \longrightarrow 00{:}05{:}00.159$  outcome was the live birth rate,

NOTE Confidence: 0.817732886666667

 $00:05:00.160 \longrightarrow 00:05:00.988$  secondary efficacy.

NOTE Confidence: 0.817732886666667

 $00{:}05{:}00.988 \dashrightarrow 00{:}05{:}02.644$  This miscarriage or adverse

 $00:05:02.644 \longrightarrow 00:05:04.625$  obstetric outcomes and then safety

NOTE Confidence: 0.817732886666667

 $00:05:04.625 \longrightarrow 00:05:05.960$  was looked at as well.

NOTE Confidence: 0.817732886666667

 $00:05:05.960 \longrightarrow 00:05:07.490$  And so these are the

NOTE Confidence: 0.817732886666667

 $00:05:07.490 \longrightarrow 00:05:08.714$  characteristics of the patients.

NOTE Confidence: 0.817732886666667

 $00:05:08.720 \longrightarrow 00:05:11.000$  The mean age was 33 and

NOTE Confidence: 0.817732886666667

 $00:05:11.000 \longrightarrow 00:05:12.520$  the majority of patients

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 $00:05:12.607 \longrightarrow 00:05:15.775$  actually had three or more miscarriages.

NOTE Confidence: 0.885496186875

 $00:05:15.780 \longrightarrow 00:05:17.575$  The most common inherited thrombophilia

NOTE Confidence: 0.885496186875

 $00{:}05{:}17.575 \dashrightarrow 00{:}05{:}19.915$  was the factor 5 Leiden heterozygous

NOTE Confidence: 0.885496186875

00:05:19.915 --> 00:05:22.335 followed by prothrombin gene mutation,

NOTE Confidence: 0.885496186875

 $00:05:22.340 \longrightarrow 00:05:24.420$  heterozygous protein ESTA efficiency

NOTE Confidence: 0.885496186875

 $00:05:24.420 \longrightarrow 00:05:28.216$  and then a mix of antithrombin combined

NOTE Confidence: 0.885496186875

00:05:28.216 --> 00:05:31.804 thrombophilias and then protein C deficiency.

NOTE Confidence: 0.885496186875

 $00:05:31.810 \longrightarrow 00:05:34.258$  And the outcome of the study was that there

NOTE Confidence: 0.885496186875

 $00:05:34.258 \longrightarrow 00:05:36.675$  was no difference between the standard of

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 $00:05:36.675 \longrightarrow 00:05:39.068$  care and low molecular weight heparin plus

 $00:05:39.068 \longrightarrow 00:05:41.576$  standard of care in the live birth rate.

NOTE Confidence: 0.885496186875

 $00:05:41.576 \longrightarrow 00:05:43.934$  So the odds ratio was 1.04 when

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 $00:05:43.934 \longrightarrow 00:05:45.869$  this was adjusted for age.

NOTE Confidence: 0.885496186875

 $00:05:45.870 \longrightarrow 00:05:47.616$  So less than or greater than

NOTE Confidence: 0.885496186875

 $00:05:47.616 \longrightarrow 00:05:49.530$  or equal to 36 years old,

NOTE Confidence: 0.885496186875

 $00:05:49.530 \longrightarrow 00:05:51.945$  the number of miscarriages or the center.

NOTE Confidence: 0.885496186875

 $00:05:51.950 \longrightarrow 00:05:54.134$  So if the patient was treated at a

NOTE Confidence: 0.885496186875

 $00:05:54.134 \longrightarrow 00:05:56.107$  tertiary center or a non tertiary center,

NOTE Confidence: 0.885496186875

 $00:05:56.110 \longrightarrow 00:05:59.064$  or by country UK versus the Netherlands,

NOTE Confidence: 0.885496186875

 $00{:}05{:}59.070 \dashrightarrow 00{:}06{:}00.555$  there was still no difference

NOTE Confidence: 0.885496186875

 $00:06:00.555 \longrightarrow 00:06:02.040$  between the live birth rate.

NOTE Confidence: 0.885496186875

 $00:06:02.040 \longrightarrow 00:06:04.768$  In the different arms.

NOTE Confidence: 0.885496186875

 $00{:}06{:}04.770 \dashrightarrow 00{:}06{:}06.595$  In terms of the differences

NOTE Confidence: 0.885496186875

 $00:06:06.595 \longrightarrow 00:06:07.690$  in adverse effects,

NOTE Confidence: 0.885496186875

 $00:06:07.690 \longrightarrow 00:06:10.266$  there were more adverse effects in patients

00:06:10.266 --> 00:06:12.250 receiving low molecular weight heparin,

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 $00:06:12.250 \longrightarrow 00:06:13.782$  such as easy bruising,

NOTE Confidence: 0.885496186875

 $00:06:13.782 \longrightarrow 00:06:14.548$  skin reactions,

NOTE Confidence: 0.885496186875

 $00:06:14.550 \longrightarrow 00:06:17.886$  that injection site and minor bleeding.

NOTE Confidence: 0.885496186875

 $00:06:17.890 \longrightarrow 00:06:19.997$  And so the conclusions of this study

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 $00:06:19.997 \longrightarrow 00:06:22.005$  was that low molecular weight heparin

NOTE Confidence: 0.885496186875

 $00:06:22.005 \longrightarrow 00:06:24.709$  did not result in a higher life birth

NOTE Confidence: 0.885496186875

 $00:06:24.709 \longrightarrow 00:06:26.732$  rate in women who had greater than

NOTE Confidence: 0.885496186875

 $00{:}06{:}26.732 \mathrel{--}{>} 00{:}06{:}29.665$  or equal to two pregnancy losses and

NOTE Confidence: 0.885496186875

 $00:06:29.665 \longrightarrow 00:06:31.039$  confirmed inherited thrombophilia.

NOTE Confidence: 0.885496186875

 $00{:}06{:}31.040 \dashrightarrow 00{:}06{:}33.280$  And the recommendation is to not use

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 $00:06:33.280 \longrightarrow 00:06:35.487$  low molecular weight heparin in women

NOTE Confidence: 0.885496186875

 $00:06:35.487 \longrightarrow 00:06:37.457$  with recurrent pregnancy loss and

NOTE Confidence: 0.885496186875

 $00:06:37.457 \longrightarrow 00:06:38.763$  confirmed inherited thrombophilias

NOTE Confidence: 0.885496186875

 $00:06:38.763 \longrightarrow 00:06:40.607$  to prevent pregnancy loss.

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 $00:06:40.610 \longrightarrow 00:06:44.348$  And so this also speaks to,

00:06:44.350 --> 00:06:45.408 not against,

NOTE Confidence: 0.885496186875

 $00{:}06{:}45.408 \dashrightarrow 00{:}06{:}48.053$  the routine testing for inherited

NOTE Confidence: 0.885496186875

 $00{:}06{:}48.053 \dashrightarrow 00{:}06{:}50.302$  thrombophilia in women with

NOTE Confidence: 0.885496186875

 $00:06:50.302 \longrightarrow 00:06:52.030$  recurrent pregnancy loss.

NOTE Confidence: 0.885496186875

 $00:06:52.030 \longrightarrow 00:06:54.226$  So that is the first abstract.

NOTE Confidence: 0.885496186875

 $00:06:54.230 \longrightarrow 00:06:56.360$  The second abstract will focus on

NOTE Confidence: 0.885496186875

00:06:56.360 --> 00:06:58.114 sickle cell disease, diarrhea,

NOTE Confidence: 0.885496186875

 $00:06:58.114 \longrightarrow 00:07:00.850$  and diminished ovarian reserve.

NOTE Confidence: 0.885496186875

 $00:07:00.850 \longrightarrow 00:07:02.029$  So second case,

NOTE Confidence: 0.885496186875

00:07:02.029 --> 00:07:05.200 a patient comes to you 12 years old.

NOTE Confidence: 0.885496186875

 $00:07:05.200 \longrightarrow 00:07:07.671$  She has a history of avascular necrosis

NOTE Confidence: 0.885496186875

 $00{:}07{:}07.671 \dashrightarrow 00{:}07{:}10.101$  and very rare vasal clusive crises

NOTE Confidence: 0.885496186875

 $00{:}07{:}10.101 \dashrightarrow 00{:}07{:}12.266$  she presents for initial visit.

NOTE Confidence: 0.885496186875

 $00{:}07{:}12.270 \dashrightarrow 00{:}07{:}14.225$  During the visit you discussed

NOTE Confidence: 0.885496186875

 $00:07:14.225 \longrightarrow 00:07:16.180$  the importance of hydroxyurea as

 $00:07:16.242 \longrightarrow 00:07:17.978$  a disease modifying therapy.

NOTE Confidence: 0.885496186875

 $00{:}07{:}17.980 \dashrightarrow 00{:}07{:}19.768$  She notes that her previous provider

NOTE Confidence: 0.885496186875

 $00:07:19.768 \dashrightarrow 00:07:22.175$  told her she does not require hydroxyurea

NOTE Confidence: 0.885496186875

00:07:22.175 --> 00:07:24.105 therapy due to infrequent basal,

NOTE Confidence: 0.885496186875

 $00:07:24.110 \longrightarrow 00:07:24.916$  occlusive crises.

NOTE Confidence: 0.885496186875

00:07:24.916 --> 00:07:25.722 But furthermore,

NOTE Confidence: 0.885496186875

00:07:25.722 --> 00:07:28.820 most concern for her is a Facebook,

NOTE Confidence: 0.885496186875

 $00:07:28.820 \longrightarrow 00:07:30.955$  Facebook group that she's a part of

NOTE Confidence: 0.885496186875

 $00{:}07{:}30.955 \dashrightarrow 00{:}07{:}32.680$  recommends not taking it for those

NOTE Confidence: 0.885496186875

 $00{:}07{:}32.680 \dashrightarrow 00{:}07{:}34.437$  who desire to have children in the

NOTE Confidence: 0.885496186875

 $00:07:34.499 \longrightarrow 00:07:36.317$  future as it leads to infertility.

NOTE Confidence: 0.885496186875

 $00:07:36.320 \longrightarrow 00:07:39.731$  So there is quite a bit of evidence for

NOTE Confidence: 0.885496186875

 $00:07:39.731 \longrightarrow 00:07:41.897$  hydroxyurea and fertility in males.

NOTE Confidence: 0.885496186875

 $00:07:41.900 \longrightarrow 00:07:45.356$  We know that it leads to lower sperm counts.

NOTE Confidence: 0.885496186875

 $00:07:45.360 \longrightarrow 00:07:47.898$  Which improves with cessation of hydroxyurea.

NOTE Confidence: 0.885496186875

 $00:07:47.900 \longrightarrow 00:07:50.020$  But we don't have a lot of data

 $00:07:50.020 \longrightarrow 00:07:52.005$  available for the use of hydroxyurea

NOTE Confidence: 0.885496186875

 $00{:}07{:}52.005 \dashrightarrow 00{:}07{:}54.093$  and diminished ovarian reserve in in

NOTE Confidence: 0.885496186875

 $00:07:54.152 \longrightarrow 00:07:56.570$  female patients with sickle cell disease.

NOTE Confidence: 0.885496186875

00:07:56.570 --> 00:07:59.180 And so from the evidence that we do have,

NOTE Confidence: 0.885496186875

 $00:07:59.180 \longrightarrow 00:08:01.343$  we do know that patients with sickle

NOTE Confidence: 0.885496186875

 $00:08:01.343 \longrightarrow 00:08:03.723$  cell disease have a higher rate of

NOTE Confidence: 0.885496186875

 $00:08:03.723 \longrightarrow 00:08:05.119$  diminished ovarian reserve compared

NOTE Confidence: 0.885496186875

 $00:08:05.119 \longrightarrow 00:08:07.020$  to those who are age and age,

NOTE Confidence: 0.885496186875

 $00{:}08{:}07.020 \dashrightarrow 00{:}08{:}10.149$  race and sex match to to patients

NOTE Confidence: 0.885496186875

 $00:08:10.149 \longrightarrow 00:08:12.300$  with sickle cell disease,

NOTE Confidence: 0.885496186875

 $00:08:12.300 \longrightarrow 00:08:14.372$  there is much more of a sharper

NOTE Confidence: 0.885496186875

 $00:08:14.372 \longrightarrow 00:08:15.260$  trajectory of decline.

NOTE Confidence: 0.885496186875

 $00{:}08{:}15.260 \dashrightarrow 00{:}08{:}16.744$  Of diminished ovarian reserve.

NOTE Confidence: 0.885496186875

 $00:08:16.744 \longrightarrow 00:08:19.526$  And the thought is that this is and

NOTE Confidence: 0.885496186875

 $00:08:19.526 \longrightarrow 00:08:21.486$  it was a theory again it had not

 $00:08:21.553 \longrightarrow 00:08:22.999$  previously been proven.

NOTE Confidence: 0.786146952608696

 $00{:}08{:}23.000 \dashrightarrow 00{:}08{:}25.544$  The thought is that this is related to

NOTE Confidence: 0.786146952608696

 $00:08:25.544 \longrightarrow 00:08:27.660$  hemolysis and anemia based occlusion.

NOTE Confidence: 0.786146952608696

 $00:08:27.660 \longrightarrow 00:08:30.000$  Basically any organ that can be

NOTE Confidence: 0.786146952608696

 $00:08:30.000 \longrightarrow 00:08:32.200$  affected by sickle cell disease,

NOTE Confidence: 0.786146952608696

 $00:08:32.200 \longrightarrow 00:08:33.460$  which is every organ in the body,

NOTE Confidence: 0.786146952608696

 $00:08:33.460 \longrightarrow 00:08:35.204$  the ovaries included, can.

NOTE Confidence: 0.786146952608696

 $00:08:35.204 \longrightarrow 00:08:37.384$  This can all lead to

NOTE Confidence: 0.786146952608696

 $00:08:37.384 \longrightarrow 00:08:39.099$  diminished ovarian reserve.

NOTE Confidence: 0.786146952608696

00:08:39.100 --> 00:08:41.116 And one thing that we don't know

NOTE Confidence: 0.786146952608696

00:08:41.116 --> 00:08:43.400 is that is hydroxy hydroxyurea,

NOTE Confidence: 0.786146952608696

00:08:43.400 --> 00:08:45.276 is it a friend or a foe?

NOTE Confidence: 0.786146952608696

 $00:08:45.280 \longrightarrow 00:08:48.220$  So we know that hydroxyurea causes.

NOTE Confidence: 0.786146952608696

00:08:48.220 --> 00:08:49.800 Reduction and disease severity.

NOTE Confidence: 0.786146952608696

 $00:08:49.800 \longrightarrow 00:08:53.299$  So in theory it should be preventing this

NOTE Confidence: 0.786146952608696

 $00:08:53.299 \longrightarrow 00:08:55.924$  accelerated age-related loss of eggs,

 $00:08:55.930 \longrightarrow 00:08:59.129$  but does it actually also contribute to

NOTE Confidence: 0.786146952608696

 $00:08:59.129 \longrightarrow 00:09:01.578$  the accelerated age-related loss of eggs?

NOTE Confidence: 0.786146952608696

 $00{:}09{:}01.578 \dashrightarrow 00{:}09{:}03.870$  And that is the question that

NOTE Confidence: 0.786146952608696

 $00:09:03.943 \longrightarrow 00:09:05.887$  we don't know the answer to.

NOTE Confidence: 0.786146952608696

 $00:09:05.890 \longrightarrow 00:09:08.260$  And so this study was actually

NOTE Confidence: 0.786146952608696

 $00:09:08.260 \longrightarrow 00:09:10.390$  this is a background study.

NOTE Confidence: 0.786146952608696

00:09:10.390 --> 00:09:13.407 So this was done from the MULTICENTRIC

NOTE Confidence: 0.786146952608696

00:09:13.407 --> 00:09:15.935 study of hydroxyurea and it was

NOTE Confidence: 0.786146952608696

 $00:09:15.935 \longrightarrow 00:09:18.257$  the pivotal trial that showed the

NOTE Confidence: 0.786146952608696

 $00:09:18.257 \longrightarrow 00:09:20.532$  benefits of hydroxyurea in patients

NOTE Confidence: 0.786146952608696

 $00{:}09{:}20.532 \dashrightarrow 00{:}09{:}23.250$  to present to prevent organ damage.

NOTE Confidence: 0.786146952608696

 $00:09:23.250 \longrightarrow 00:09:25.490$  And what this shows here is that

NOTE Confidence: 0.786146952608696

 $00{:}09{:}25.490 --> 00{:}09{:}27.889$ you can see at every age level

NOTE Confidence: 0.786146952608696

00:09:27.889 --> 00:09:29.589 starting from 20 to 25,

NOTE Confidence: 0.786146952608696

 $00:09:29.590 \longrightarrow 00:09:32.550$  we see that there's an age associated decline

 $00:09:32.550 \longrightarrow 00:09:35.634$  in the AM H level which is a marker of.

NOTE Confidence: 0.786146952608696

 $00:09:35.640 \longrightarrow 00:09:37.896$  Administration ovarian reserve when the MH

NOTE Confidence: 0.786146952608696

00:09:37.896 --> 00:09:40.716 level is less than 1.1 nanograms per ML.

NOTE Confidence: 0.786146952608696

 $00:09:40.716 \longrightarrow 00:09:42.361$  This contributes to the definition

NOTE Confidence: 0.786146952608696

 $00:09:42.361 \longrightarrow 00:09:44.258$  of diminished ovarian reserve.

NOTE Confidence: 0.786146952608696

 $00:09:44.260 \longrightarrow 00:09:46.444$  The dark lines here are the median

NOTE Confidence: 0.786146952608696

 $00:09:46.444 \longrightarrow 00:09:48.312$  age control match ADH levels and

NOTE Confidence: 0.786146952608696

 $00:09:48.312 \longrightarrow 00:09:50.328$  the the Gray boxes here these

NOTE Confidence: 0.786146952608696

 $00:09:50.395 \longrightarrow 00:09:52.200$  are patients with sickle cell.

NOTE Confidence: 0.786146952608696

 $00:09:52.200 \longrightarrow 00:09:55.780$  So we see even at age 20 to 25 years old,

NOTE Confidence: 0.786146952608696

 $00:09:55.780 \longrightarrow 00:09:58.727$  there is lower a MH levels compared

NOTE Confidence: 0.786146952608696

 $00:09:58.727 \longrightarrow 00:10:01.394$  to the controls and it's not until

NOTE Confidence: 0.786146952608696

 $00:10:01.394 \longrightarrow 00:10:04.119$  age 40 to 46 where we see that

NOTE Confidence: 0.786146952608696

 $00:10:04.120 \longrightarrow 00:10:06.238$  the controls as well as patients.

NOTE Confidence: 0.786146952608696

 $00:10:06.240 \longrightarrow 00:10:08.550$  Sickle cell disease both have

NOTE Confidence: 0.786146952608696

 $00:10:08.550 \longrightarrow 00:10:13.030$  AMH levels of less than 1.1.

 $00:10:13.030 \longrightarrow 00:10:15.186$  And so we what do we know?

NOTE Confidence: 0.786146952608696

 $00{:}10{:}15.190 \dashrightarrow 00{:}10{:}17.549$  We know that patients with sickle cell

NOTE Confidence: 0.786146952608696

 $00:10:17.549 \longrightarrow 00:10:19.639$  have higher rates of diminished ovarian

NOTE Confidence: 0.786146952608696

 $00:10:19.639 \longrightarrow 00:10:22.669$  reserve at least starting 25 to 30 years old.

NOTE Confidence: 0.786146952608696

00:10:22.670 --> 00:10:24.118 The relationship between diminished

NOTE Confidence: 0.786146952608696

00:10:24.118 --> 00:10:25.566 ovarian reserve and pregnancy

NOTE Confidence: 0.786146952608696

 $00:10:25.566 \longrightarrow 00:10:27.475$  outcomes and live births in sickle

NOTE Confidence: 0.786146952608696

 $00:10:27.475 \longrightarrow 00:10:28.890$  cell does require further study

NOTE Confidence: 0.786146952608696

 $00:10:28.890 \longrightarrow 00:10:30.266$  because that doesn't answer the

NOTE Confidence: 0.786146952608696

 $00{:}10{:}30.266 \dashrightarrow 00{:}10{:}32.195$  question we don't have an answer to.

NOTE Confidence: 0.786146952608696

 $00:10:32.195 \longrightarrow 00:10:34.385$  But the data regarding venata toxicity

NOTE Confidence: 0.786146952608696

 $00{:}10{:}34.385 \dashrightarrow 00{:}10{:}37.227$  in women with sickle cell disease who

NOTE Confidence: 0.786146952608696

 $00{:}10{:}37.227 \dashrightarrow 00{:}10{:}39.327$  are taking hydroxyurea is limited,

NOTE Confidence: 0.786146952608696

 $00:10:39.330 \longrightarrow 00:10:41.225$  and it's thought that hydroxyurea

NOTE Confidence: 0.786146952608696

 $00:10:41.225 \longrightarrow 00:10:43.120$  use might be a surrogate.

 $00{:}10{:}43.120 \dashrightarrow 00{:}10{:}45.325$  The disease severity rather than

NOTE Confidence: 0.786146952608696

 $00:10:45.325 \longrightarrow 00:10:47.089$  the hydroxyurea itself causing

NOTE Confidence: 0.786146952608696

00:10:47.089 --> 00:10:48.549 diminished ovarian reserve.

NOTE Confidence: 0.786146952608696

00:10:48.550 --> 00:10:52.134 And so this is an next abstract and

NOTE Confidence: 0.786146952608696

00:10:52.134 --> 00:10:55.492 their study aimed to assess this

NOTE Confidence: 0.786146952608696

 $00:10:55.492 \longrightarrow 00:10:58.447$  does hydroxyurea and does basal

NOTE Confidence: 0.786146952608696

 $00:10:58.447 \longrightarrow 00:11:01.062$  occlusive crises cause diminished

NOTE Confidence: 0.786146952608696

00:11:01.062 --> 00:11:03.090 ovarian follicle density?

NOTE Confidence: 0.786146952608696

 $00{:}11{:}03.090 \dashrightarrow 00{:}11{:}05.556$  And in girls and young females

NOTE Confidence: 0.786146952608696

00:11:05.556 --> 00:11:07.200 with sickle cell disease?

NOTE Confidence: 0.786146952608696

 $00:11:07.200 \longrightarrow 00:11:08.608$  And so this study,

NOTE Confidence: 0.786146952608696

00:11:08.608 --> 00:11:10.720 it was designed 88 patients with

NOTE Confidence: 0.786146952608696

00:11:10.794 --> 00:11:13.349 hemoglobin s s genotype underwent

NOTE Confidence: 0.786146952608696

 $00:11:13.349 \longrightarrow 00:11:14.882$  ovarian tissue cryopreservation

NOTE Confidence: 0.786146952608696

00:11:14.882 --> 00:11:17.430 prior to stem cell transplant.

NOTE Confidence: 0.786146952608696

00:11:17.430 --> 00:11:19.466 Ovarian tissue was evaluated

00:11:19.466 --> 00:11:21.502 histologically by two independent

NOTE Confidence: 0.786146952608696

 $00:11:21.502 \longrightarrow 00:11:23.465$  investigators and the primary

NOTE Confidence: 0.786146952608696

 $00:11:23.465 \longrightarrow 00:11:25.650$  outcome was ovarian follicle density

NOTE Confidence: 0.786146952608696

 $00:11:25.650 \longrightarrow 00:11:28.200$  and here are the characteristics.

NOTE Confidence: 0.786146952608696

00:11:28.200 --> 00:11:29.760 So most of the patients had

NOTE Confidence: 0.786146952608696

 $00:11:29.760 \longrightarrow 00:11:30.540$  not reached puberty.

NOTE Confidence: 0.786146952608696

 $00:11:30.540 \longrightarrow 00:11:33.991$  Puberty of 45% were treated with hydroxyurea

NOTE Confidence: 0.786146952608696

 $00:11:33.991 \longrightarrow 00:11:37.427$  with a median dose of 23 milligrams.

NOTE Confidence: 0.786146952608696

00:11:37.430 --> 00:11:39.295 It's per kilogram and the

NOTE Confidence: 0.786146952608696

00:11:39.295 --> 00:11:41.160 vast majority of patients did

NOTE Confidence: 0.692494187142857

00:11:41.230 --> 00:11:43.130 report vasal clusive crisis.

NOTE Confidence: 0.692494187142857

00:11:43.130 --> 00:11:45.986 Of those patients who had vasoactive crisis,

NOTE Confidence: 0.692494187142857

00:11:45.990 --> 00:11:48.454 49% were on hydroxyurea.

NOTE Confidence: 0.692494187142857

00:11:48.454 --> 00:11:50.940 94% of patients receive pack red

NOTE Confidence: 0.692494187142857

 $00:11:50.940 \longrightarrow 00:11:53.209$  blood cell transfusion at some point

 $00:11:53.209 \longrightarrow 00:11:55.540$  with the median applied units of 22.

NOTE Confidence: 0.692494187142857

 $00{:}11{:}55.540 \dashrightarrow 00{:}11{:}57.668$  And so the outcome of the study showed

NOTE Confidence: 0.692494187142857

 $00:11:57.668 \longrightarrow 00:11:59.731$  that the follicle density was similar

NOTE Confidence: 0.692494187142857

00:11:59.731 --> 00:12:01.939 in the hydroxyurea group compared to

NOTE Confidence: 0.692494187142857

 $00:12:01.997 \longrightarrow 00:12:03.977$  those without hydroxyurea exposure.

NOTE Confidence: 0.692494187142857

00:12:03.980 --> 00:12:05.640 But for the first time,

NOTE Confidence: 0.692494187142857

 $00:12:05.640 \longrightarrow 00:12:08.184$  a study did show that the follicle density

NOTE Confidence: 0.692494187142857

 $00:12:08.184 \longrightarrow 00:12:09.809$  was significantly higher in patients

NOTE Confidence: 0.692494187142857

 $00:12:09.809 \longrightarrow 00:12:11.993$  who did not have vasal occlusive crisis.

NOTE Confidence: 0.692494187142857

 $00:12:12.000 \longrightarrow 00:12:14.532$  And so this suggests that it's

NOTE Confidence: 0.692494187142857

 $00{:}12{:}14.532 \dashrightarrow 00{:}12{:}16.809$  actually the disease itself rather

NOTE Confidence: 0.692494187142857

 $00:12:16.809 \longrightarrow 00:12:19.359$  than hydroxyurea that is leading

NOTE Confidence: 0.692494187142857

 $00{:}12{:}19.359 \dashrightarrow 00{:}12{:}21.399$  to diminished ovarian reserve.

NOTE Confidence: 0.692494187142857

 $00:12:21.400 \longrightarrow 00:12:23.248$  And so the conclusions of this

NOTE Confidence: 0.692494187142857

 $00:12:23.248 \longrightarrow 00:12:24.900$  study as as I said,

NOTE Confidence: 0.692494187142857

 $00:12:24.900 \longrightarrow 00:12:27.294$  were the hydroxyurea exposure did not

 $00:12:27.294 \longrightarrow 00:12:29.799$  appear to reduce cortical follicle density

NOTE Confidence: 0.692494187142857

 $00{:}12{:}29.799 \dashrightarrow 00{:}12{:}32.319$  in females with sickle cell disease.

NOTE Confidence: 0.692494187142857

00:12:32.320 --> 00:12:33.420 And for the first time,

NOTE Confidence: 0.692494187142857

 $00:12:33.420 \longrightarrow 00:12:35.226$  the study could show an influence

NOTE Confidence: 0.692494187142857

00:12:35.226 --> 00:12:37.499 of VOC on ovarian follicle density,

NOTE Confidence: 0.692494187142857

 $00:12:37.500 \longrightarrow 00:12:39.803$  possibly related to reduced blood flow and

NOTE Confidence: 0.692494187142857

 $00:12:39.803 \longrightarrow 00:12:42.157$  all the effects of sickle cell disease.

NOTE Confidence: 0.692494187142857

 $00:12:42.160 \longrightarrow 00:12:45.946$  What we don't know is what.

NOTE Confidence: 0.692494187142857 00:12:45.950 --> 00:12:46.822 What the? NOTE Confidence: 0.692494187142857

 $00{:}12{:}46.822 \rightarrow 00{:}12{:}49.002$  Ovarian follicle density would look

NOTE Confidence: 0.692494187142857

 $00:12:49.002 \longrightarrow 00:12:52.492$  like in a patient who has been on

NOTE Confidence: 0.692494187142857

 $00:12:52.492 \longrightarrow 00:12:55.390$  hydroxyurea for a much longer duration,

NOTE Confidence: 0.692494187142857

 $00{:}12{:}55.390 \dashrightarrow 00{:}12{:}57.987$  because the median age of the patients

NOTE Confidence: 0.692494187142857

 $00{:}12{:}57.987 \dashrightarrow 00{:}13{:}00.530$  in this study was nine years old.

NOTE Confidence: 0.692494187142857

 $00:13:00.530 \longrightarrow 00:13:03.008$  And the evidence that we have for

 $00:13:03.008 \longrightarrow 00:13:04.481$  diminished ovarian reserve and

NOTE Confidence: 0.692494187142857

 $00{:}13{:}04.481 \dashrightarrow 00{:}13{:}06.196$  patients with sickle cell really

NOTE Confidence: 0.692494187142857

 $00:13:06.196 \longrightarrow 00:13:08.219$  starts at age between 20 and 25,

NOTE Confidence: 0.692494187142857

 $00:13:08.220 \longrightarrow 00:13:09.990$  that multicenter study of hydroxyurea

NOTE Confidence: 0.692494187142857

 $00:13:09.990 \longrightarrow 00:13:11.760$  that I showed you previously.

NOTE Confidence: 0.863884502777778

00:13:13.860 --> 00:13:15.920 And lastly, longitudinal data are

NOTE Confidence: 0.863884502777778

 $00:13:15.920 \longrightarrow 00:13:18.546$  needed to evaluate if genotype and

NOTE Confidence: 0.863884502777778

 $00{:}13{:}18.546 \dashrightarrow 00{:}13{:}20.542$  severity of disease accelerate

NOTE Confidence: 0.863884502777778

00:13:20.542 --> 00:13:22.039 diminished ovarian reserve.

NOTE Confidence: 0.863884502777778

 $00:13:22.040 \longrightarrow 00:13:23.510$  Thank you and that's it.

NOTE Confidence: 0.8675334875

00:13:30.250 --> 00:13:32.770 It is a pleasure to follow Doctor Vandoren,

NOTE Confidence: 0.8675334875

 $00:13:32.770 \longrightarrow 00:13:35.857$  and so I will take over the screen sharing.

NOTE Confidence: 0.91067636

 $00:13:39.360 \longrightarrow 00:13:41.960$  Beautiful. Good afternoon, everyone.

NOTE Confidence: 0.91067636

 $00:13:41.960 \longrightarrow 00:13:43.080$  Thank you for joining.

NOTE Confidence: 0.91067636

00:13:43.080 --> 00:13:44.460 My name is George Joshua.

NOTE Confidence: 0.91067636

 $00{:}13{:}44.460 \dashrightarrow 00{:}13{:}46.542$  I am an assistant professor of

00:13:46.542 --> 00:13:48.459 medicine and hematology here at Yale,

NOTE Confidence: 0.91067636

 $00:13:48.460 \longrightarrow 00:13:52.107$  and I'm the Pi for a quantitative

NOTE Confidence: 0.91067636

 $00:13:52.107 \longrightarrow 00:13:54.699$  decision sign and some lab.

NOTE Confidence: 0.91067636

 $00:13:54.700 \longrightarrow 00:13:56.100$  So without further ado,

NOTE Confidence: 0.91067636

 $00{:}13{:}56.100 \dashrightarrow 00{:}13{:}58.900$  let's talk about 3 hard hitting abstracts.

NOTE Confidence: 0.91067636

 $00:13:58.900 \longrightarrow 00:14:00.540$  I have no disclosures.

NOTE Confidence: 0.91067636

 $00:14:00.540 \longrightarrow 00:14:03.170$  The first, we're gonna go and talk

NOTE Confidence: 0.91067636

 $00{:}14{:}03.170 \dashrightarrow 00{:}14{:}04.980$  through cold gluten and disease

NOTE Confidence: 0.91067636

 $00:14:05.047 \longrightarrow 00:14:06.889$  and immune thrombocytopenia.

NOTE Confidence: 0.91067636

00:14:06.890 --> 00:14:09.450 We're going to start with all of these,

NOTE Confidence: 0.91067636

 $00:14:09.450 \longrightarrow 00:14:10.790$  by the way, our orals,

NOTE Confidence: 0.91067636

 $00:14:10.790 \longrightarrow 00:14:11.870$  one of them is a plenary,

NOTE Confidence: 0.91067636

 $00{:}14{:}11.870 \dashrightarrow 00{:}14{:}14.206$  as I'll point out in the next talk.

NOTE Confidence: 0.91067636

 $00:14:14.210 \longrightarrow 00:14:16.858$  And the last talk will be focused on

NOTE Confidence: 0.91067636

 $00:14:16.858 \longrightarrow 00:14:19.183$  a phenomenal study actually done by

 $00:14:19.183 \longrightarrow 00:14:21.571$  a trainee from the Cleveland Clinic.

NOTE Confidence: 0.91067636

 $00{:}14{:}21.580 \dashrightarrow 00{:}14{:}23.505$  So talking about patient reported

NOTE Confidence: 0.91067636

 $00:14:23.505 \longrightarrow 00:14:26.282$  outcomes 1st and septima abuse and our

NOTE Confidence: 0.91067636

 $00:14:26.282 \longrightarrow 00:14:28.257$  patients with cold agglutinin disease.

NOTE Confidence: 0.91067636

 $00:14:28.260 \longrightarrow 00:14:31.277$  And so this is the schematic for

NOTE Confidence: 0.91067636

 $00:14:31.277 \longrightarrow 00:14:35.014$  cadenza and this is a trial that

NOTE Confidence: 0.91067636

 $00:14:35.014 \longrightarrow 00:14:37.370$  focused on transfusion independent

NOTE Confidence: 0.91067636

 $00{:}14{:}37.370 \dashrightarrow 00{:}14{:}40.748$  individuals with cold agglutinin disease.

NOTE Confidence: 0.91067636

 $00{:}14{:}40.750 \dashrightarrow 00{:}14{:}42.414$  You can see part A and Part B.

NOTE Confidence: 0.91067636

 $00:14:42.420 \longrightarrow 00:14:44.772$  Part A has been reported on

NOTE Confidence: 0.91067636

00:14:44.772 --> 00:14:46.720 previously at this year's Ash,

NOTE Confidence: 0.91067636

00:14:46.720 --> 00:14:47.840 Alexander Roth and colleagues

NOTE Confidence: 0.91067636

 $00:14:47.840 \longrightarrow 00:14:48.960$  reported on Part B,

NOTE Confidence: 0.91067636

 $00:14:48.960 \longrightarrow 00:14:51.813$  and so that that is what I'll focus on.

NOTE Confidence: 0.91067636

00:14:51.820 --> 00:14:54.716 But for anchoring,

NOTE Confidence: 0.91067636

00:14:54.716 --> 00:14:58.412 part A was a double-blind period of

 $00:14:58.412 \longrightarrow 00:15:01.179$  randomization to sitemap versus placebo.

NOTE Confidence: 0.91067636

 $00{:}15{:}01.180 \dashrightarrow 00{:}15{:}02.890$  You see that there's a screening

NOTE Confidence: 0.91067636

 $00:15:02.890 \longrightarrow 00:15:04.351$  observation period there of six

NOTE Confidence: 0.91067636

 $00:15:04.351 \longrightarrow 00:15:05.696$  weeks leading into that study.

NOTE Confidence: 0.91067636

00:15:05.700 --> 00:15:08.394 And Part B was then the continuation

NOTE Confidence: 0.91067636

00:15:08.394 --> 00:15:10.716 of the open label phase component

NOTE Confidence: 0.91067636

00:15:10.716 --> 00:15:13.120 of patients who are on similar map

NOTE Confidence: 0.91067636

 $00{:}15{:}13.120 \dashrightarrow 00{:}15{:}15.373$  on similar mab and patients who are

NOTE Confidence: 0.91067636

00:15:15.373 --> 00:15:17.245 on placebo going to similar map.

NOTE Confidence: 0.91067636

 $00:15:17.250 \longrightarrow 00:15:18.948$  So in the open label extension,

NOTE Confidence: 0.91067636

00:15:18.950 --> 00:15:19.482 Part B,

NOTE Confidence: 0.91067636

 $00{:}15{:}19.482 \dashrightarrow 00{:}15{:}21.078$  all of those patients who completed

NOTE Confidence: 0.91067636

 $00{:}15{:}21.078 \dashrightarrow 00{:}15{:}23.178$  part A were eligible then to receive

NOTE Confidence: 0.91067636

 $00:15:23.178 \longrightarrow 00:15:24.983$  biweekly doses and this was weight

NOTE Confidence: 0.91067636

 $00:15:24.983 \longrightarrow 00:15:27.089$  based as you can see in front of you.

 $00:15:27.090 \longrightarrow 00:15:28.546$  What we'll focus on in the next slide

NOTE Confidence: 0.91067636

 $00{:}15{:}28.546 \dashrightarrow 00{:}15{:}30.087$  will be the patient reported outcome

NOTE Confidence: 0.91067636

 $00{:}15{:}30.090 \dashrightarrow 00{:}15{:}34.216$  endpoints and there are five of them.

NOTE Confidence: 0.91067636

 $00:15:34.220 \longrightarrow 00:15:36.092$  And so the objective here again is to

NOTE Confidence: 0.91067636

 $00:15:36.092 \longrightarrow 00:15:38.329$  look at transfusion independent patients.

NOTE Confidence: 0.91067636

 $00:15:38.330 \longrightarrow 00:15:40.689$  This is cadenza trial as opposed to

NOTE Confidence: 0.91067636

 $00:15:40.689 \longrightarrow 00:15:42.114$  transfusion dependent called gluten

NOTE Confidence: 0.91067636

 $00:15:42.114 \longrightarrow 00:15:44.238$  disease patients that would be cardinal.

NOTE Confidence: 0.91067636

 $00{:}15{:}44.240 \dashrightarrow 00{:}15{:}46.102$  And the follow up here is immediate

NOTE Confidence: 0.91067636

 $00:15:46.102 \longrightarrow 00:15:47.784$  treatment over 99 weeks and the

NOTE Confidence: 0.91067636

 $00{:}15{:}47.784 \longrightarrow 00{:}15{:}49.164$  patient reported outcomes are you

NOTE Confidence: 0.91067636

 $00:15:49.164 \longrightarrow 00:15:51.080$  can see them in front of you here,

NOTE Confidence: 0.91067636

 $00:15:51.080 \longrightarrow 00:15:53.430$  the facet fatigue, the PGS,

NOTE Confidence: 0.91067636

 $00:15:53.430 \longrightarrow 00:15:53.838$  the PG,

NOTE Confidence: 0.91067636

 $00{:}15{:}53.838 \dashrightarrow 00{:}15{:}55.834$  I see the 12 item SF12 and I noted

NOTE Confidence: 0.91067636

 $00:15:55.834 \longrightarrow 00:15:57.364$  for specific reasons that you'll

 $00:15:57.364 \longrightarrow 00:15:59.769$  see on the next slide what that

NOTE Confidence: 0.91067636

 $00:15:59.769 \longrightarrow 00:16:01.639$  includes both physical and mental

NOTE Confidence: 0.91067636

 $00:16:01.639 \longrightarrow 00:16:03.164$  component scores and finally

NOTE Confidence: 0.91067636

 $00:16:03.164 \longrightarrow 00:16:05.099$  the eurogol visual analog scale.

NOTE Confidence: 0.804984824285714

 $00:16:07.330 \longrightarrow 00:16:11.130$  And here are the baselines and the patient

NOTE Confidence: 0.804984824285714

 $00{:}16{:}11.130 \dashrightarrow 00{:}16{:}13.990$  sample sizes and the mean effects.

NOTE Confidence: 0.804984824285714

 $00:16:13.990 \longrightarrow 00:16:15.862$  And in the right column here I put for

NOTE Confidence: 0.804984824285714

 $00:16:15.862 \longrightarrow 00:16:17.574$  you what the investigators reported

NOTE Confidence: 0.804984824285714

 $00{:}16{:}17.574 \dashrightarrow 00{:}16{:}19.384$  as clinically important changes that

NOTE Confidence: 0.804984824285714

 $00:16:19.384 \longrightarrow 00:16:21.436$  were derived in private prior studies.

NOTE Confidence: 0.804984824285714

 $00:16:21.440 \longrightarrow 00:16:24.002$  So we can actually interpret what

NOTE Confidence: 0.804984824285714

 $00:16:24.002 \longrightarrow 00:16:26.139$  is cleanly clinically meaningful or

NOTE Confidence: 0.804984824285714

 $00{:}16{:}26.139 \dashrightarrow 00{:}16{:}27.426$  potentially clinically meaningful.

NOTE Confidence: 0.804984824285714

 $00:16:27.426 \longrightarrow 00:16:30.494$  So the mean age of these patients

NOTE Confidence: 0.804984824285714

 $00:16:30.494 \longrightarrow 00:16:32.608$  was 6780% of them were women and

 $00:16:32.608 \longrightarrow 00:16:34.965$  you can see the facet fatigue score

NOTE Confidence: 0.804984824285714

 $00:16:34.965 \longrightarrow 00:16:36.701$  with an improvement of 8.8.

NOTE Confidence: 0.804984824285714

 $00:16:36.701 \longrightarrow 00:16:37.656$  Right in the middle there,

NOTE Confidence: 0.804984824285714

 $00:16:37.660 \longrightarrow 00:16:39.406$  with the standard error of 2.1,

NOTE Confidence: 0.804984824285714

 $00:16:39.406 \longrightarrow 00:16:41.486$  you'll note a reported clinically

NOTE Confidence: 0.804984824285714

 $00:16:41.486 \longrightarrow 00:16:43.150$  important change which is

NOTE Confidence: 0.804984824285714

00:16:43.215 --> 00:16:45.357 available here is more than five.

NOTE Confidence: 0.804984824285714

 $00:16:45.360 \longrightarrow 00:16:47.656$  You have to think about that in the

NOTE Confidence: 0.804984824285714

 $00{:}16{:}47.656 \dashrightarrow 00{:}16{:}50.120$  context of the standard error now,

NOTE Confidence: 0.804984824285714 00:16:50.120 --> 00:16:51.137 the SF 12, NOTE Confidence: 0.804984824285714

 $00:16:51.137 \longrightarrow 00:16:52.832$  the physical and the mental

NOTE Confidence: 0.804984824285714

 $00:16:52.832 \longrightarrow 00:16:54.070$  cognitive scores as well.

NOTE Confidence: 0.804984824285714

00:16:54.070 --> 00:16:56.722 Hit above the report of clinically

NOTE Confidence: 0.804984824285714

 $00:16:56.722 \longrightarrow 00:16:58.863$  important changes with statement lab

NOTE Confidence: 0.804984824285714

 $00:16:58.863 \longrightarrow 00:17:01.578$  use and you'll see an added about 4.9

NOTE Confidence: 0.804984824285714

 $00:17:01.578 \longrightarrow 00:17:04.468$  points for the physical component,

 $00:17:04.470 \longrightarrow 00:17:06.798$  4.0 points for the mental component.

NOTE Confidence: 0.804984824285714

 $00:17:06.800 \longrightarrow 00:17:09.576$  And the last piece within the rows you

NOTE Confidence: 0.804984824285714

 $00{:}17{:}09.576 \dashrightarrow 00{:}17{:}12.498$  see the EQ visual analog score scale

NOTE Confidence: 0.804984824285714

00:17:12.498 --> 00:17:15.180 again and add an improvement there,

NOTE Confidence: 0.804984824285714

 $00:17:15.180 \longrightarrow 00:17:17.476$  but there is not a study that has

NOTE Confidence: 0.804984824285714

 $00:17:17.476 \longrightarrow 00:17:18.907$  derived invalidated a reported

NOTE Confidence: 0.804984824285714

00:17:18.907 --> 00:17:20.499 clinically important change here.

NOTE Confidence: 0.804984824285714

 $00{:}17{:}20.500 \dashrightarrow 00{:}17{:}22.420$  And so that is that's why I put

NOTE Confidence: 0.804984824285714

 $00:17:22.420 \longrightarrow 00:17:24.020$  that as a non applicable.

NOTE Confidence: 0.804984824285714

00:17:24.020 --> 00:17:26.843 Now if you look at PGI S&P GIC,

NOTE Confidence: 0.804984824285714

 $00:17:26.843 \longrightarrow 00:17:30.140$  you can see too that for the pgis

NOTE Confidence: 0.804984824285714

00:17:30.140 --> 00:17:32.076 31% there was a 31% improvement

NOTE Confidence: 0.804984824285714

 $00{:}17{:}32.076 \dashrightarrow 00{:}17{:}34.556$  in the proportion of patients

NOTE Confidence: 0.804984824285714

 $00{:}17{:}34.560 \dashrightarrow 00{:}17{:}36.124$  reporting nor mild fatigue.

NOTE Confidence: 0.804984824285714

00:17:36.124 --> 00:17:39.349 So it more patients by the conclusion of

 $00:17:39.349 \longrightarrow 00:17:42.142$  the study reported no or mild fatigue

NOTE Confidence: 0.804984824285714

 $00{:}17{:}42.142 \dashrightarrow 00{:}17{:}44.571$  and the delta there was from about

NOTE Confidence: 0.804984824285714

00:17:44.571 --> 00:17:47.689 mid 40s to mid 70s percentage wise.

NOTE Confidence: 0.804984824285714

 $00{:}17{:}47.689 \dashrightarrow 00{:}17{:}50.605$  And finally the PGIC by the end of

NOTE Confidence: 0.804984824285714

 $00:17:50.605 \longrightarrow 00:17:52.866$  the study 71 of the patients who were

NOTE Confidence: 0.804984824285714

 $00:17:52.866 \longrightarrow 00:17:55.062$  reporting a positive change from the

NOTE Confidence: 0.804984824285714

 $00:17:55.062 \longrightarrow 00:17:57.405$  baseline from where they had started from.

NOTE Confidence: 0.804984824285714

 $00:17:57.410 \longrightarrow 00:17:58.550$  So take home.

NOTE Confidence: 0.804984824285714

00:17:58.550 --> 00:18:01.537 So the condenser part BPRO data it

NOTE Confidence: 0.804984824285714

 $00:18:01.537 \longrightarrow 00:18:03.982$  appears that September map demonstrate

NOTE Confidence: 0.804984824285714

 $00{:}18{:}03.982 \dashrightarrow 00{:}18{:}06.578$  can demonstrate benefits that are

NOTE Confidence: 0.804984824285714

 $00:18:06.578 \longrightarrow 00:18:08.940$  associated with its use specifically on

NOTE Confidence: 0.804984824285714

 $00:18:08.940 \longrightarrow 00:18:11.170$  fatigue and overall quality of life.

NOTE Confidence: 0.804984824285714

00:18:11.170 --> 00:18:12.952 The benefits appear to maintain for

NOTE Confidence: 0.804984824285714

 $00:18:12.952 \longrightarrow 00:18:14.793$  more than one year and mentioned

NOTE Confidence: 0.804984824285714

 $00:18:14.793 \longrightarrow 00:18:16.569$  median follow up in 99 weeks.

 $00:18:16.570 \longrightarrow 00:18:19.372$  And and this is important patients

NOTE Confidence: 0.804984824285714

 $00:18:19.372 \longrightarrow 00:18:21.240$  previously previously treated with

NOTE Confidence: 0.804984824285714

00:18:21.312 --> 00:18:23.584 placebo did demonstrate a brisk

NOTE Confidence: 0.804984824285714

 $00:18:23.584 \longrightarrow 00:18:25.726$  PR O improvement in Part B.

NOTE Confidence: 0.804984824285714

 $00:18:25.730 \longrightarrow 00:18:27.106$  So these are the patients who went from.

NOTE Confidence: 0.804984824285714

 $00:18:27.110 \longrightarrow 00:18:28.818$  Cebu to sitemap so they are able

NOTE Confidence: 0.804984824285714

00:18:28.818 --> 00:18:30.774 to catch up to the patients who

NOTE Confidence: 0.804984824285714

 $00:18:30.774 \longrightarrow 00:18:32.224$  had been on sitemap before.

NOTE Confidence: 0.66837746

 $00:18:34.890 \longrightarrow 00:18:36.526$  Moving to a plenary,

NOTE Confidence: 0.66837746

 $00:18:36.526 \longrightarrow 00:18:40.550$  this is Edgar Tigard and ITP Egard Tiger mod.

NOTE Confidence: 0.66837746

 $00:18:40.550 \longrightarrow 00:18:43.838$  Is an IG1 FC fragment and a natural

NOTE Confidence: 0.66837746

 $00{:}18{:}43.838 \dashrightarrow 00{:}18{:}46.990$  ligand for the neonatal FC receptor.

NOTE Confidence: 0.66837746

00:18:46.990 --> 00:18:48.502 It's engineered to competitively

NOTE Confidence: 0.66837746

 $00{:}18{:}48.502 \dashrightarrow 00{:}18{:}51.701$  bind to FCRN with a high affinity and

NOTE Confidence: 0.66837746

00:18:51.701 --> 00:18:54.287 prevent the recycling of endogenous IG,

 $00:18:54.290 \longrightarrow 00:18:56.150$  but it doesn't affect albumin.

NOTE Confidence: 0.66837746

 $00{:}18{:}56.150 \dashrightarrow 00{:}18{:}57.944$  This drug has been improved in

NOTE Confidence: 0.66837746

 $00:18:57.944 \longrightarrow 00:18:59.727$  myasthenia gravis and here I present

NOTE Confidence: 0.66837746

00:18:59.727 --> 00:19:01.568 to you the results from advanced 4

NOTE Confidence: 0.66837746

00:19:01.568 --> 00:19:03.409 which is a phase three multicenter,

NOTE Confidence: 0.66837746

00:19:03.410 --> 00:19:06.428 double-blind, placebo-controlled RCT.

NOTE Confidence: 0.66837746

 $00:19:06.430 \longrightarrow 00:19:09.000$  In patients with immune thrombocytopenia,

NOTE Confidence: 0.66837746

00:19:09.000 --> 00:19:11.214 generally speaking when we think about

NOTE Confidence: 0.66837746

 $00{:}19{:}11.214 \dashrightarrow 00{:}19{:}12.690$  pathogenic autoantibodies and ITP,

NOTE Confidence: 0.66837746

00:19:12.690 --> 00:19:14.070 we think about increased platelet

NOTE Confidence: 0.66837746

 $00{:}19{:}14.070 \dashrightarrow 00{:}19{:}15.914$  clearance as one of the mechanisms

NOTE Confidence: 0.66837746

 $00{:}19{:}15.914 \dashrightarrow 00{:}19{:}17.570$  in inhibiting platelet production

NOTE Confidence: 0.66837746

 $00:19:17.570 \longrightarrow 00:19:19.226$  and impacting platelet function.

NOTE Confidence: 0.66837746

 $00:19:19.230 \longrightarrow 00:19:21.310$  You see all of those listed in a

NOTE Confidence: 0.66837746

 $00:19:21.310 \longrightarrow 00:19:23.448$  schematic to the left and then on

NOTE Confidence: 0.66837746

 $00{:}19{:}23.448 \dashrightarrow 00{:}19{:}26.010$  the right the the schematic for the

 $00{:}19{:}26.089 \dashrightarrow 00{:}19{:}29.835$  recycling of your endogenous IG and

NOTE Confidence: 0.66837746

00:19:29.835 --> 00:19:34.618 where F guys taking mod is is acting.

NOTE Confidence: 0.66837746

00:19:34.620 --> 00:19:35.992 Now for this RCT,

NOTE Confidence: 0.66837746

 $00:19:35.992 \longrightarrow 00:19:38.640$  you had to have been an adult,

NOTE Confidence: 0.66837746

 $00:19:38.640 \longrightarrow 00:19:40.930$  so at least 18 years of age and to have

NOTE Confidence: 0.66837746

00:19:40.997 --> 00:19:43.589 chronic or persistent ITP and as a reminder,

NOTE Confidence: 0.66837746

00:19:43.590 --> 00:19:44.196 chronic ITP,

NOTE Confidence: 0.66837746

00:19:44.196 --> 00:19:46.620 ITP of duration at 12 months or more,

NOTE Confidence: 0.66837746

 $00:19:46.620 \longrightarrow 00:19:50.084$  persistent is 3 to 3 to 12 months.

NOTE Confidence: 0.66837746

 $00:19:50.090 \longrightarrow 00:19:52.071$  You have to have two platelet counts

NOTE Confidence: 0.66837746

 $00:19:52.071 \longrightarrow 00:19:54.162$  of less than 30,000 during the

NOTE Confidence: 0.66837746

 $00:19:54.162 \longrightarrow 00:19:55.664$  screening period and the screening

NOTE Confidence: 0.66837746

 $00{:}19{:}55.664 \dashrightarrow 00{:}19{:}57.330$  period lasted 2 weeks for this trial.

NOTE Confidence: 0.66837746

 $00:19:57.330 \longrightarrow 00:20:00.120$  And you had to have been on at least

NOTE Confidence: 0.66837746

 $00:20:00.120 \longrightarrow 00:20:02.185$  two ITP treatments or one prior

 $00:20:02.185 \longrightarrow 00:20:03.940$  treatment and one concurrent treatment.

NOTE Confidence: 0.66837746

 $00:20:03.940 \longrightarrow 00:20:05.950$  Those are the eligibility criteria,

NOTE Confidence: 0.66837746

 $00:20:05.950 \longrightarrow 00:20:07.708$  an important point for this trial

NOTE Confidence: 0.66837746

 $00:20:07.708 \longrightarrow 00:20:09.934$  that's not listed on the slide because

NOTE Confidence: 0.66837746

 $00:20:09.934 \longrightarrow 00:20:11.594$  it was an eligibility criteria.

NOTE Confidence: 0.66837746

00:20:11.600 --> 00:20:12.950 But once the trial started,

NOTE Confidence: 0.66837746

 $00{:}20{:}12.950 \dashrightarrow 00{:}20{:}15.242$  these patients needed to be maintained

NOTE Confidence: 0.66837746

 $00:20:15.242 \longrightarrow 00:20:17.937$  on the same dosing of whatever they

NOTE Confidence: 0.66837746

 $00{:}20{:}17.937 \dashrightarrow 00{:}20{:}20{:}127$  were on previously for their IT.

NOTE Confidence: 0.66837746

 $00:20:20.130 \longrightarrow 00:20:21.638$  Be without those escalations.

NOTE Confidence: 0.66837746

00:20:21.638 --> 00:20:24.297 So the treatment period was 24 weeks

NOTE Confidence: 0.66837746

00:20:24.297 --> 00:20:26.259 and patients were randomized 2 to

NOTE Confidence: 0.66837746

 $00{:}20{:}26.259 \dashrightarrow 00{:}20{:}29.255$  one to Edgar Sigma 10 milligrams per

NOTE Confidence: 0.66837746

 $00:20:29.255 \longrightarrow 00:20:31.203$  kilogram intravenously versus placebo.

NOTE Confidence: 0.66837746

 $00:20:31.210 \longrightarrow 00:20:33.802$  And there was a period as you can see

NOTE Confidence: 0.66837746

00:20:33.802 --> 00:20:36.986 in front of you here where you could

 $00:20:36.986 \longrightarrow 00:20:39.859$  have those adjustments of I've got taken mod.

NOTE Confidence: 0.66837746

 $00:20:39.860 \longrightarrow 00:20:40.838$  At the end of the trial,

NOTE Confidence: 0.66837746

 $00:20:40.840 \longrightarrow 00:20:41.996$  as we'll talk about,

NOTE Confidence: 0.66837746

00:20:41.996 --> 00:20:43.730 there's a follow-up period and more

NOTE Confidence: 0.66837746

 $00:20:43.786 \longrightarrow 00:20:46.534$  than 90% went on to enroll in the

NOTE Confidence: 0.66837746

 $00:20:46.534 \longrightarrow 00:20:48.653$  Open label extension called Advanced

NOTE Confidence: 0.66837746

 $00:20:48.653 \longrightarrow 00:20:52.115$  Plus that is in its early phases now.

NOTE Confidence: 0.66837746

 $00:20:52.120 \longrightarrow 00:20:53.605$  These are the baseline characteristics

NOTE Confidence: 0.66837746

 $00:20:53.605 \longrightarrow 00:20:54.496$  for these patients.

NOTE Confidence: 0.66837746

 $00:20:54.500 \longrightarrow 00:20:56.978$  You can see that they match

NOTE Confidence: 0.66837746

 $00:20:56.978 \longrightarrow 00:20:58.217$  up reasonably well.

NOTE Confidence: 0.66837746

00:20:58.220 --> 00:20:59.072 In particular,

NOTE Confidence: 0.66837746

00:20:59.072 --> 00:21:02.054 I'll point out The Who bleeding scores

NOTE Confidence: 0.66837746

 $00:21:02.054 \longrightarrow 00:21:04.614$  pretty similar across the board patients

NOTE Confidence: 0.66837746

00:21:04.614 --> 00:21:07.739 with three or more prior ITP therapies,

00:21:07.740 --> 00:21:09.380 patients that we technically think

NOTE Confidence: 0.66837746

 $00:21:09.380 \longrightarrow 00:21:11.520$  of as quote UN quote refractory.

NOTE Confidence: 0.66837746

 $00:21:11.520 \longrightarrow 00:21:13.984$  That's how the trial referred to them

NOTE Confidence: 0.66837746

 $00:21:13.984 \longrightarrow 00:21:16.889$  as well and that's about 6 to 7 out

NOTE Confidence: 0.66837746

 $00:21:16.889 \longrightarrow 00:21:19.737$  of 10 patients in both arms and to

NOTE Confidence: 0.66837746

00:21:19.737 --> 00:21:21.732 the concurrent ITP therapy types.

NOTE Confidence: 0.66837746

00:21:21.740 --> 00:21:23.908 Baseline being utilized, steroids,

NOTE Confidence: 0.66837746

00:21:23.908 --> 00:21:24.450 tipra,

NOTE Confidence: 0.66837746

 $00{:}21{:}24.450 --> 00{:}21{:}24.838 \ \mathrm{is},$ 

NOTE Confidence: 0.66837746

 $00:21:24.838 \longrightarrow 00:21:26.390$  and other immune suppressants

NOTE Confidence: 0.66837746

 $00{:}21{:}26.390 \dashrightarrow 00{:}21{:}27.702$  all reasonably nicely matched,

NOTE Confidence: 0.66837746

 $00:21:27.702 \longrightarrow 00:21:29.670$  and so here in this case,

NOTE Confidence: 0.66837746

 $00:21:29.670 \longrightarrow 00:21:32.764$  you can see that this random allocation

NOTE Confidence: 0.66837746

00:21:32.764 --> 00:21:35.247 has probably served its purpose

NOTE Confidence: 0.66837746

 $00:21:35.247 \longrightarrow 00:21:37.395$  of controlling for confounding.

NOTE Confidence: 0.66837746

 $00:21:37.400 \longrightarrow 00:21:39.045$  The endpoints here are the

 $00:21:39.045 \longrightarrow 00:21:40.690$  here's the primary endpoint and

NOTE Confidence: 0.8144564045

00:21:40.748 --> 00:21:42.393 also key secondary endpoints all

NOTE Confidence: 0.8144564045

 $00:21:42.393 \longrightarrow 00:21:44.900$  to say that all platelets specific

NOTE Confidence: 0.8144564045

00:21:44.900 --> 00:21:46.484 secondary endpoints were met.

NOTE Confidence: 0.8144564045

 $00{:}21{:}46.484 \to 00{:}21{:}48.860$  The primary endpoint was the proportion

NOTE Confidence: 0.8144564045

 $00:21:48.924 \longrightarrow 00:21:50.922$  of patients with a sustained count

NOTE Confidence: 0.8144564045

 $00:21:50.922 \rightarrow 00:21:53.350$  response and as typical in ITP literature,

NOTE Confidence: 0.8144564045

 $00:21:53.350 \longrightarrow 00:21:55.674$  this was defined as a platelet count

NOTE Confidence: 0.8144564045

 $00:21:55.674 \longrightarrow 00:21:58.447$  of 50,000 or more and in this case on

NOTE Confidence: 0.8144564045

 $00:21:58.447 \longrightarrow 00:22:01.180$  at least four out of 6 clinic visits

NOTE Confidence: 0.8144564045

00:22:01.180 --> 00:22:03.460 during the conclusion of this period,

NOTE Confidence: 0.8144564045

 $00:22:03.460 \longrightarrow 00:22:05.658$  in this case weeks 19 through 24,

NOTE Confidence: 0.8144564045

 $00:22:05.660 \longrightarrow 00:22:07.200$  of course in the absence of ITP.

NOTE Confidence: 0.8144564045

 $00:22:07.200 \longrightarrow 00:22:09.186$  Others and then key secondary endpoints

NOTE Confidence: 0.8144564045

 $00:22:09.186 \longrightarrow 00:22:11.350$  include cumulative weeks of Disease Control,

 $00:22:11.350 \longrightarrow 00:22:12.946$  so just the number of weeks

NOTE Confidence: 0.8144564045

 $00{:}22{:}12.946 --> 00{:}22{:}13.744$  of Disease Control,

NOTE Confidence: 0.8144564045

 $00:22:13.750 \longrightarrow 00:22:15.460$  something called sustained

NOTE Confidence: 0.8144564045

 $00:22:15.460 \longrightarrow 00:22:17.170$  platelet count response.

NOTE Confidence: 0.8144564045

 $00:22:17.170 \longrightarrow 00:22:19.336$  And the durable sustained platelet count

NOTE Confidence: 0.8144564045

 $00{:}22{:}19.336 \dashrightarrow 00{:}22{:}21.493$  response which is just extending that

NOTE Confidence: 0.8144564045

 $00{:}22{:}21.493 \dashrightarrow 00{:}22{:}23.768$  risk exposure period out to week 17.

NOTE Confidence: 0.8144564045

00:22:23.770 --> 00:22:25.814 And so there's a significance on the

NOTE Confidence: 0.8144564045

 $00{:}22{:}25.814 \dashrightarrow 00{:}22{:}27.722$  platelet count and all of these the

NOTE Confidence: 0.8144564045

 $00:22:27.722 \longrightarrow 00:22:29.714$  take homes from this plenary abstract

NOTE Confidence: 0.8144564045

 $00{:}22{:}29.714 \dashrightarrow 00{:}22{:}31.727$  whereas that lowering total IG levels

NOTE Confidence: 0.8144564045

 $00:22:31.727 \longrightarrow 00:22:33.653$  by targeting the neonatal FC receptor

NOTE Confidence: 0.8144564045

 $00:22:33.653 \longrightarrow 00:22:35.407$  appears to demonstrate statistically

NOTE Confidence: 0.8144564045

00:22:35.407 --> 00:22:37.239 significant improvements in primary

NOTE Confidence: 0.8144564045

 $00:22:37.239 \longrightarrow 00:22:38.985$  and secondary platelet endpoints.

NOTE Confidence: 0.8144564045

 $00:22:38.985 \longrightarrow 00:22:41.905$  The drug also appears to be well tolerated

00:22:41.905 --> 00:22:44.269 without new safety signals that did not

NOTE Confidence: 0.8144564045

 $00{:}22{:}44.269 \dashrightarrow 00{:}22{:}46.700$  have an opportunity to include that here.

NOTE Confidence: 0.8144564045

 $00:22:46.700 \longrightarrow 00:22:48.812$  But most adverse adverse events were

NOTE Confidence: 0.8144564045

 $00:22:48.812 \longrightarrow 00:22:50.999$  reported as quote mild to moderate.

NOTE Confidence: 0.8144564045

 $00:22:51.000 \longrightarrow 00:22:53.868$  And finally the open label extension

NOTE Confidence: 0.8144564045

 $00:22:53.868 \longrightarrow 00:22:55.780$  period is ongoing currently.

NOTE Confidence: 0.8144564045

00:22:55.780 --> 00:22:58.324 Now to wrap up this little portion with

NOTE Confidence: 0.8144564045

 $00:22:58.324 \longrightarrow 00:23:00.853$  a third abstract from the Cleveland

NOTE Confidence: 0.8144564045

00:23:00.853 --> 00:23:03.577 Clinic of 300 plus consecutive patients

NOTE Confidence: 0.8144564045

 $00:23:03.651 \longrightarrow 00:23:06.495$  treated with splenectomy for a variety

NOTE Confidence: 0.8144564045

 $00:23:06.495 \longrightarrow 00:23:08.391$  of different immune cytopenias.

NOTE Confidence: 0.8144564045

 $00:23:08.400 \longrightarrow 00:23:10.476$  So the investigators here wanted to

NOTE Confidence: 0.8144564045

 $00{:}23{:}10.476 \dashrightarrow 00{:}23{:}12.328$  identify whether they could isolate

NOTE Confidence: 0.8144564045

 $00:23:12.328 \longrightarrow 00:23:14.388$  risk factors that could potentially

NOTE Confidence: 0.8144564045

 $00:23:14.388 \longrightarrow 00:23:16.476$  predict response to splenectomy and

 $00:23:16.476 \longrightarrow 00:23:18.396$  adult patients with immune cytopenias.

NOTE Confidence: 0.8144564045

 $00:23:18.400 \longrightarrow 00:23:19.339$  On the right,

NOTE Confidence: 0.8144564045

00:23:19.339 --> 00:23:21.530 you see a schematic of total splenectomy

NOTE Confidence: 0.8144564045

 $00:23:21.595 \longrightarrow 00:23:23.407$  cases that they reviewed over the

NOTE Confidence: 0.8144564045

 $00:23:23.407 \longrightarrow 00:23:25.718$  course of 20 years from 2000 to 2020.

NOTE Confidence: 0.8144564045

00:23:25.720 --> 00:23:28.090 And here you had 1800 patients.

NOTE Confidence: 0.8144564045

 $00:23:28.090 \longrightarrow 00:23:29.987$  There was a bunch of patients excluded

NOTE Confidence: 0.8144564045

 $00:23:29.987 \longrightarrow 00:23:32.296$  as they were trying to hone in on

NOTE Confidence: 0.8144564045

 $00:23:32.296 \longrightarrow 00:23:33.444$  cytopenias and then ultimately

NOTE Confidence: 0.8144564045

 $00:23:33.444 \longrightarrow 00:23:34.749$  on immune cytopenias.

NOTE Confidence: 0.8144564045

00:23:34.750 --> 00:23:36.178 And at the very bottom I circled

NOTE Confidence: 0.8144564045

 $00:23:36.178 \longrightarrow 00:23:36.790$  for urine red.

NOTE Confidence: 0.8144564045

 $00{:}23{:}36.790 \dashrightarrow 00{:}23{:}38.872$  You can see what the diagnosis

NOTE Confidence: 0.8144564045

 $00:23:38.872 \longrightarrow 00:23:40.570$  were that they considered ITP,

NOTE Confidence: 0.8144564045

00:23:40.570 --> 00:23:41.968 autoimmune hemolytic anemia,

NOTE Confidence: 0.8144564045

 $00:23:41.968 \longrightarrow 00:23:44.298$  Evans syndrome and autoimmune neutropenia,

00:23:44.300 --> 00:23:46.244 neutropenia in general.

NOTE Confidence: 0.8144564045

00:23:46.244 --> 00:23:49.484 This was a retrospective study,

NOTE Confidence: 0.8144564045

 $00:23:49.490 \longrightarrow 00:23:52.508$  339 patients and the majority were

NOTE Confidence: 0.8144564045

 $00:23:52.508 \longrightarrow 00:23:55.160$  ITP and autoimmune hemolytic anemia.

NOTE Confidence: 0.8144564045

 $00{:}23{:}55.160 \dashrightarrow 00{:}23{:}57.316$  Their results are are a little bit

NOTE Confidence: 0.8144564045

 $00:23:57.316 \longrightarrow 00:23:59.221$  remarkable even for the fact that

NOTE Confidence: 0.8144564045

00:23:59.221 --> 00:24:01.069 this is retrospective study and here

NOTE Confidence: 0.8144564045

 $00:24:01.069 \longrightarrow 00:24:03.399$  you can see ITP autoimmune hemolytic

NOTE Confidence: 0.8144564045

 $00{:}24{:}03.399 \dashrightarrow 00{:}24{:}04.971$ anemia and autoimmune neutropenia

NOTE Confidence: 0.8144564045

00:24:04.971 --> 00:24:07.010 at the very least being presented

NOTE Confidence: 0.8144564045

 $00{:}24{:}07.010 \dashrightarrow 00{:}24{:}09.140$  and simple pie charts for having

NOTE Confidence: 0.8144564045

 $00{:}24{:}09.140 \dashrightarrow 00{:}24{:}11.285$  complete versus partial versus no

NOTE Confidence: 0.8144564045

 $00{:}24{:}11.285 \dashrightarrow 00{:}24{:}12.572$  responses to splenectomy.

NOTE Confidence: 0.8144564045

 $00:24:12.580 \longrightarrow 00:24:15.055$  And at the bottom you actually also see how

NOTE Confidence: 0.8144564045

 $00:24:15.055 \longrightarrow 00:24:17.340$  fast those responses occurred in weeks.

 $00:24:17.340 \longrightarrow 00:24:19.602$  The overall response for all patients

NOTE Confidence: 0.8144564045

 $00{:}24{:}19.602 \dashrightarrow 00{:}24{:}22.300$  with 74% complete response rate of

NOTE Confidence: 0.8144564045

 $00:24:22.300 \longrightarrow 00:24:25.299$  86 and a partial response of 14%.

NOTE Confidence: 0.8144564045

 $00:24:25.299 \longrightarrow 00:24:26.556$  In these patients,

NOTE Confidence: 0.8144564045

00:24:26.556 --> 00:24:29.070 but perhaps the bigger take home

NOTE Confidence: 0.8144564045

 $00:24:29.144 \longrightarrow 00:24:30.940$  point was the following.

NOTE Confidence: 0.8144564045

 $00:24:30.940 \longrightarrow 00:24:33.082$  And one out of five cases there

NOTE Confidence: 0.8144564045

00:24:33.082 --> 00:24:34.764 was a discordant diagnosis from

NOTE Confidence: 0.8144564045

 $00{:}24{:}34.764 \dashrightarrow 00{:}24{:}37.193$  pre to post operation on the left.

NOTE Confidence: 0.8144564045

 $00:24:37.200 \longrightarrow 00:24:38.904$  In the left column you see

NOTE Confidence: 0.8144564045

 $00:24:38.904 \longrightarrow 00:24:39.756$  the splenectomy indication.

NOTE Confidence: 0.8144564045

 $00:24:39.760 \longrightarrow 00:24:42.406$  In the middle you see what the

NOTE Confidence: 0.8144564045

 $00:24:42.406 \longrightarrow 00:24:43.540$  actual postoperative pathologic

NOTE Confidence: 0.8567871172

 $00:24:43.601 \longrightarrow 00:24:46.072$  diagnosis was and the frequency of this

NOTE Confidence: 0.8567871172

 $00:24:46.072 \longrightarrow 00:24:48.539$  occurring in total to be exactly was 19%.

NOTE Confidence: 0.8567871172

 $00{:}24{:}48.540 \dashrightarrow 00{:}24{:}50.934$  So 19% of patients were discordant

 $00:24:50.934 \longrightarrow 00:24:53.356$  from pre to post operative

NOTE Confidence: 0.8567871172

 $00:24:53.356 \longrightarrow 00:24:55.716$  diagnosis again in these 300.

NOTE Confidence: 0.8567871172

00:24:55.716 --> 00:24:57.332 Ask consecutively treated patients

NOTE Confidence: 0.8567871172

 $00:24:57.332 \longrightarrow 00:24:59.884$  over the course of 2000 to 2020

NOTE Confidence: 0.8567871172

 $00:24:59.884 \longrightarrow 00:25:02.070$  twenty years in the Cleveland Clinic.

NOTE Confidence: 0.8567871172

 $00:25:02.070 \longrightarrow 00:25:04.694$  And to wrap up with one final take

NOTE Confidence: 0.8567871172

 $00:25:04.694 \longrightarrow 00:25:07.252$  home is the investigators did try

NOTE Confidence: 0.8567871172

 $00:25:07.252 \longrightarrow 00:25:09.976$  to isolate the risk factors that

NOTE Confidence: 0.8567871172

 $00{:}25{:}10.056 \dashrightarrow 00{:}25{:}12.851$  could predict response versus not

NOTE Confidence: 0.8567871172

 $00:25:12.851 \longrightarrow 00:25:14.998$  predict response and these are being

NOTE Confidence: 0.8567871172

 $00{:}25{:}14.998 \dashrightarrow 00{:}25{:}16.540$  parsed out further as I understand

NOTE Confidence: 0.8567871172

 $00{:}25{:}16.591 \dashrightarrow 00{:}25{:}18.041$  in the actual manuscript that's

NOTE Confidence: 0.8567871172

 $00{:}25{:}18.041 \dashrightarrow 00{:}25{:}19.491$  being written up and probably

NOTE Confidence: 0.8567871172

 $00{:}25{:}19.546 \dashrightarrow 00{:}25{:}21.306$  published in the next 6 to 12 months.

NOTE Confidence: 0.8567871172

00:25:21.310 --> 00:25:23.389 But the big take home points here,

 $00:25:23.390 \longrightarrow 00:25:25.400$  most of these are crossing

NOTE Confidence: 0.8567871172

00:25:25.400 --> 00:25:27.410 your odds ratio of 1,

NOTE Confidence: 0.8567871172

 $00:25:27.410 \longrightarrow 00:25:30.476$  but you'll see that young age in particular

NOTE Confidence: 0.8567871172

 $00:25:30.476 \longrightarrow 00:25:32.660$  age less than 40 years seem to predict.

NOTE Confidence: 0.8567871172

 $00:25:32.660 \longrightarrow 00:25:34.495$  Their response to splenectomy as

NOTE Confidence: 0.8567871172

00:25:34.495 --> 00:25:37.197 well as primary ITP also seemed to

NOTE Confidence: 0.8567871172

 $00{:}25{:}37.197 \dashrightarrow 00{:}25{:}39.192$  predict for favorable response to

NOTE Confidence: 0.8567871172

00:25:39.192 --> 00:25:41.749 splenectomy on the converse side of it,

NOTE Confidence: 0.8567871172

 $00{:}25{:}41.750 {\:{\circ}{\circ}{\circ}}>00{:}25{:}43.950$  requiring multiple the rapies predicted

NOTE Confidence: 0.8567871172

 $00:25:43.950 \longrightarrow 00:25:46.700$  for poor response to splenectomy.

NOTE Confidence: 0.8567871172

 $00:25:46.700 \longrightarrow 00:25:47.645$  So take homes.

NOTE Confidence: 0.8567871172

 $00:25:47.645 \longrightarrow 00:25:49.220$  From the studies that splenectomy

NOTE Confidence: 0.8567871172

00:25:49.220 --> 00:25:50.780 remains a valuable option,

NOTE Confidence: 0.8567871172

 $00:25:50.780 \longrightarrow 00:25:52.930$  specifically in patients whose values

NOTE Confidence: 0.8567871172

 $00:25:52.930 \longrightarrow 00:25:55.080$  and preferences align with surgery.

NOTE Confidence: 0.8567871172

 $00{:}25{:}55.080 \dashrightarrow 00{:}25{:}58.116$  And there's a surprisingly high proportion,

 $00:25:58.120 \longrightarrow 00:26:02.150$  one out of five that had an added value of

NOTE Confidence: 0.8567871172

 $00{:}26{:}02.253 \dashrightarrow 00{:}26{:}06.135$  the diagnostic component in their course.

NOTE Confidence: 0.8567871172

 $00:26:06.135 \longrightarrow 00:26:08.235$  And so with that,

NOTE Confidence: 0.8567871172

00:26:08.240 --> 00:26:10.418 I want to say thank you and I'm going

NOTE Confidence: 0.8567871172

 $00{:}26{:}10.418 \dashrightarrow 00{:}26{:}12.728$  to transition over to Doctor Sharda.

NOTE Confidence: 0.89827398

00:26:19.660 --> 00:26:20.659 Thank you, George.

NOTE Confidence: 0.871566085714286

 $00:26:23.520 \longrightarrow 00:26:26.397$  I have nothing to disclose as well.

NOTE Confidence: 0.871566085714286

 $00{:}26{:}26.400 \dashrightarrow 00{:}26{:}30.096$  I will mostly be concentrating on

NOTE Confidence: 0.871566085714286

 $00:26:30.100 \longrightarrow 00:26:32.460$  some abstracts, interesting abstracts

NOTE Confidence: 0.871566085714286

 $00:26:32.460 \longrightarrow 00:26:36.000$  in the thrombosis realm and mostly

NOTE Confidence: 0.871566085714286

 $00:26:36.083 \longrightarrow 00:26:38.459$  cancer associated thrombosis.

NOTE Confidence: 0.871566085714286

 $00:26:38.460 \longrightarrow 00:26:41.292$  The first one is the the catheter three

NOTE Confidence: 0.871566085714286

 $00{:}26{:}41.292 \dashrightarrow 00{:}26{:}43.878$  study which was a prospective study of

NOTE Confidence: 0.871566085714286

 $00:26:43.880 \longrightarrow 00:26:46.690$  apixaban for central venous catheter,

NOTE Confidence: 0.871566085714286

 $00:26:46.690 \longrightarrow 00:26:48.709$  associated upper extremity,

00:26:48.709 --> 00:26:52.074 venous thromboembolism and cancer patients.

NOTE Confidence: 0.871566085714286

 $00{:}26{:}52.080 \to 00{:}26{:}55.383$  And this was, this comes from at

NOTE Confidence: 0.871566085714286

 $00:26:55.383 \longrightarrow 00:26:58.048$  least three senators in Canada.

NOTE Confidence: 0.871566085714286

 $00:26:58.050 \longrightarrow 00:27:01.809$  So this was a multi center

NOTE Confidence: 0.871566085714286

 $00:27:01.809 \longrightarrow 00:27:03.750$  prospective cohort study.

NOTE Confidence: 0.6957774275

00:27:06.730 --> 00:27:10.522 In patients with CVC associated upper

NOTE Confidence: 0.6957774275

 $00:27:10.522 \longrightarrow 00:27:14.509$  extremity DVT they were treated with.

NOTE Confidence: 0.6957774275

00:27:14.510 --> 00:27:16.892 On a low molecular weight heparin

NOTE Confidence: 0.6957774275

 $00{:}27{:}16.892 {\:{\circ}{\circ}{\circ}}>00{:}27{:}19.582$  daltepar in in their case for seven days

NOTE Confidence: 0.6957774275

 $00:27:19.582 \longrightarrow 00:27:22.402$  followed by a full dose of apixaban for

NOTE Confidence: 0.6957774275

 $00{:}27{:}22.402 \dashrightarrow 00{:}27{:}25.194$  11 weeks and and the patients were

NOTE Confidence: 0.6957774275

 $00:27:25.194 \longrightarrow 00:27:28.466$  followed for for at least 12 weeks.

NOTE Confidence: 0.6957774275

 $00{:}27{:}28.470 \dashrightarrow 00{:}27{:}31.356$  The inclusion criteria was all adults

NOTE Confidence: 0.6957774275

00:27:31.356 --> 00:27:33.873 with with active malignancy and

NOTE Confidence: 0.6957774275

 $00:27:33.873 \longrightarrow 00:27:36.463$  and clinically significant that is

NOTE Confidence: 0.6957774275

 $00:27:36.463 \longrightarrow 00:27:38.979$  symptomatic upper extremity DVT in

 $00:27:38.979 \longrightarrow 00:27:41.199$  association with the counter a CVC

NOTE Confidence: 0.6957774275

 $00:27:41.199 \longrightarrow 00:27:43.906$  and the main exclusion criteria were.

NOTE Confidence: 0.6957774275

00:27:43.906 --> 00:27:47.098 Patients with active bleeding or clip

NOTE Confidence: 0.6957774275

 $00:27:47.098 \longrightarrow 00:27:51.018$  bits less than 75 or a need for dual

NOTE Confidence: 0.6957774275

 $00:27:51.018 \longrightarrow 00:27:53.191$  antiplatelet therapy as well as most

NOTE Confidence: 0.6957774275

 $00:27:53.191 \longrightarrow 00:27:55.546$  of the patients with hematologic

NOTE Confidence: 0.6957774275

 $00:27:55.546 \longrightarrow 00:27:58.417$  malignancies or planned for stem cell

NOTE Confidence: 0.6957774275

 $00:27:58.417 \longrightarrow 00:28:01.135$  transplant as well as pulmonary embolism

NOTE Confidence: 0.6957774275

 $00:28:01.140 \longrightarrow 00:28:05.310$  with only with hemodynamic instability.

NOTE Confidence: 0.788521326666667

 $00{:}28{:}07.560 \dashrightarrow 00{:}28{:}10.986$  The primary outcome was catheter survival

NOTE Confidence: 0.788521326666667

 $00:28:10.986 \longrightarrow 00:28:14.299$  at three months and the secondary

NOTE Confidence: 0.788521326666667

 $00:28:14.299 \longrightarrow 00:28:17.497$  outcomes were any types of symptomatic

NOTE Confidence: 0.788521326666667

 $00{:}28{:}17.497 \dashrightarrow 00{:}28{:}20.272$  recurrent venous thromboembolism as

NOTE Confidence: 0.788521326666667

 $00{:}28{:}20.272 \dashrightarrow 00{:}28{:}22.876$  well as bleeding both major as well

NOTE Confidence: 0.788521326666667

 $00:28:22.876 \longrightarrow 00:28:24.958$  as clinically relevant non major

 $00:28:24.958 \longrightarrow 00:28:27.484$  bleeds and deaths from any causes.

NOTE Confidence: 0.788521326666667

 $00:28:27.490 \longrightarrow 00:28:33.458$  Umm, so here on the the

NOTE Confidence: 0.788521326666667

00:28:33.458 --> 00:28:35.066 patients demographics here,

NOTE Confidence: 0.788521326666667

 $00:28:35.070 \longrightarrow 00:28:37.968$  the 70 patients from 3 senators

NOTE Confidence: 0.788521326666667

 $00:28:37.970 \longrightarrow 00:28:40.370$  majority were female, about 60%.

NOTE Confidence: 0.788521326666667

 $00:28:40.370 \longrightarrow 00:28:41.759$  Median age 62.

NOTE Confidence: 0.842329573

 $00{:}28{:}43.790 \dashrightarrow 00{:}28{:}46.022$  The diagnostic modality used

NOTE Confidence: 0.842329573

 $00:28:46.022 \longrightarrow 00:28:48.812$  in most patients were Doppler

NOTE Confidence: 0.842329573

 $00{:}28{:}48.812 \longrightarrow 00{:}28{:}50.650$  ultrasounds and as you can see

NOTE Confidence: 0.842329573

 $00:28:50.650 \longrightarrow 00:28:51.674$  these are symptomatic events.

NOTE Confidence: 0.842329573

 $00:28:51.680 \longrightarrow 00:28:54.866$  So almost 75% of the patients

NOTE Confidence: 0.842329573

 $00:28:54.866 \longrightarrow 00:28:56.990$  actually have proximal upper

NOTE Confidence: 0.842329573

00:28:57.085 --> 00:28:59.833 extremity DVT involving subclavian,

NOTE Confidence: 0.842329573

 $00:28:59.833 \longrightarrow 00:29:02.397$  at least subclavian veins.

NOTE Confidence: 0.896160464444444

00:29:04.590 --> 00:29:06.230 And this is perhaps slightly

NOTE Confidence: 0.896160464444444

00:29:06.230 --> 00:29:07.542 different from our practice,

 $00:29:07.550 \longrightarrow 00:29:09.206$  so about 80% of the patients.

NOTE Confidence: 0.896160464444444

 $00:29:09.210 \longrightarrow 00:29:12.330$  So these were mostly outpatient.

NOTE Confidence: 0.896160464444444

00:29:12.330 --> 00:29:14.120 The patients being treated outpatients

NOTE Confidence: 0.896160464444444

 $00:29:14.120 \longrightarrow 00:29:17.420$  and and about 80% of them had picks

NOTE Confidence: 0.896160464444444

 $00:29:17.420 \longrightarrow 00:29:20.096$  and only 20% had portacaths and as

NOTE Confidence: 0.896160464444444

 $00:29:20.096 \longrightarrow 00:29:22.779$  you can see the type of cancer about

NOTE Confidence: 0.896160464444444

 $00:29:22.779 \longrightarrow 00:29:25.555$  a third were breast and a third were

NOTE Confidence: 0.896160464444444

 $00{:}29{:}25.635 \dashrightarrow 00{:}29{:}28.185$  colon and the remaining were others.

NOTE Confidence: 0.896160464444444

00:29:28.190 --> 00:29:30.068 So coming to the primary outcome,

NOTE Confidence: 0.896160464444444

 $00:29:30.070 \longrightarrow 00:29:34.036$  so catheter survival so adds 12 weeks,

NOTE Confidence: 0.896160464444444

 $00:29:34.036 \longrightarrow 00:29:39.332$  40 patients had so which is about 5760%

NOTE Confidence: 0.896160464444444

 $00:29:39.332 \longrightarrow 00:29:44.504$  had catheter still present and functioning.

NOTE Confidence: 0.896160464444444

 $00{:}29{:}44.510 \dashrightarrow 00{:}29{:}48.731$  But if you can see the reason for removal

NOTE Confidence: 0.896160464444444

 $00:29:48.731 \longrightarrow 00:29:51.590$  actually most of the patients who had

NOTE Confidence: 0.896160464444444

 $00:29:51.590 \longrightarrow 00:29:54.886$  it removed was because of end of the

 $00:29:54.886 \longrightarrow 00:29:57.190$  therapeutic need which is about 20.

NOTE Confidence: 0.896160464444444

 $00{:}29{:}57.190 \dashrightarrow 00{:}30{:}00.006$  One patients or 30% and then a minor

NOTE Confidence: 0.896160464444444

00:30:00.006 --> 00:30:01.922 proportion of the patients with

NOTE Confidence: 0.896160464444444

 $00:30:01.922 \longrightarrow 00:30:04.582$  with other reasons which is you know

NOTE Confidence: 0.896160464444444

00:30:04.655 --> 00:30:07.103 infection or two patients died and

NOTE Confidence: 0.896160464444444

 $00:30:07.103 \longrightarrow 00:30:11.419$  there were no recurrent events and so.

NOTE Confidence: 0.896160464444444

 $00:30:11.420 \longrightarrow 00:30:14.138$  If you consider.

NOTE Confidence: 0.896160464444444

 $00:30:14.140 \longrightarrow 00:30:16.268$  Or exclude the end of the apeutic needs.

NOTE Confidence: 0.896160464444444

 $00{:}30{:}16.270 \dashrightarrow 00{:}30{:}18.140$  The the catheter survival was

NOTE Confidence: 0.896160464444444

 $00:30:18.140 \longrightarrow 00:30:21.798$  almost 100% with the pixman therapy.

NOTE Confidence: 0.896160464444444

 $00{:}30{:}21.800 \dashrightarrow 00{:}30{:}24.278$  The safety outcomes only one patient

NOTE Confidence: 0.896160464444444

00:30:24.278 --> 00:30:27.258 had a recurrent DVT and the same arm,

NOTE Confidence: 0.896160464444444

 $00:30:27.260 \longrightarrow 00:30:30.100$  and even in this patient the the line

NOTE Confidence: 0.896160464444444

 $00:30:30.100 \longrightarrow 00:30:33.176$  was not removed and was a functional.

NOTE Confidence: 0.896160464444444

 $00:30:33.180 \longrightarrow 00:30:35.908$  There were twelve bleeds,

NOTE Confidence: 0.896160464444444

 $00:30:35.908 \longrightarrow 00:30:40.136$  six major and six minor bleeds

00:30:40.136 --> 00:30:43.313 and most happened within the first

NOTE Confidence: 0.896160464444444

 $00:30:43.313 \longrightarrow 00:30:44.868$  two months of of treatment.

NOTE Confidence: 0.896160464444444

00:30:44.870 --> 00:30:46.725 There were two deaths and they were

NOTE Confidence: 0.896160464444444

 $00:30:46.725 \longrightarrow 00:30:51.160$  both delayed and and cancer related.

NOTE Confidence: 0.896160464444444

 $00:30:51.160 \longrightarrow 00:30:54.730$  So limitations of course it's a single

NOTE Confidence: 0.896160464444444

00:30:54.730 --> 00:30:57.814 arm and most of the patients were

NOTE Confidence: 0.896160464444444

 $00:30:57.814 \longrightarrow 00:31:00.663$  outpatients and so perhaps not as ill

NOTE Confidence: 0.896160464444444

 $00{:}31{:}00.663 \dashrightarrow 00{:}31{:}03.127$  and with the limited follow but but

NOTE Confidence: 0.896160464444444

00:31:03.209 --> 00:31:05.905 I I guess for our our practice many

NOTE Confidence: 0.896160464444444

 $00:31:05.905 \longrightarrow 00:31:08.760$  of these or most of these patients

NOTE Confidence: 0.8961604644444444

00:31:08.760 --> 00:31:10.940 actually had picks our patient

NOTE Confidence: 0.896160464444444

 $00:31:11.021 \longrightarrow 00:31:13.277$  as compared to a Porter cats.

NOTE Confidence: 0.896160464444444

 $00{:}31{:}13.280 \dashrightarrow 00{:}31{:}15.830$  So the conclusions were that the

NOTE Confidence: 0.8961604644444444

 $00:31:15.830 \longrightarrow 00:31:18.198$  pixabaj should promise in treating

NOTE Confidence: 0.896160464444444

 $00:31:18.198 \longrightarrow 00:31:20.546$  central venous catheter associated

 $00:31:20.546 \longrightarrow 00:31:22.307$  upper extremity DVT.

NOTE Confidence: 0.896160464444444

 $00:31:22.310 \longrightarrow 00:31:24.605$  And the observed bleeding rates

NOTE Confidence: 0.896160464444444

 $00:31:24.605 \longrightarrow 00:31:26.900$  were lower than as previously

NOTE Confidence: 0.896160464444444

 $00:31:26.900 \longrightarrow 00:31:30.020$  described with rivaroxaban.

NOTE Confidence: 0.896160464444444

 $00:31:30.020 \longrightarrow 00:31:34.835$  And so here are the the other two studies.

NOTE Confidence: 0.896160464444444

 $00:31:34.840 \longrightarrow 00:31:36.178$  Done previously by the same group.

NOTE Confidence: 0.896160464444444

 $00:31:36.180 \longrightarrow 00:31:38.714$  So the first one was the catheter

NOTE Confidence: 0.896160464444444

 $00:31:38.714 \longrightarrow 00:31:40.572$  study which was low molecular

NOTE Confidence: 0.896160464444444

00:31:40.572 --> 00:31:42.565 weight heparin followed by widening

NOTE Confidence: 0.896160464444444

 $00:31:42.565 \longrightarrow 00:31:45.055$  the antagonist and then the more

NOTE Confidence: 0.896160464444444

 $00{:}31{:}45.055 \dashrightarrow 00{:}31{:}47.739$  recent one was a catheter 2 which

NOTE Confidence: 0.896160464444444

 $00:31:47.739 \longrightarrow 00:31:49.990$  was River rockband without a lead

NOTE Confidence: 0.896160464444444

 $00:31:49.990 \longrightarrow 00:31:52.114$  in with the loonie weight heparin.

NOTE Confidence: 0.8961604644444444

 $00:31:52.120 \longrightarrow 00:31:54.080$  And here as you can see there are

NOTE Confidence: 0.896160464444444

 $00:31:54.080 \longrightarrow 00:31:56.521$  a lot more bleeds and then the

NOTE Confidence: 0.896160464444444

 $00:31:56.521 \longrightarrow 00:31:58.248$  the current bonus the dalteparin

00:31:58.248 --> 00:32:00.884 followed by Pixar ban with perhaps

NOTE Confidence: 0.896160464444444

 $00:32:00.884 \longrightarrow 00:32:02.420$  with less Pittsburgh.

NOTE Confidence: 0.896160464444444

 $00:32:02.420 \longrightarrow 00:32:04.922$  I think the most important point is that in.

NOTE Confidence: 0.896160464444444

 $00:32:04.930 \longrightarrow 00:32:07.210$  In most of these patients,

NOTE Confidence: 0.896160464444444

 $00:32:07.210 \dashrightarrow 00:32:10.058$  despite proximal and symptomatic

NOTE Confidence: 0.896160464444444

00:32:10.058 --> 00:32:14.330 upper extremity DVT's are the lines

NOTE Confidence: 0.896160464444444

 $00:32:14.436 \longrightarrow 00:32:17.784$  were not removed and and were not

NOTE Confidence: 0.896160464444444

 $00{:}32{:}17.784 \dashrightarrow 00{:}32{:}19.874$  associated with infusion failure and

NOTE Confidence: 0.896160464444444

 $00:32:19.874 \longrightarrow 00:32:22.486$  and the lines were were able

NOTE Confidence: 0.896160464444444

 $00{:}32{:}22.486 \dashrightarrow 00{:}32{:}27.260$  to be saved with anticoagulation.

NOTE Confidence: 0.8961604644444444

 $00:32:27.260 \longrightarrow 00:32:30.426$  So coming to the second one which

NOTE Confidence: 0.896160464444444

 $00:32:30.426 \longrightarrow 00:32:32.610$  is abstract #519 and

NOTE Confidence: 0.839978205185185

 $00{:}32{:}34.800 \dashrightarrow 00{:}32{:}36.781$  the title of the abstract is only

NOTE Confidence: 0.839978205185185

 $00{:}32{:}36.781 \dashrightarrow 00{:}32{:}38.963$  dynamics of C reactive protein to

NOTE Confidence: 0.839978205185185

 $00:32:38.963 \longrightarrow 00:32:41.073$  predict risk of venous thromboembolism

00:32:41.073 --> 00:32:43.376 in patients with cancer treated

NOTE Confidence: 0.839978205185185

 $00:32:43.376 \longrightarrow 00:32:45.236$  with immune checkpoint inhibitors.

NOTE Confidence: 0.839978205185185

00:32:45.240 --> 00:32:49.305 And this comes from Austria, Vienna,

NOTE Confidence: 0.839978205185185

 $00:32:49.305 \longrightarrow 00:32:54.480$  Austria. So just to be quick,

NOTE Confidence: 0.839978205185185

 $00:32:54.480 \longrightarrow 00:32:57.260$  because I'm an embolism.

NOTE Confidence: 0.839978205185185

 $00:32:57.260 \longrightarrow 00:33:00.711$  Is being recognized as a major complication

NOTE Confidence: 0.839978205185185

 $00:33:00.711 \longrightarrow 00:33:03.660$  of immune checkpoint inhibitor therapy.

NOTE Confidence: 0.839978205185185

 $00:33:03.660 \longrightarrow 00:33:05.760$  The rates have been described as

NOTE Confidence: 0.839978205185185

 $00:33:05.760 \longrightarrow 00:33:09.050$  high as 25% but the prothrombin

NOTE Confidence: 0.839978205185185

 $00:33:09.050 \longrightarrow 00:33:11.640$  prothrombotic effect is the these

NOTE Confidence: 0.839978205185185

 $00{:}33{:}11.730 \dashrightarrow 00{:}33{:}13.634$  immune checkpoint inhibitors as

NOTE Confidence: 0.839978205185185

 $00:33:13.634 \longrightarrow 00:33:17.667$  well as the the risk factors are

NOTE Confidence: 0.839978205185185

00:33:17.667 --> 00:33:20.397 unclear because the risk factors,

NOTE Confidence: 0.839978205185185

 $00:33:20.400 \longrightarrow 00:33:22.230$  the traditional risk factors and the

NOTE Confidence: 0.839978205185185

00:33:22.230 --> 00:33:24.380 scoring system such as the KORANA score,

NOTE Confidence: 0.839978205185185

 $00:33:24.380 \longrightarrow 00:33:27.230$  they do not function as well.

 $00:33:27.230 \longrightarrow 00:33:31.058$  In the setting of checkpoint inhibitors.

NOTE Confidence: 0.839978205185185

 $00:33:31.060 \longrightarrow 00:33:33.348$  So basically the goal of the study was

NOTE Confidence: 0.839978205185185

 $00:33:33.348 \longrightarrow 00:33:35.403$  to explore early dynamics of systemic

NOTE Confidence: 0.839978205185185

 $00:33:35.403 \longrightarrow 00:33:38.031$  CRP levels after initiation of the immune

NOTE Confidence: 0.839978205185185

 $00:33:38.031 \longrightarrow 00:33:40.191$  checkpoint habits for prediction of

NOTE Confidence: 0.839978205185185

 $00:33:40.191 \longrightarrow 00:33:43.770$  venous thromboembolism in these patients.

NOTE Confidence: 0.839978205185185

00:33:43.770 --> 00:33:46.518 And why CRP?

NOTE Confidence: 0.839978205185185

 $00{:}33{:}46.518 \dashrightarrow 00{:}33{:}50.984$  Because CRP has been shown to be a

NOTE Confidence: 0.839978205185185

 $00{:}33{:}50.984 \dashrightarrow 00{:}33{:}53.801$  predictor of poorer outcome or higher

NOTE Confidence: 0.839978205185185

 $00{:}33{:}53.801 \dashrightarrow 00{:}33{:}58.130$  designed CRP as well as a CRP response.

NOTE Confidence: 0.839978205185185

 $00:33:58.130 \longrightarrow 00:34:00.686$  CRP Flair has been associated with

NOTE Confidence: 0.839978205185185

 $00:34:00.686 \longrightarrow 00:34:03.140$  poor outcomes in these patients.

NOTE Confidence: 0.839978205185185

 $00{:}34{:}03.140 \dashrightarrow 00{:}34{:}06.710$  And and it's well recognized that the

NOTE Confidence: 0.839978205185185

 $00:34:06.710 \longrightarrow 00:34:08.886$  developer systemic antitumoral immune

NOTE Confidence: 0.839978205185185

 $00:34:08.886 \longrightarrow 00:34:11.554$  response associated with a major

 $00:34:11.554 \longrightarrow 00:34:14.184$  inflammatory response in which CRP

NOTE Confidence: 0.839978205185185

 $00:34:14.184 \longrightarrow 00:34:17.504$  has been shown to be a major marker.

NOTE Confidence: 0.839978205185185

 $00:34:17.510 \longrightarrow 00:34:21.094$  Umm. So the methods.

NOTE Confidence: 0.839978205185185

 $00:34:21.094 \longrightarrow 00:34:23.602$  So this was a retrospective cohort

NOTE Confidence: 0.839978205185185

 $00:34:23.602 \longrightarrow 00:34:26.214$  study of about 405 patients.

NOTE Confidence: 0.839978205185185

00:34:26.214 --> 00:34:29.999 These were patients with cancer

NOTE Confidence: 0.839978205185185

 $00:34:29.999 \longrightarrow 00:34:34.708$  treated in in Med UNI Vienna.

NOTE Confidence: 0.839978205185185

 $00:34:34.710 \longrightarrow 00:34:37.070$  The.

NOTE Confidence: 0.839978205185185

 $00:34:37.070 \longrightarrow 00:34:39.331$  The follow-up was at least for the

NOTE Confidence: 0.839978205185185

00:34:39.331 --> 00:34:41.752 duration of IC ICI therapy until

NOTE Confidence: 0.839978205185185

 $00{:}34{:}41.752 \longrightarrow 00{:}34{:}43.688$  subsequent anti cancer the rapy

NOTE Confidence: 0.839978205185185

 $00:34:43.688 \longrightarrow 00:34:46.795$  death or a maximum of three months

NOTE Confidence: 0.839978205185185

 $00:34:46.795 \longrightarrow 00:34:49.808$  of the last cycle of the immune

NOTE Confidence: 0.839978205185185

 $00:34:49.808 \longrightarrow 00:34:52.068$  checkpoint inhibitor therapy and

NOTE Confidence: 0.839978205185185

 $00:34:52.068 \longrightarrow 00:34:57.260$  and the endpoints were DTE.

NOTE Confidence: 0.839978205185185

 $00:34:57.260 \longrightarrow 00:34:59.654$  That were mostly pulmonary embolism and DVT,

00:34:59.660 --> 00:35:02.180 but also recorded for splanchnic,

NOTE Confidence: 0.839978205185185

 $00:35:02.180 \longrightarrow 00:35:03.592$  venous thrombosis,

NOTE Confidence: 0.839978205185185

 $00{:}35{:}03.592 \dashrightarrow 00{:}35{:}05.710$  catheter related thrombosis

NOTE Confidence: 0.839978205185185

 $00:35:05.710 \longrightarrow 00:35:08.534$  and other other events.

NOTE Confidence: 0.839978205185185

 $00:35:08.540 \longrightarrow 00:35:10.646$  In terms of the CRP dynamics,

NOTE Confidence: 0.839978205185185

 $00:35:10.650 \longrightarrow 00:35:14.208$  the CRP was measured at baseline

NOTE Confidence: 0.839978205185185

 $00:35:14.210 \longrightarrow 00:35:15.866$  that is within the four weeks,

NOTE Confidence: 0.839978205185185

 $00:35:15.870 \longrightarrow 00:35:18.035$  within four weeks prior to

NOTE Confidence: 0.839978205185185

 $00:35:18.035 \longrightarrow 00:35:20.748$  institution of this therapy and then

NOTE Confidence: 0.839978205185185

 $00:35:20.748 \longrightarrow 00:35:22.628$  it was longitudinally monitored

NOTE Confidence: 0.839978205185185

 $00:35:22.628 \longrightarrow 00:35:25.508$  for the first three months after

NOTE Confidence: 0.839978205185185

00:35:25.508 --> 00:35:27.748 the initiation of the therapy.

NOTE Confidence: 0.839978205185185

 $00{:}35{:}27.750 \dashrightarrow 00{:}35{:}30.487$  And for the purpose of this study

NOTE Confidence: 0.839978205185185

 $00{:}35{:}30.487 \dashrightarrow 00{:}35{:}33.122$  this the the CRP dynamics were

NOTE Confidence: 0.839978205185185

00:35:33.122 --> 00:35:35.876 defined either as CRP flare which

 $00:35:35.876 \longrightarrow 00:35:38.912$  is increase in the CRP by by.

NOTE Confidence: 0.839978205185185

 $00:35:38.912 \longrightarrow 00:35:42.780$  At least 2.5 fold over the baseline

NOTE Confidence: 0.839978205185185

 $00:35:42.780 \longrightarrow 00:35:46.350$  or a CRP response which was 50%

NOTE Confidence: 0.839978205185185

 $00:35:46.350 \longrightarrow 00:35:50.400$  relative decrease from the baseline.

NOTE Confidence: 0.839978205185185

 $00:35:50.400 \longrightarrow 00:35:52.830$  Um.

NOTE Confidence: 0.839978205185185

 $00:35:52.830 \longrightarrow 00:35:56.526$  So the most important in terms of the

NOTE Confidence: 0.839978205185185

 $00:35:56.526 \longrightarrow 00:35:59.043$  cohort demographics is that most of

NOTE Confidence: 0.839978205185185

 $00:35:59.043 \longrightarrow 00:36:04.400$  the patients were staged for malignancies.

NOTE Confidence: 0.839978205185185

 $00{:}36{:}04.400 \dashrightarrow 00{:}36{:}06.638$  Of of a variety of types,

NOTE Confidence: 0.839978205185185

 $00:36:06.640 \longrightarrow 00:36:09.590$  mostly therapies where are cancers

NOTE Confidence: 0.839978205185185

 $00:36:09.590 \longrightarrow 00:36:14.035$  known to be known to respond to to

NOTE Confidence: 0.839978205185185

 $00:36:14.035 \longrightarrow 00:36:16.612$  immune checkpoint inhibitors and then

NOTE Confidence: 0.839978205185185

 $00:36:16.612 \longrightarrow 00:36:20.480$  many of the patients had received or

NOTE Confidence: 0.839978205185185

 $00:36:20.480 \longrightarrow 00:36:23.680$  seen multiple lines of therapies.

NOTE Confidence: 0.839978205185185

 $00:36:23.680 \longrightarrow 00:36:26.720$  The the median follow up for the

NOTE Confidence: 0.839978205185185

 $00:36:26.720 \longrightarrow 00:36:28.780$  study for was about 8.5 months.

 $00:36:31.280 \longrightarrow 00:36:35.918$  Umm, so, so defining CRP flare.

NOTE Confidence: 0.524805423333333

 $00:36:35.920 \longrightarrow 00:36:39.760$  So among the 405 patients,

NOTE Confidence: 0.524805423333333

 $00:36:39.760 \longrightarrow 00:36:41.310$  70% had a CRP flare,

NOTE Confidence: 0.524805423333333

00:36:41.310 --> 00:36:45.441 which is again a rise in CRP of greater

NOTE Confidence: 0.524805423333333

 $00:36:45.441 \longrightarrow 00:36:48.927$  than 2.5 folds over the baseline.

NOTE Confidence: 0.524805423333333

 $00:36:48.930 \longrightarrow 00:36:55.170$  And then there, so let me so in

NOTE Confidence: 0.524805423333333

 $00:36:55.170 \longrightarrow 00:36:58.434$  terms of the different a definition,

NOTE Confidence: 0.524805423333333

 $00:36:58.434 \longrightarrow 00:37:02.500$  so basically some 78 to 80% had the

NOTE Confidence: 0.524805423333333

 $00:37:02.500 \longrightarrow 00:37:06.346$  CRP flare and then about a third had

NOTE Confidence: 0.524805423333333

 $00:37:06.346 \longrightarrow 00:37:10.662$  CRP response which is drop in CRP.

NOTE Confidence: 0.524805423333333

00:37:10.662 --> 00:37:17.010 Either after a flare or in about um.

NOTE Confidence: 0.524805423333333

 $00:37:17.010 \longrightarrow 00:37:19.446$  14% of the patients without a flare

NOTE Confidence: 0.524805423333333

 $00{:}37{:}19.446 \dashrightarrow 00{:}37{:}22.694$  to to less than 50% of the baseline

NOTE Confidence: 0.524805423333333

 $00:37:22.694 \longrightarrow 00:37:26.350$  and then about 1/3 of the patients

NOTE Confidence: 0.524805423333333

00:37:26.350 --> 00:37:28.408 did not or were non responders which,

 $00:37:28.410 \longrightarrow 00:37:30.542$  which is their CRP,

NOTE Confidence: 0.524805423333333

 $00:37:30.542 \longrightarrow 00:37:33.780$  did not reduce to 50% of the baseline.

NOTE Confidence: 0.783852911428572

 $00:37:36.550 \longrightarrow 00:37:40.806$  And then based on the CRP dynamics,

NOTE Confidence: 0.783852911428572

 $00:37:40.810 \longrightarrow 00:37:44.410$  the the authors found that the risk

NOTE Confidence: 0.783852911428572

00:37:44.410 --> 00:37:48.200 of DVT E the cumulative risk of DVT

NOTE Confidence: 0.783852911428572

 $00{:}37{:}48.200 \dashrightarrow 00{:}37{:}53.408$  was about 3.5 fold in in patients who

NOTE Confidence: 0.783852911428572

 $00:37:53.408 \longrightarrow 00:37:59.588$  had a CRP flare irrespective of of.

NOTE Confidence: 0.783852911428572

 $00:37:59.590 \longrightarrow 00:38:01.478$  A response or not?

NOTE Confidence: 0.801023083181818

 $00:38:03.730 \longrightarrow 00:38:04.600$  More importantly,

NOTE Confidence: 0.801023083181818

 $00:38:04.600 \longrightarrow 00:38:08.080$  they also found that the risk of

NOTE Confidence: 0.801023083181818

 $00{:}38{:}08.164 \dashrightarrow 00{:}38{:}11.158$  DVT was associated with an increase

NOTE Confidence: 0.801023083181818

 $00:38:11.158 \longrightarrow 00:38:14.050$  mortality according to the CRP flare.

NOTE Confidence: 0.801023083181818

 $00:38:14.050 \dashrightarrow 00:38:17.370$  So the hazard ratio for death after VE

NOTE Confidence: 0.801023083181818

 $00:38:17.370 \longrightarrow 00:38:20.457$  Justed for cancer type was about 3.5

NOTE Confidence: 0.801023083181818

00:38:20.457 --> 00:38:23.166 fold in patients with CRV CRV flare

NOTE Confidence: 0.801023083181818

 $00{:}38{:}23.166 \dashrightarrow 00{:}38{:}26.038$  and then adjusted for the stage of

 $00:38:26.038 \longrightarrow 00:38:32.450$  the cancer was 3.21 fold again. Um.

NOTE Confidence: 0.720324951428571

 $00{:}38{:}34.910 \dashrightarrow 00{:}38{:}37.115$  In patients with with their CRP flare.

NOTE Confidence: 0.82518405

 $00:38:39.760 \longrightarrow 00:38:44.448$  So the conclusions were that's the early

NOTE Confidence: 0.82518405

 $00:38:44.448 \longrightarrow 00:38:47.309$  dynamics of systemic CRP levels are

NOTE Confidence: 0.82518405

 $00:38:47.309 \longrightarrow 00:38:50.333$  associated with the risk of VTE during

NOTE Confidence: 0.82518405

 $00:38:50.333 \longrightarrow 00:38:52.699$  immune checkpoint inhibitor therapy and

NOTE Confidence: 0.82518405

00:38:52.699 --> 00:38:56.014 the highest risk of DVT was observed

NOTE Confidence: 0.82518405

 $00{:}38{:}56.014 \dashrightarrow 00{:}38{:}59.767$  in patients with early CRP flare after

NOTE Confidence: 0.82518405

 $00:38:59.767 \longrightarrow 00:39:03.596$  ICI initiation and then the lowest risk

NOTE Confidence: 0.82518405

 $00:39:03.596 \longrightarrow 00:39:07.740$  was in patients where the CRP drop.

NOTE Confidence: 0.82518405

 $00:39:07.740 \dashrightarrow 00:39:10.435$  Dropped below 50% with no prior flare,

NOTE Confidence: 0.82518405

 $00:39:10.440 \longrightarrow 00:39:13.618$  but this was a very small proportion

NOTE Confidence: 0.82518405

00:39:13.618 --> 00:39:15.908 of patients about 12 to 14%.

NOTE Confidence: 0.82518405

00:39:15.910 --> 00:39:18.774 And then they also found a potential risk,

NOTE Confidence: 0.82518405

 $00:39:18.780 \longrightarrow 00:39:22.104$  a link between immune checkpoint inhibitor

 $00:39:22.104 \longrightarrow 00:39:24.320$  induced systemic inflammatory response

NOTE Confidence: 0.82518405

 $00{:}39{:}24.393 \dashrightarrow 00{:}39{:}27.635$  and risk of CTE in in addition to an

NOTE Confidence: 0.82518405

 $00{:}39{:}27.635 \dashrightarrow 00{:}39{:}30.387$  independent association of of Vt with

NOTE Confidence: 0.82518405

00:39:30.387 --> 00:39:33.955 mortality in patients who have a CRP flair.

NOTE Confidence: 0.82518405

 $00:39:33.960 \longrightarrow 00:39:35.766$  So I think with this I'll end.

NOTE Confidence: 0.891980224

 $00:39:43.910 \longrightarrow 00:39:44.768$  Well, that's great.

NOTE Confidence: 0.891980224

 $00:39:44.768 \longrightarrow 00:39:46.198$  Thank you all for those

NOTE Confidence: 0.891980224

 $00:39:46.198 \longrightarrow 00:39:46.770$  great presentations.

NOTE Confidence: 0.891980224

 $00:39:46.770 \longrightarrow 00:39:48.706$  So thanks so much.

NOTE Confidence: 0.891980224

 $00:39:48.706 \longrightarrow 00:39:51.126$  I if people have questions,

NOTE Confidence: 0.891980224

00:39:51.130 --> 00:39:53.244 please put them in the Q&A or

NOTE Confidence: 0.891980224

 $00:39:53.244 \longrightarrow 00:39:55.355$  the chat and while we're waiting

NOTE Confidence: 0.891980224

 $00:39:55.355 \longrightarrow 00:39:57.605$  for them to come in perhaps

NOTE Confidence: 0.891980224

 $00:39:57.605 \longrightarrow 00:39:59.708$  some I can start with a few.

NOTE Confidence: 0.867096442857143

00:40:02.110 --> 00:40:03.958 If Doctor Van Doren is still on,

NOTE Confidence: 0.867096442857143

 $00{:}40{:}03.960 \dashrightarrow 00{:}40{:}04.842$  and I know she might have

 $00{:}40{:}04.842 --> 00{:}40{:}05.730$  had to go into clinic,

NOTE Confidence: 0.867096442857143

 $00:40:05.730 \longrightarrow 00:40:07.470$  looks like she did step off.

NOTE Confidence: 0.867096442857143

00:40:07.470 --> 00:40:11.043 So George, I I have a question for you.

NOTE Confidence: 0.867096442857143

00:40:11.050 --> 00:40:15.298 In the study with Subtitle MIB

NOTE Confidence: 0.867096442857143

 $00:40:15.298 \longrightarrow 00:40:17.348$  and cold agglutinin disease,

NOTE Confidence: 0.867096442857143

 $00:40:17.348 \longrightarrow 00:40:20.470$  you noted that there was an increase

NOTE Confidence: 0.867096442857143

 $00:40:20.470 \longrightarrow 00:40:22.738$  in patient reported outcomes.

NOTE Confidence: 0.867096442857143

 $00{:}40{:}22.738 \operatorname{{--}{>}} 00{:}40{:}25.432$  Quality of life improved despite

NOTE Confidence: 0.867096442857143

 $00:40:25.432 \longrightarrow 00:40:27.542$  the fact that these individuals

NOTE Confidence: 0.867096442857143

 $00{:}40{:}27.542 \to 00{:}40{:}30.210$  did not require blood transfusions.

NOTE Confidence: 0.867096442857143

00:40:30.210 --> 00:40:31.968 Could you postulate on why they

NOTE Confidence: 0.867096442857143

 $00:40:31.968 \longrightarrow 00:40:33.920$  may have had this improvement?

NOTE Confidence: 0.867096442857143

 $00{:}40{:}33.920 \dashrightarrow 00{:}40{:}36.202$  In the way they felt without having

NOTE Confidence: 0.867096442857143

 $00:40:36.202 \longrightarrow 00:40:38.529$  a need for blood transfusion.

NOTE Confidence: 0.803603747142857

 $00:40:39.210 \longrightarrow 00:40:42.017$  Thank you, Bob. Such a great question.

 $00:40:42.020 \longrightarrow 00:40:44.150$  There's a thud in the

NOTE Confidence: 0.803603747142857

00:40:44.150 --> 00:40:45.854 hemolytic community in general,

NOTE Confidence: 0.803603747142857

 $00:40:45.860 \longrightarrow 00:40:47.904$  both in autoimmune hemolytic anemia and PNH

NOTE Confidence: 0.803603747142857

 $00:40:47.904 \longrightarrow 00:40:49.900$  and other disorders where we see hemolysis,

NOTE Confidence: 0.803603747142857

 $00:40:49.900 \longrightarrow 00:40:52.932$  that quality of life is affected by the

NOTE Confidence: 0.803603747142857

 $00:40:52.932 \longrightarrow 00:40:55.117$  hemolysis independent of hemoglobin as well,

NOTE Confidence: 0.803603747142857

 $00:40:55.120 \longrightarrow 00:40:57.868$  in addition to hemoglobin drops and

NOTE Confidence: 0.803603747142857

00:40:57.868 --> 00:40:59.700 low hemoglobin hemoglobin levels.

NOTE Confidence: 0.803603747142857

 $00{:}40{:}59.700 \dashrightarrow 00{:}41{:}01.710$  The idea being that in

NOTE Confidence: 0.803603747142857

 $00:41:01.710 \longrightarrow 00:41:02.856$  a chronically hemolytic,

NOTE Confidence: 0.803603747142857

00:41:02.856 --> 00:41:04.536 in a chronic hemolytic stage,

NOTE Confidence: 0.803603747142857

 $00:41:04.540 \longrightarrow 00:41:05.995$  you have an underlying degree

NOTE Confidence: 0.803603747142857

 $00:41:05.995 \longrightarrow 00:41:06.577$  of inflammation.

NOTE Confidence: 0.803603747142857

 $00:41:06.580 \longrightarrow 00:41:08.506$  At least that's the theory that's

NOTE Confidence: 0.803603747142857

00:41:08.506 --> 00:41:09.790 being posited that's contributing

NOTE Confidence: 0.803603747142857

 $00:41:09.840 \longrightarrow 00:41:11.035$  perhaps to this fatigue and

 $00:41:11.035 \longrightarrow 00:41:12.620$  the idea being that if we can.

NOTE Confidence: 0.803603747142857

 $00:41:12.620 \longrightarrow 00:41:15.735$  Shut down the hemolysis or maybe let's

NOTE Confidence: 0.803603747142857

00:41:15.735 --> 00:41:19.550 say decrease it with ages like symbolab,

NOTE Confidence: 0.803603747142857

00:41:19.550 --> 00:41:23.166 the monoclonal C1S antibody for cold

NOTE Confidence: 0.803603747142857

 $00{:}41{:}23.166 \dashrightarrow 00{:}41{:}26.134$  agglutinin disease or anti C3 and C5

NOTE Confidence: 0.803603747142857

 $00:41:26.134 \longrightarrow 00:41:28.330$  therapies for example in pH that we

NOTE Confidence: 0.803603747142857

00:41:28.330 --> 00:41:30.436 can further improve quality of life.

NOTE Confidence: 0.803603747142857

 $00{:}41{:}30.440 \dashrightarrow 00{:}41{:}32.258$  And I think this also underscores

NOTE Confidence: 0.803603747142857

00:41:32.258 --> 00:41:33.616 too that umm, you know,

NOTE Confidence: 0.803603747142857

 $00:41:33.616 \longrightarrow 00:41:35.786$  we we focus a lot in the past on

NOTE Confidence: 0.803603747142857

 $00:41:35.786 \longrightarrow 00:41:37.742$  these hard outcomes which are of

NOTE Confidence: 0.803603747142857

 $00:41:37.742 \longrightarrow 00:41:39.410$  course important like hemoglobin,

NOTE Confidence: 0.803603747142857

 $00{:}41{:}39.410 \dashrightarrow 00{:}41{:}41.500$  but there's an additional component

NOTE Confidence: 0.803603747142857

 $00:41:41.500 \longrightarrow 00:41:43.172$  to quality of life.

NOTE Confidence: 0.803603747142857

 $00:41:43.180 \longrightarrow 00:41:44.800$  Beyond that now that is difficult

 $00:41:44.800 \longrightarrow 00:41:46.868$  to capture and I think that the

NOTE Confidence: 0.803603747142857

 $00:41:46.868 \longrightarrow 00:41:48.408$  investigators could have done a

NOTE Confidence: 0.803603747142857

 $00:41:48.408 \longrightarrow 00:41:49.914$  better job honestly with similar

NOTE Confidence: 0.803603747142857

 $00:41:49.914 \longrightarrow 00:41:52.239$  map and in fact most of phase three

NOTE Confidence: 0.803603747142857

 $00:41:52.239 \longrightarrow 00:41:53.406$  investigations currently looking

NOTE Confidence: 0.803603747142857

00:41:53.406 --> 00:41:55.740 at quality of life use patient

NOTE Confidence: 0.803603747142857

 $00:41:55.803 \longrightarrow 00:41:57.608$  reported outcomes which is good.

NOTE Confidence: 0.803603747142857

 $00:41:57.610 \longrightarrow 00:42:00.060$  But most of the times they're not

NOTE Confidence: 0.803603747142857

 $00{:}42{:}00.060 \dashrightarrow 00{:}42{:}01.252$  validated externally validated.

NOTE Confidence: 0.803603747142857

 $00:42:01.252 \longrightarrow 00:42:03.778$  And the one for sure surefire

NOTE Confidence: 0.803603747142857

 $00{:}42{:}03.778 --> 00{:}42{:}06.370$  way to robustly look at these,

NOTE Confidence: 0.803603747142857

 $00:42:06.370 \longrightarrow 00:42:08.614$  although that takes a little bit

NOTE Confidence: 0.803603747142857

 $00:42:08.614 \longrightarrow 00:42:11.436$  more money and effort is to actually

NOTE Confidence: 0.803603747142857

00:42:11.436 --> 00:42:13.516 measure quality of life directly.

NOTE Confidence: 0.803603747142857

00:42:13.520 --> 00:42:15.340 With direct patient interviews,

NOTE Confidence: 0.803603747142857

 $00:42:15.340 \longrightarrow 00:42:18.460$  that that's a conversation for another time.

 $00:42:18.460 \longrightarrow 00:42:20.231$  But that's a conversation I have had

NOTE Confidence: 0.803603747142857

 $00{:}42{:}20.231 \dashrightarrow 00{:}42{:}21.696$  with colleagues in the BMT space

NOTE Confidence: 0.803603747142857

 $00:42:21.696 \longrightarrow 00:42:23.236$  and other spaces who want to truly

NOTE Confidence: 0.803603747142857

00:42:23.290 --> 00:42:24.898 capture the quality of life beyond,

NOTE Confidence: 0.803603747142857

00:42:24.900 --> 00:42:26.916 let's say like just the questionnaire stuff,

NOTE Confidence: 0.803603747142857

 $00:42:26.920 \longrightarrow 00:42:28.020$  12 or whatever it is.

NOTE Confidence: 0.857836389230769

00:42:29.040 --> 00:42:30.224 That's great. Thanks, George.

NOTE Confidence: 0.857836389230769

 $00{:}42{:}30.224 \dashrightarrow 00{:}42{:}32.422$  I wonder if some of that could

NOTE Confidence: 0.857836389230769

 $00:42:32.422 \longrightarrow 00:42:34.232$  be applied to individuals who

NOTE Confidence: 0.857836389230769

 $00{:}42{:}34.232 \dashrightarrow 00{:}42{:}35.680$  have non transfusion dependent

NOTE Confidence: 0.857836389230769

 $00:42:35.738 \longrightarrow 00:42:37.766$  thalassemia as well who have fatigue.

NOTE Confidence: 0.857836389230769

00:42:37.770 --> 00:42:41.118 That's really fascinating. Yeah.

NOTE Confidence: 0.857836389230769

 $00{:}42{:}41.120 \dashrightarrow 00{:}42{:}43.400$  Anish, I I have a question for you if I may.

NOTE Confidence: 0.857836389230769

 $00:42:43.400 \longrightarrow 00:42:46.060$  So the the last abstract you presented

NOTE Confidence: 0.857836389230769

 $00:42:46.060 \longrightarrow 00:42:49.438$  with CRP and immune checkpoint inhibitors.

 $00:42:49.440 \longrightarrow 00:42:52.536$  You know, obviously if we were

NOTE Confidence: 0.857836389230769

 $00{:}42{:}52.536 \rightarrow 00{:}42{:}54.600$  to intervene with prophylaxis,

NOTE Confidence: 0.857836389230769

 $00:42:54.600 \longrightarrow 00:42:58.980$  measuring CRP's would be.

NOTE Confidence: 0.857836389230769

 $00:42:58.980 \longrightarrow 00:43:00.708$  It would be too late in a sense,

NOTE Confidence: 0.857836389230769

 $00:43:00.710 \longrightarrow 00:43:03.645$  so you couldn't measure the

NOTE Confidence: 0.857836389230769

 $00:43:03.645 \longrightarrow 00:43:06.580$  CRP and then intervene with.

NOTE Confidence: 0.857836389230769

 $00:43:06.580 \longrightarrow 00:43:07.612$  With anticoagulant because

NOTE Confidence: 0.857836389230769

 $00:43:07.612 \longrightarrow 00:43:09.676$  it would be after the fact.

NOTE Confidence: 0.857836389230769

 $00:43:09.680 \longrightarrow 00:43:11.176$  So my question is,

NOTE Confidence: 0.857836389230769

 $00:43:11.176 \longrightarrow 00:43:13.046$  are the CRP changes similar

NOTE Confidence: 0.857836389230769

 $00:43:13.046 \longrightarrow 00:43:14.600$  from cycle to cycle?

NOTE Confidence: 0.857836389230769

00:43:14.600 --> 00:43:17.525 So can you use a cycle of CRP and

NOTE Confidence: 0.857836389230769

 $00:43:17.525 \longrightarrow 00:43:20.109$  anticipate that in the next cycle

NOTE Confidence: 0.857836389230769

00:43:20.109 --> 00:43:21.853 of immune checkpoint inhibitors

NOTE Confidence: 0.857836389230769

 $00:43:21.853 \longrightarrow 00:43:24.656$  that change in CRP will be the same?

NOTE Confidence: 0.89731385

 $00:43:28.030 \longrightarrow 00:43:29.696$  I think it's a very good question.

00:43:32.140 --> 00:43:34.890 You know, if the majority of the patients,

NOTE Confidence: 0.7843728

 $00:43:34.890 \longrightarrow 00:43:43.479$  about 7080% had a CRP flare and so my.

NOTE Confidence: 0.7843728

 $00:43:43.480 \longrightarrow 00:43:45.232$  And and so and.

NOTE Confidence: 0.7843728

 $00:43:45.232 \longrightarrow 00:43:47.422$  These were the group with.

NOTE Confidence: 0.7843728

00:43:47.430 --> 00:43:49.710 With irrespective of whether

NOTE Confidence: 0.7843728

 $00:43:49.710 \longrightarrow 00:43:51.990$  they had a response,

NOTE Confidence: 0.7843728

00:43:51.990 --> 00:43:56.086 you know and you know they halved their

NOTE Confidence: 0.7843728

 $00{:}43{:}56.086 \dashrightarrow 00{:}43{:}58.813$  CRP irrespective of that they were

NOTE Confidence: 0.7843728

 $00:43:58.813 \longrightarrow 00:44:02.967$  they were at high risk for for events and so.

NOTE Confidence: 0.7843728

 $00:44:02.970 \longrightarrow 00:44:07.836$  Although it's a very interesting observation,

NOTE Confidence: 0.7843728

00:44:07.840 --> 00:44:09.568 and you know this question comes,

NOTE Confidence: 0.7843728

 $00:44:09.570 \longrightarrow 00:44:12.498$  it's coming up more and more.

NOTE Confidence: 0.7843728

 $00{:}44{:}12.500 \dashrightarrow 00{:}44{:}16.195$  It's it's again you know 80% of the of the

NOTE Confidence: 0.7843728

 $00:44:16.195 \longrightarrow 00:44:19.348$  patients who are at risk and so it's it's.

NOTE Confidence: 0.7843728

00:44:19.350 --> 00:44:23.976 It's again a major, it's a.

00:44:23.980 --> 00:44:26.416 It I think the this whole,

NOTE Confidence: 0.7843728

 $00:44:26.420 \longrightarrow 00:44:27.884$  this whole, you know,

NOTE Confidence: 0.7843728

 $00:44:27.884 \longrightarrow 00:44:30.780$  CRP as a marker of inflammatory response.

NOTE Confidence: 0.842828760769231

 $00:44:33.240 \longrightarrow 00:44:35.720$  As a marker for VTE in these patients

NOTE Confidence: 0.842828760769231

 $00:44:35.720 \longrightarrow 00:44:38.399$  in this group will have to be refined

NOTE Confidence: 0.842828760769231

00:44:38.399 --> 00:44:40.931 a little more just because you know

NOTE Confidence: 0.842828760769231

 $00:44:40.931 \longrightarrow 00:44:43.474$  they're just the 80% eighty 85% of

NOTE Confidence: 0.842828760769231

 $00:44:43.474 \longrightarrow 00:44:45.580$  the patients are at they're claiming

NOTE Confidence: 0.842828760769231

 $00:44:45.651 \longrightarrow 00:44:48.059$  or at high risk which does not really

NOTE Confidence: 0.842828760769231

 $00:44:48.060 \longrightarrow 00:44:51.508$  help us that much if I didn't answer

NOTE Confidence: 0.842828760769231

00:44:51.508 --> 00:44:52.888 your question directly but that's

NOTE Confidence: 0.842828760769231

 $00:44:52.888 \longrightarrow 00:44:54.836$  what came to my mind and like you

NOTE Confidence: 0.842828760769231

 $00{:}44{:}54.836 \dashrightarrow 00{:}44{:}56.258$  know again yes it's interesting but

NOTE Confidence: 0.842828760769231

 $00{:}44{:}56.258 \dashrightarrow 00{:}44{:}57.767$ it's you know you're <br/>you're telling

NOTE Confidence: 0.842828760769231

 $00:44:57.767 \longrightarrow 00:44:59.585$  me that most of the patients are

NOTE Confidence: 0.842828760769231

 $00:44:59.585 \longrightarrow 00:45:01.930$  at high risk so so you know

 $00:45:02.880 \longrightarrow 00:45:03.489$  so there's a.

NOTE Confidence: 0.77009088555556

 $00:45:03.489 \longrightarrow 00:45:04.707$  Question that came in the chat,

NOTE Confidence: 0.77009088555556

 $00:45:04.710 \longrightarrow 00:45:06.975$  the question and answer extending

NOTE Confidence: 0.77009088555556

 $00:45:06.975 \longrightarrow 00:45:10.243$  this and the question was are

NOTE Confidence: 0.77009088555556

 $00{:}45{:}10.243 \dashrightarrow 00{:}45{:}12.548$  there recommendations that do CRP

NOTE Confidence: 0.77009088555556

 $00:45:12.548 \longrightarrow 00:45:14.546$  levels prior to immunotherapy and

NOTE Confidence: 0.77009088555556

 $00:45:14.546 \longrightarrow 00:45:16.850$  then monitor them on a monthly

NOTE Confidence: 0.77009088555556

 $00:45:16.920 \longrightarrow 00:45:19.041$  basis and is there any role at

NOTE Confidence: 0.77009088555556

 $00{:}45{:}19.041 \dashrightarrow 00{:}45{:}21.411$  this point for prophylaxis and the

NOTE Confidence: 0.77009088555556

 $00:45:21.411 \longrightarrow 00:45:23.726$  individual asking us about aspirin?

NOTE Confidence: 0.77009088555556

 $00:45:23.730 \longrightarrow 00:45:24.378$  I think this was

NOTE Confidence: 0.865354305333333

 $00:45:24.390 \longrightarrow 00:45:27.120$  a question that was asked at the

NOTE Confidence: 0.865354305333333

 $00{:}45{:}27.120 \longrightarrow 00{:}45{:}30.236$  meeting as well and and there are none.

NOTE Confidence: 0.865354305333333

00:45:30.240 --> 00:45:32.610 I'm not sure that our, you know,

NOTE Confidence: 0.865354305333333

00:45:32.610 --> 00:45:34.085 what the European practice is,

 $00:45:34.090 \longrightarrow 00:45:36.428$  but I don't think that it's been,

NOTE Confidence: 0.865354305333333

 $00{:}45{:}36.430 \dashrightarrow 00{:}45{:}39.358$ you know, done. It's such a.

NOTE Confidence: 0.865354305333333

00:45:39.360 --> 00:45:43.077 Such a, you know, such a nonspecific,

NOTE Confidence: 0.865354305333333

 $00:45:43.080 \longrightarrow 00:45:44.952$  you know, test among everything else

NOTE Confidence: 0.865354305333333

 $00:45:44.952 \longrightarrow 00:45:47.038$  that has been happening and being done.

NOTE Confidence: 0.865354305333333

 $00:45:47.040 \longrightarrow 00:45:49.560$  And I'm I'm not sure that

NOTE Confidence: 0.865354305333333

 $00:45:49.560 \longrightarrow 00:45:52.030$  it's being routinely done. So.

NOTE Confidence: 0.85177893

 $00:45:54.300 \longrightarrow 00:45:56.036$  The question of prophylaxis,

NOTE Confidence: 0.85177893

 $00:45:56.036 \longrightarrow 00:45:58.206$  I think that there are.

NOTE Confidence: 0.85177893

 $00:45:58.210 \longrightarrow 00:46:01.802$  There are um I, I,

NOTE Confidence: 0.85177893

00:46:01.802 --> 00:46:04.057 I it's it's hypothesis hypothesis

NOTE Confidence: 0.85177893

00:46:04.057 --> 00:46:06.402 generating and it's I wonder if

NOTE Confidence: 0.85177893

00:46:06.402 --> 00:46:08.870 it's you know if these group of

NOTE Confidence: 0.85177893

 $00:46:08.870 \longrightarrow 00:46:10.735$  patients should be separately sort

NOTE Confidence: 0.85177893

 $00:46:10.735 \longrightarrow 00:46:12.859$  of included in all the prophylaxis

NOTE Confidence: 0.85177893

 $00:46:12.859 \longrightarrow 00:46:14.877$  trials that are that are being

00:46:14.877 --> 00:46:17.886 you know undertaken and and

NOTE Confidence: 0.85177893

 $00{:}46{:}17.886 \to 00{:}46{:}21.510$  perhaps a more correlation you know.

NOTE Confidence: 0.85177893

 $00:46:21.510 \longrightarrow 00:46:23.414$  Those those types of studies be done

NOTE Confidence: 0.85177893

 $00:46:23.414 \longrightarrow 00:46:24.990$  including CRP and other markers.

NOTE Confidence: 0.8879602125

 $00:46:25.040 \longrightarrow 00:46:26.480$  Yeah, this is fascinating.

NOTE Confidence: 0.8879602125

 $00:46:26.480 \longrightarrow 00:46:29.329$  A lot of area for research for sure.

NOTE Confidence: 0.8879602125

 $00:46:29.330 \longrightarrow 00:46:31.298$  I'm George, I I had a

NOTE Confidence: 0.8879602125

 $00:46:31.298 \longrightarrow 00:46:33.090$  question for you as well.

NOTE Confidence: 0.8879602125

 $00:46:33.090 \longrightarrow 00:46:36.290$  In your study where or in the study

NOTE Confidence: 0.8879602125

 $00{:}46{:}36.290 \dashrightarrow 00{:}46{:}39.514$  you reviewed where a splenectomy was

NOTE Confidence: 0.8879602125

 $00{:}46{:}39.514 \dashrightarrow 00{:}46{:}41.850$  performed for immune cytopenias,

NOTE Confidence: 0.8879602125

 $00:46:41.850 \longrightarrow 00:46:44.316$  you noted that I think about 20% of the

NOTE Confidence: 0.8879602125

 $00{:}46{:}44.316 \to 00{:}46{:}46.044$  patients and new diagnosis was made.

NOTE Confidence: 0.8879602125

 $00{:}46{:}46.050 \dashrightarrow 00{:}46{:}48.865$  So an additional diagnosis as

NOTE Confidence: 0.8879602125

00:46:48.865 --> 00:46:50.954 presumably potentially A cause

 $00:46:50.954 \longrightarrow 00:46:54.002$  for the immune cytopenia and I'm

NOTE Confidence: 0.8879602125

 $00:46:54.002 \longrightarrow 00:46:56.281$  wondering if the dates what the

NOTE Confidence: 0.8879602125

 $00:46:56.281 \longrightarrow 00:46:58.540$  dates of the of the study?

NOTE Confidence: 0.8879602125

 $00:46:58.540 \longrightarrow 00:46:59.260$  We're done.

NOTE Confidence: 0.8879602125

00:46:59.260 --> 00:47:01.060 And in particular I'm thinking

NOTE Confidence: 0.8879602125

 $00:47:01.060 \longrightarrow 00:47:03.032$  that with modern techniques of

NOTE Confidence: 0.8879602125

 $00{:}47{:}03.032 \dashrightarrow 00{:}47{:}04.692$  flow cytometry and molecular

NOTE Confidence: 0.8879602125

 $00:47:04.692 \longrightarrow 00:47:06.780$  studies on the peripheral blood,

NOTE Confidence: 0.8879602125

 $00{:}47{:}06.780 \dashrightarrow 00{:}47{:}09.748$  would we still expect to see that

NOTE Confidence: 0.8879602125

00:47:09.748 --> 00:47:12.289 high rate of an additional diagnosis

NOTE Confidence: 0.8879602125

00:47:12.289 --> 00:47:14.827 made before a splenectomy is done?

NOTE Confidence: 0.829688564

 $00:47:15.260 \longrightarrow 00:47:16.840$  It's such a good question, Bob.

NOTE Confidence: 0.829688564

 $00{:}47{:}16.840 \dashrightarrow 00{:}47{:}19.086$  This abstract I think caught

NOTE Confidence: 0.829688564

 $00{:}47{:}19.086 \to 00{:}47{:}20.418$  a lot of people off guard,

NOTE Confidence: 0.829688564

 $00:47:20.420 \longrightarrow 00:47:21.805$  especially because and of course

NOTE Confidence: 0.829688564

 $00:47:21.805 \longrightarrow 00:47:23.190$  all of these are oralists,

 $00:47:23.190 \longrightarrow 00:47:24.550$  but especially because this

NOTE Confidence: 0.829688564

 $00:47:24.550 \longrightarrow 00:47:25.910$  was a retrospective analysis.

NOTE Confidence: 0.829688564

00:47:25.910 --> 00:47:28.526 So usually don't expect such a hard hitting.

NOTE Confidence: 0.829688564

 $00{:}47{:}28.530 {\: -->\:} 00{:}47{:}30.710$  Opponent because again these

NOTE Confidence: 0.829688564

 $00:47:30.710 \longrightarrow 00:47:32.345$  are consecutively treated

NOTE Confidence: 0.829688564

 $00:47:32.345 \longrightarrow 00:47:33.980$  patients with splenectomy.

NOTE Confidence: 0.829688564

 $00:47:33.980 \longrightarrow 00:47:36.166$  The years were 2002, 2020,

NOTE Confidence: 0.829688564

00:47:36.166 --> 00:47:38.480 the median follow up they did not report on,

NOTE Confidence: 0.829688564

 $00:47:38.480 \longrightarrow 00:47:40.328$  but as I was in touch with investigators

NOTE Confidence: 0.829688564

 $00:47:40.328 \longrightarrow 00:47:41.800$  they noted that they're tabulating

NOTE Confidence: 0.829688564

 $00:47:41.800 \longrightarrow 00:47:43.405$  it as they're putting together

NOTE Confidence: 0.829688564

 $00{:}47{:}43.405 \dashrightarrow 00{:}47{:}44.987$  their manuscript now because I was

NOTE Confidence: 0.829688564

00:47:44.987 --> 00:47:46.319 curious you know how many years

NOTE Confidence: 0.829688564

00:47:46.320 --> 00:47:49.011 since also what was not reported

NOTE Confidence: 0.829688564

 $00:47:49.011 \longrightarrow 00:47:51.522$  and what they're looking at and the

 $00:47:51.522 \longrightarrow 00:47:54.049$  question that had asked was are these

NOTE Confidence: 0.829688564

00:47:54.049 --> 00:47:55.900 diagnostic changes and they were,

NOTE Confidence: 0.829688564

 $00:47:55.900 \longrightarrow 00:47:57.388$  I should just clarify too that

NOTE Confidence: 0.829688564

 $00:47:57.388 \longrightarrow 00:47:58.750$  investigators are calling them changes.

NOTE Confidence: 0.829688564

 $00:47:58.750 \longrightarrow 00:48:01.738$  So not only the fact was

NOTE Confidence: 0.829688564

 $00:48:01.738 \longrightarrow 00:48:05.220$  that initial indication not.

NOTE Confidence: 0.829688564

 $00:48:05.220 \longrightarrow 00:48:06.459$  They're calling the initial

NOTE Confidence: 0.829688564

 $00:48:06.459 \longrightarrow 00:48:07.428$  indication is incorrect,

NOTE Confidence: 0.829688564

 $00:48:07.430 \longrightarrow 00:48:09.280$  meaning that the entire diagnosis

NOTE Confidence: 0.829688564

 $00:48:09.280 \longrightarrow 00:48:11.130$  was switched to the postoperative

NOTE Confidence: 0.829688564

00:48:11.192 --> 00:48:13.348 diagnosis as opposed to being added on,

NOTE Confidence: 0.829688564

 $00:48:13.350 \longrightarrow 00:48:14.454$  which is interesting.

NOTE Confidence: 0.829688564

 $00:48:14.454 \longrightarrow 00:48:16.662$  And so when I asked about.

NOTE Confidence: 0.829688564

00:48:16.670 --> 00:48:18.294 Whether this was time variant or not,

NOTE Confidence: 0.829688564

 $00:48:18.300 \longrightarrow 00:48:20.958$  meaning that like let's say in the 2000s,

NOTE Confidence: 0.829688564

00:48:20.958 --> 00:48:21.534 2005 period,

 $00:48:21.534 \longrightarrow 00:48:23.550$  is that where we're catching all of

NOTE Confidence: 0.829688564

00:48:23.608 --> 00:48:25.496 those 20% or is it mostly kind of

NOTE Confidence: 0.829688564

 $00:48:25.496 \longrightarrow 00:48:27.510$  kind of the same across the board?

NOTE Confidence: 0.829688564

 $00:48:27.510 \longrightarrow 00:48:29.328$  They weren't able to answer that

NOTE Confidence: 0.829688564

 $00:48:29.328 \longrightarrow 00:48:31.208$  question only to say that it

NOTE Confidence: 0.829688564

 $00:48:31.208 \longrightarrow 00:48:32.946$  appeared that there is not like

NOTE Confidence: 0.829688564

 $00:48:32.946 \longrightarrow 00:48:35.050$  a huge spike in the early data,

NOTE Confidence: 0.829688564

 $00:48:35.050 \longrightarrow 00:48:37.094$  although it might be a little bit

NOTE Confidence: 0.829688564

00:48:37.094 --> 00:48:38.799 less moving forward it seems like,

NOTE Confidence: 0.829688564

 $00:48:38.800 \longrightarrow 00:48:40.249$  and we'll see what the manuscript shows.

NOTE Confidence: 0.829688564

00:48:40.250 --> 00:48:41.570 I won't speculate beyond that,

NOTE Confidence: 0.829688564

 $00{:}48{:}41.570 \dashrightarrow 00{:}48{:}43.682$  but it seems like these misdiagnoses

NOTE Confidence: 0.829688564

00:48:43.682 --> 00:48:45.090 may still be happening.

NOTE Confidence: 0.829688564

00:48:45.090 --> 00:48:45.526 And again,

NOTE Confidence: 0.829688564

00:48:45.526 --> 00:48:46.616 I mean the Cleveland Clinic

 $00:48:46.616 \longrightarrow 00:48:47.890$  is a fantastic health system.

NOTE Confidence: 0.829688564

 $00:48:47.890 \longrightarrow 00:48:49.668$  And so if this is indeed accurate

NOTE Confidence: 0.829688564

00:48:49.668 --> 00:48:51.806 and if this is what they ultimately

NOTE Confidence: 0.829688564

 $00:48:51.806 \longrightarrow 00:48:52.796$  end up reporting,

NOTE Confidence: 0.829688564

 $00:48:52.800 \longrightarrow 00:48:54.288$  I think this is something that we all

NOTE Confidence: 0.829688564

00:48:54.288 --> 00:48:55.782 have to pay attention to because if

NOTE Confidence: 0.829688564

00:48:55.782 --> 00:48:57.609 this is happening in the Cleveland Clinic,

NOTE Confidence: 0.829688564

00:48:57.610 --> 00:48:59.522 then I don't think we're immune to that

NOTE Confidence: 0.829688564

 $00{:}48{:}59.522 \dashrightarrow 00{:}49{:}01.230$  either here at Yale or anywhere else.

NOTE Confidence: 0.708265374

00:49:01.380 --> 00:49:03.080 Yeah, that's really fascinating, George.

NOTE Confidence: 0.708265374

 $00{:}49{:}03.080 \dashrightarrow 00{:}49{:}05.456$  So diseases that are really truly

NOTE Confidence: 0.708265374

 $00:49:05.456 \longrightarrow 00:49:07.576$  isolated to the spleen at least

NOTE Confidence: 0.708265374

 $00:49:07.576 \longrightarrow 00:49:08.916$  by our current techniques to

NOTE Confidence: 0.708265374

 $00:49:08.916 \longrightarrow 00:49:10.419$  to discover them in the blood,

NOTE Confidence: 0.708265374

 $00:49:10.420 \longrightarrow 00:49:13.040$  yeah, that's that is fascinating.

NOTE Confidence: 0.708265374

00:49:13.040 --> 00:49:14.756 And Anish and if I may,

 $00:49:14.760 \longrightarrow 00:49:18.110$  your catheter ohso so another.

NOTE Confidence: 0.708265374

 $00:49:18.110 \longrightarrow 00:49:19.450$  So another question came in,

NOTE Confidence: 0.708265374

 $00:49:19.450 \longrightarrow 00:49:20.650$  this is for you Anish.

NOTE Confidence: 0.708265374

 $00:49:20.650 \longrightarrow 00:49:22.948$  So many factors affect the CRP

NOTE Confidence: 0.708265374

 $00:49:22.948 \longrightarrow 00:49:26.100$  level and how do you know the CRP

NOTE Confidence: 0.708265374

 $00:49:26.100 \longrightarrow 00:49:28.398$  elevation is due to the immune

NOTE Confidence: 0.708265374

00:49:28.485 --> 00:49:31.257 checkpoint inhibitor or infection?

NOTE Confidence: 0.708265374

 $00:49:31.260 \longrightarrow 00:49:33.128$  That developed afterwards perhaps.

NOTE Confidence: 0.826564288333333

00:49:33.200 --> 00:49:34.430 Yeah, it's a very good question.

NOTE Confidence: 0.826564288333333

 $00{:}49{:}34.430 \dashrightarrow 00{:}49{:}36.152$  I mean it's just such a nonspecific

NOTE Confidence: 0.826564288333333

00:49:36.152 --> 00:49:37.503 marker but but there's something

NOTE Confidence: 0.826564288333333

00:49:37.503 --> 00:49:39.456 about it because you know it's a,

NOTE Confidence: 0.826564288333333

 $00{:}49{:}39.460 \dashrightarrow 00{:}49{:}41.602$  it's a significant rise and it's a

NOTE Confidence: 0.826564288333333

00:49:41.602 --> 00:49:44.238 although it's a retrospectively done study,

NOTE Confidence: 0.826564288333333

 $00:49:44.240 \longrightarrow 00:49:49.140$  but it's a cohort and.

 $00:49:49.140 \longrightarrow 00:49:51.812$  And there there is clearly a pattern that

NOTE Confidence: 0.826564288333333

 $00:49:51.812 \longrightarrow 00:49:54.557$  has been previously recognized as well.

NOTE Confidence: 0.826564288333333

 $00:49:54.560 \longrightarrow 00:49:56.880$  So one of the citations

NOTE Confidence: 0.826564288333333

00:49:56.880 --> 00:49:59.200 that had looked into CRP,

NOTE Confidence: 0.826564288333333

 $00:49:59.200 \longrightarrow 00:50:00.904$  I don't know how you know well they

NOTE Confidence: 0.826564288333333

 $00:50:00.904 \longrightarrow 00:50:02.538$  they can adjust for other things.

NOTE Confidence: 0.826564288333333

00:50:02.540 --> 00:50:04.718 I mean these are patients with

NOTE Confidence: 0.826564288333333

 $00{:}50{:}04.718 \dashrightarrow 00{:}50{:}06.170$ systemic you know metastatic

NOTE Confidence: 0.826564288333333

00:50:06.235 --> 00:50:08.669 malignancies and but they even

NOTE Confidence: 0.826564288333333

 $00:50:08.669 \longrightarrow 00:50:11.567$  previously when when they had reported.

NOTE Confidence: 0.82461002

 $00{:}50{:}14.930 \dashrightarrow 00{:}50{:}18.115$  CRP Flair and and mortality or poor

NOTE Confidence: 0.82461002

 $00:50:18.115 \longrightarrow 00:50:21.466$  outcomes they they it was a similar

NOTE Confidence: 0.82461002

 $00:50:21.466 \longrightarrow 00:50:24.590$  kind of dynamic so that it had been

NOTE Confidence: 0.82461002

 $00{:}50{:}24.590 \rightarrow 00{:}50{:}27.580$  recognized and so it's a good question,

NOTE Confidence: 0.82461002

 $00:50:27.580 \longrightarrow 00:50:30.220$  but it's such a such a nonspecific marker.

NOTE Confidence: 0.812899864

00:50:31.230 --> 00:50:33.670 OK, thank you. And George,

 $00:50:33.670 \longrightarrow 00:50:34.980$  if we can go back to you for a minute,

NOTE Confidence: 0.812899864

 $00:50:34.980 \longrightarrow 00:50:41.020$  the the the amide trial.

NOTE Confidence: 0.812899864

00:50:41.020 --> 00:50:41.790 Fascinating drug.

NOTE Confidence: 0.812899864

 $00:50:41.790 \longrightarrow 00:50:44.485$  And I assume that there is a

NOTE Confidence: 0.812899864

 $00{:}50{:}44.485 \dashrightarrow 00{:}50{:}46.836$  potential that this could be used

NOTE Confidence: 0.812899864

 $00:50:46.836 \longrightarrow 00:50:48.726$  in any autoimmune disease where

NOTE Confidence: 0.812899864

 $00:50:48.803 \longrightarrow 00:50:50.798$  IG is felt to be the culprit.

NOTE Confidence: 0.812899864

00:50:50.800 --> 00:50:52.155 Is that how you're thinking

NOTE Confidence: 0.812899864

 $00:50:52.155 \longrightarrow 00:50:53.239$  about this as well?

NOTE Confidence: 0.752498774

 $00:50:53.750 \longrightarrow 00:50:55.100$  Well, I'll say that's how the

NOTE Confidence: 0.752498774

 $00{:}50{:}55.100 \dashrightarrow 00{:}50{:}57.880$  pharmaceutical company is thinking about it.

NOTE Confidence: 0.752498774

 $00:50:57.880 \longrightarrow 00:51:00.166$  Because I've had a I've had

NOTE Confidence: 0.752498774

 $00{:}51{:}00.166 \dashrightarrow 00{:}51{:}01.690$  a conversation with them.

NOTE Confidence: 0.752498774

 $00:51:01.690 \longrightarrow 00:51:04.786$  Yeah. So it was approved this,

NOTE Confidence: 0.752498774

 $00:51:04.790 \longrightarrow 00:51:06.542$  this drug was approved for my

 $00:51:06.542 \longrightarrow 00:51:08.050$  senior Gravis just last year.

NOTE Confidence: 0.752498774

 $00{:}51{:}08.050 \dashrightarrow 00{:}51{:}09.760$  They're looking at it and they

NOTE Confidence: 0.752498774

 $00:51:09.760 \longrightarrow 00:51:10.942$  have obviously, as I presented,

NOTE Confidence: 0.752498774

 $00:51:10.942 \longrightarrow 00:51:12.166$  have looked at it and ITP.

NOTE Confidence: 0.752498774

 $00:51:12.170 \longrightarrow 00:51:14.294$  But I know that they're really

NOTE Confidence: 0.752498774

00:51:14.294 --> 00:51:16.965 excited about the whole host of neuro

NOTE Confidence: 0.752498774

 $00:51:16.965 \longrightarrow 00:51:19.329$  autoimmune disorders that are out there.

NOTE Confidence: 0.752498774

00:51:19.330 --> 00:51:22.426 And if it works and if it's successful,

NOTE Confidence: 0.752498774

 $00{:}51{:}22.430 \dashrightarrow 00{:}51{:}24.566$  you can make an argument that

NOTE Confidence: 0.752498774

 $00:51:24.566 \longrightarrow 00:51:26.890$  this kind of mechanism could then

NOTE Confidence: 0.752498774

 $00:51:26.890 \longrightarrow 00:51:28.945$  theoretically help with any disease

NOTE Confidence: 0.752498774

 $00:51:28.945 \longrightarrow 00:51:31.970$  that has this pathologic auto antibody.

NOTE Confidence: 0.752498774

 $00:51:31.970 \longrightarrow 00:51:34.160$  Component or at least it's worth

NOTE Confidence: 0.752498774

 $00{:}51{:}34.160 \dashrightarrow 00{:}51{:}36.359$  testing in any disease like that,

NOTE Confidence: 0.752498774

 $00:51:36.360 \longrightarrow 00:51:37.848$  especially if they ultimately go on

NOTE Confidence: 0.752498774

00:51:37.848 --> 00:51:39.333 to prove that the safety profile

 $00{:}51{:}39.333 \dashrightarrow 00{:}51{:}40.894$  is what they claim it to be.

NOTE Confidence: 0.752498774

 $00:51:40.900 \longrightarrow 00:51:42.895$  Because as we've seen with other drugs,

NOTE Confidence: 0.752498774

 $00:51:42.900 \longrightarrow 00:51:44.461$  even phase two or phase three studies

NOTE Confidence: 0.752498774

00:51:44.461 --> 00:51:45.760 sometimes are not enough, right.

NOTE Confidence: 0.752498774

 $00{:}51{:}45.760 \dashrightarrow 00{:}51{:}47.260$  When you post marketing surveillance

NOTE Confidence: 0.752498774

 $00:51:47.260 \longrightarrow 00:51:49.070$  phase four studies to really see

NOTE Confidence: 0.752498774

 $00:51:49.070 \longrightarrow 00:51:50.455$  an effect across rare diseases,

NOTE Confidence: 0.752498774

00:51:50.460 --> 00:51:51.395 presumably they're going to be

NOTE Confidence: 0.752498774

 $00:51:51.395 \longrightarrow 00:51:52.900$  looking at a lot of rare diseases,

NOTE Confidence: 0.752498774

 $00:51:52.900 \longrightarrow 00:51:56.160$  this autoimmune, neurological space.

NOTE Confidence: 0.752498774

 $00:51:56.160 \longrightarrow 00:51:56.534$  So yeah,

NOTE Confidence: 0.752498774

00:51:56.534 --> 00:51:57.656 I think there's a good amount

NOTE Confidence: 0.752498774

 $00{:}51{:}57.656 \dashrightarrow 00{:}51{:}58.359$  of excitement with it.

NOTE Confidence: 0.752498774

 $00:51:58.360 \longrightarrow 00:52:00.562$  I'm curious to see what happens

NOTE Confidence: 0.752498774

 $00:52:00.562 \longrightarrow 00:52:01.574$  going forward, but.

 $00:52:01.574 \longrightarrow 00:52:03.492$  I do expect that we're going to

NOTE Confidence: 0.752498774

 $00:52:03.492 \longrightarrow 00:52:05.710$  see a dozen plus trials within next

NOTE Confidence: 0.752498774

 $00:52:05.710 \longrightarrow 00:52:08.365$  10 years in a bunch of autoimmune

NOTE Confidence: 0.752498774

 $00:52:08.365 \longrightarrow 00:52:10.835$  mediated disorders with this mechanism.

NOTE Confidence: 0.841814783571429

 $00:52:11.600 \longrightarrow 00:52:14.000$  And then presumably since B cells and plasma

NOTE Confidence: 0.841814783571429

00:52:14.000 --> 00:52:16.217 cells are not being affected directly,

NOTE Confidence: 0.841814783571429

00:52:16.220 --> 00:52:18.060 the immunosuppression will be

NOTE Confidence: 0.841814783571429

 $00:52:18.060 \longrightarrow 00:52:20.820$  less than with the drug that.

NOTE Confidence: 0.841814783571429

00:52:20.820 --> 00:52:24.236 Causes apoptosis or death of B cells present

NOTE Confidence: 0.7421815225

00:52:24.250 --> 00:52:25.612 really good. That's a really good

NOTE Confidence: 0.7421815225

 $00{:}52{:}25.612 \dashrightarrow 00{:}52{:}27.389$  .1 that I hadn't actually discussed

NOTE Confidence: 0.7421815225

00:52:27.390 --> 00:52:29.020 with with the pharmaceutical company,

NOTE Confidence: 0.7421815225

 $00:52:29.020 \longrightarrow 00:52:30.810$  but one that makes a lot of sense to me.

NOTE Confidence: 0.886699574

 $00:52:32.790 \longrightarrow 00:52:34.470$  The data will tell us, I think.

NOTE Confidence: 0.886699574

 $00:52:34.470 \longrightarrow 00:52:36.240$  I think so too. Yeah,

NOTE Confidence: 0.888791608

00:52:36.280 --> 00:52:37.330 it would be nice, right?

 $00:52:37.330 \longrightarrow 00:52:38.770$  Often we're hoping that this is

NOTE Confidence: 0.888791608

 $00{:}52{:}38.770 \dashrightarrow 00{:}52{:}40.728$  going to be like the next big thing.

NOTE Confidence: 0.888791608

 $00:52:40.730 \longrightarrow 00:52:41.935$  Hopefully that ends up actually

NOTE Confidence: 0.888791608

 $00:52:41.935 \longrightarrow 00:52:43.480$  being the case here. We'll see.

NOTE Confidence: 0.732658515

 $00{:}52{:}44.720 \dashrightarrow 00{:}52{:}46.305$  A doctor Sharda question about

NOTE Confidence: 0.732658515

 $00:52:46.305 \longrightarrow 00:52:48.226$  the catheter study, if I may.

NOTE Confidence: 0.732658515

00:52:48.226 --> 00:52:51.000 I noted that in the catheter three study,

NOTE Confidence: 0.732658515

 $00:52:51.000 \longrightarrow 00:52:53.610$  the authors used a low molecular

NOTE Confidence: 0.732658515

 $00{:}52{:}53.610 \dashrightarrow 00{:}52{:}56.263$  weight he parin for a week and

NOTE Confidence: 0.732658515

 $00:52:56.263 \longrightarrow 00:52:58.318$  then transition to a doac.

NOTE Confidence: 0.732658515

 $00:52:58.320 \longrightarrow 00:52:59.856$  Pixabay and that in in the,

NOTE Confidence: 0.732658515

 $00:52:59.860 \longrightarrow 00:53:01.918$  in the case of that study,

NOTE Confidence: 0.732658515

 $00{:}53{:}01.920 \dashrightarrow 00{:}53{:}04.770$  do you think that's necessary it

NOTE Confidence: 0.732658515

 $00:53:04.770 \longrightarrow 00:53:07.320$  seems like that's excessive treatment

NOTE Confidence: 0.732658515

 $00:53:07.320 \longrightarrow 00:53:10.155$  quote excessive compared to that?

 $00:53:10.160 \longrightarrow 00:53:10.410 \text{ I was}$ 

NOTE Confidence: 0.869618186

 $00:53:10.420 \longrightarrow 00:53:11.390$  also surprised to see that.

NOTE Confidence: 0.869618186

 $00:53:11.390 \longrightarrow 00:53:14.084$  But I think that to increase

NOTE Confidence: 0.869618186

 $00:53:14.084 \longrightarrow 00:53:16.419$  their recruitment they did that.

NOTE Confidence: 0.869618186

 $00:53:16.420 \longrightarrow 00:53:20.472$  I think most of us have a bias to I I

NOTE Confidence: 0.869618186

00:53:20.472 --> 00:53:22.680 know many people tell me like you know,

NOTE Confidence: 0.869618186

00:53:22.680 --> 00:53:24.750 you want your patient to cool off like with

NOTE Confidence: 0.869618186

 $00:53:24.750 \longrightarrow 00:53:27.035$  a heparin and then you know do something.

NOTE Confidence: 0.869618186

00:53:27.040 --> 00:53:28.330 But it, it's strange, you know,

NOTE Confidence: 0.869618186

 $00:53:28.330 \longrightarrow 00:53:29.968$  this is something that someone would do

NOTE Confidence: 0.869618186

 $00{:}53{:}29.968 \dashrightarrow 00{:}53{:}32.006$  with say the bigger trend, you know,

NOTE Confidence: 0.869618186

 $00:53:32.006 \longrightarrow 00:53:33.771$  because that's what the originally

NOTE Confidence: 0.869618186

 $00:53:33.771 \longrightarrow 00:53:35.579$  studies were kind of designed.

NOTE Confidence: 0.869618186

 $00:53:35.580 \longrightarrow 00:53:39.143$  But I think this was also to

NOTE Confidence: 0.869618186

 $00:53:39.143 \longrightarrow 00:53:40.670$  increase the recruitment.

NOTE Confidence: 0.869618186

00:53:40.670 --> 00:53:43.134 And so they allowed like 7 days

 $00:53:43.134 \longrightarrow 00:53:45.320$  of of and they made a protocol,

NOTE Confidence: 0.869618186

00:53:45.320 --> 00:53:46.840 I mean everyone's treated about

NOTE Confidence: 0.869618186

 $00:53:46.840 \longrightarrow 00:53:49.080$  seven days of of Dalteparin,

NOTE Confidence: 0.869618186

00:53:49.080 --> 00:53:50.940 Romario heparin followed by Pixar lamp,

NOTE Confidence: 0.869618186

 $00:53:50.940 \longrightarrow 00:53:53.208$  whereas it didn't do it for rivaroxaban.

NOTE Confidence: 0.842956651428571

 $00:53:54.190 \longrightarrow 00:53:56.566$  OK. And so you don't think the the

NOTE Confidence: 0.842956651428571

 $00:53:56.566 \longrightarrow 00:53:58.805$  issue was people had cancer therefore

NOTE Confidence: 0.842956651428571

 $00{:}53{:}58.805 \dashrightarrow 00{:}54{:}01.570$  they might need a heparin like drug

NOTE Confidence: 0.842956651428571

 $00{:}54{:}01.570 \dashrightarrow 00{:}54{:}03.936$  before they get switched to a doac?

NOTE Confidence: 0.857704832857143

 $00:54:04.090 \longrightarrow 00:54:06.367$  No, I think this is this was done rather

NOTE Confidence: 0.857704832857143

 $00{:}54{:}06.367 \dashrightarrow 00{:}54{:}08.431$  quickly and this was done after you know,

NOTE Confidence: 0.857704832857143

00:54:08.431 --> 00:54:10.840 Adobe Saban and others already.

NOTE Confidence: 0.857704832857143

00:54:10.840 --> 00:54:13.620 I guess you know, you know the

NOTE Confidence: 0.857704832857143

 $00:54:13.620 \longrightarrow 00:54:14.930$  data was already out there. So

NOTE Confidence: 0.73521526

00:54:14.940 --> 00:54:17.684 OK great. I think the most most

00:54:17.700 --> 00:54:19.398 I think the conclude, the interesting

NOTE Confidence: 0.762768184615385

 $00:54:19.398 \longrightarrow 00:54:21.338$  thing was and this often comes up,

NOTE Confidence: 0.762768184615385

 $00:54:21.340 \longrightarrow 00:54:25.132$  which is what to do with the line I I

NOTE Confidence: 0.762768184615385

 $00:54:25.132 \longrightarrow 00:54:28.060$  liked the fact that these were real

NOTE Confidence: 0.762768184615385

 $00:54:28.060 \longrightarrow 00:54:29.620$  like symptomatic proximal events.

NOTE Confidence: 0.762768184615385

 $00:54:29.620 \longrightarrow 00:54:32.924$  I mean 3/4 of them had subclavian

NOTE Confidence: 0.762768184615385

 $00:54:32.924 \longrightarrow 00:54:35.326$  involves actually many had pulmonary

NOTE Confidence: 0.762768184615385

 $00:54:35.326 \longrightarrow 00:54:38.902$  embolisms to and they were able to save

NOTE Confidence: 0.762768184615385

 $00:54:38.991 \longrightarrow 00:54:42.027$  like like if you combine especially.

NOTE Confidence: 0.762768184615385

 $00:54:42.030 \longrightarrow 00:54:45.327$  The, the Warfarin trial is from

NOTE Confidence: 0.762768184615385

 $00:54:45.330 \longrightarrow 00:54:46.446$  2003 four or something like that

NOTE Confidence: 0.762768184615385

 $00:54:46.446 \longrightarrow 00:54:47.949$  I think it was published in 2006.

NOTE Confidence: 0.762768184615385

 $00:54:47.950 \longrightarrow 00:54:50.631$  But at least if you combine the

NOTE Confidence: 0.762768184615385

 $00:54:50.631 \longrightarrow 00:54:52.709$  rivaroxaban and apixaban you can see

NOTE Confidence: 0.762768184615385

00:54:52.709 --> 00:54:55.062 that you know the lines can be can

NOTE Confidence: 0.762768184615385

 $00{:}54{:}55.062 \dashrightarrow 00{:}54{:}57.206$  be saved without really recurrence

 $00:54:57.206 \longrightarrow 00:54:59.866$  or symptoms or post traumatic

NOTE Confidence: 0.762768184615385

 $00:54:59.866 \longrightarrow 00:55:02.886$  syndrome and can be used very safely.

NOTE Confidence: 0.762768184615385

00:55:02.890 --> 00:55:05.445 So that's I think is pretty good

NOTE Confidence: 0.76276818461538500:55:05.445 --> 00:55:06.540 data to have.

NOTE Confidence: 0.827710378888889

 $00{:}55{:}07.190 \dashrightarrow 00{:}55{:}08.520$  Just one follow-up question to

NOTE Confidence: 0.827710378888889

 $00:55:08.520 \longrightarrow 00:55:10.116$  you and then we'll we'll end

NOTE Confidence: 0.827710378888889

 $00:55:10.116 \longrightarrow 00:55:11.600$  and there may not be data here.

NOTE Confidence: 0.827710378888889

 $00:55:11.600 \longrightarrow 00:55:13.464$  But so if if you had a patient

NOTE Confidence: 0.827710378888889

 $00{:}55{:}13.464 \dashrightarrow 00{:}55{:}15.314$  who had a symptomatic line

NOTE Confidence: 0.827710378888889

 $00{:}55{:}15.314 \to 00{:}55{:}17.070$  associated thrombus and cancer,

NOTE Confidence: 0.827710378888889

 $00:55:17.070 \longrightarrow 00:55:19.541$  would you start at all with a

NOTE Confidence: 0.827710378888889

 $00{:}55{:}19.541 \dashrightarrow 00{:}55{:}21.029$  low molecular weight heparin

NOTE Confidence: 0.827710378888889

 $00{:}55{:}21.029 \dashrightarrow 00{:}55{:}23.918$  or would you just begin with a

NOTE Confidence: 0.827710378888889

 $00{:}55{:}23.918 \to 00{:}55{:}25.880$ dull ache apixaban, let's say

NOTE Confidence: 0.779273528333333

 $00:55:26.250 \longrightarrow 00:55:27.606$  I would just begin with the,

 $00:55:27.610 \longrightarrow 00:55:28.710$  with the, with the doc.

NOTE Confidence: 0.779273528333333

 $00{:}55{:}28.710 \longrightarrow 00{:}55{:}29.695$  I mean I was following the

NOTE Confidence: 0.779273528333333

 $00{:}55{:}29.695 \dashrightarrow 00{:}55{:}31.830$  River Rock Seban thing as it is

NOTE Confidence: 0.779273528333333

00:55:31.830 --> 00:55:33.030 and now we've been using them,

NOTE Confidence: 0.779273528333333

00:55:33.030 --> 00:55:35.730 you know, kind of interchangeably.

NOTE Confidence: 0.779273528333333

00:55:35.730 --> 00:55:37.330 So I definitely would just,

NOTE Confidence: 0.779273528333333

 $00:55:37.330 \longrightarrow 00:55:38.360$  you know, pick in the.

NOTE Confidence: 0.81018688

 $00:55:38.850 \longrightarrow 00:55:41.610$  Great. OK. Thank you. Well.

NOTE Confidence: 0.81018688

 $00{:}55{:}41.610 --> 00{:}55{:}43.080$  And the hour is almost up.

NOTE Confidence: 0.81018688

 $00:55:43.080 \longrightarrow 00:55:45.420$  I'd like to thank our speakers.

NOTE Confidence: 0.81018688

 $00{:}55{:}45.420 \dashrightarrow 00{:}55{:}47.256$  I these are really great abstracts

NOTE Confidence: 0.81018688

 $00{:}55{:}47.256 \dashrightarrow 00{:}55{:}49.074$  you chose to present and they're

NOTE Confidence: 0.81018688

00:55:49.074 --> 00:55:51.210 some of them are clearly going to be

NOTE Confidence: 0.81018688

00:55:51.270 --> 00:55:52.908 practice changing I think for all

NOTE Confidence: 0.81018688

 $00:55:52.908 \longrightarrow 00:55:55.149$  of us and we're all excited about.

NOTE Confidence: 0.81018688

 $00:55:55.149 \longrightarrow 00:55:57.447$  Seeing these new drugs and development

00:55:57.447 --> 00:55:59.397 and new ideas brought forth.

NOTE Confidence: 0.81018688

 $00{:}55{:}59.400 \dashrightarrow 00{:}56{:}03.303$  So thank you both very much and thank

NOTE Confidence: 0.81018688

 $00:56:03.303 \longrightarrow 00:56:05.284$  you to the participants who are here.

NOTE Confidence: 0.81018688

 $00{:}56{:}05.290 \dashrightarrow 00{:}56{:}07.030$  We really enjoyed having you

NOTE Confidence: 0.81018688

 $00:56:07.030 \longrightarrow 00:56:09.429$  and I hope everyone has a nice

NOTE Confidence: 0.81018688

 $00:56:09.429 \longrightarrow 00:56:11.187$  rest of the day and weekend.

NOTE Confidence: 0.81018688

 $00:56:11.190 \longrightarrow 00:56:12.999$  Bye, bye now.