## WEBVTT

NOTE duration:"01:08:27" NOTE recognizability:0.789

NOTE language:en-us

NOTE Confidence: 0.837063833333333

00:00:00.000 --> 00:00:03.560 OK. Good afternoon, everybody.

NOTE Confidence: 0.837063833333333

00:00:03.560 --> 00:00:07.688 Welcome to our. Next, ash review.

NOTE Confidence: 0.837063833333333

 $00:00:07.690 \longrightarrow 00:00:11.855$  This is a review on cellular therapies,

NOTE Confidence: 0.837063833333333

 $00:00:11.860 \longrightarrow 00:00:13.960$  and we have, I think,

NOTE Confidence: 0.837063833333333

 $00:00:13.960 \longrightarrow 00:00:15.610$  2 exciting presentations

NOTE Confidence: 0.837063833333333

 $00:00:15.610 \longrightarrow 00:00:17.810$  for you this afternoon.

NOTE Confidence: 0.837063833333333

 $00:00:17.810 \longrightarrow 00:00:20.008$  The first is going to be with

NOTE Confidence: 0.83706383333333

00:00:20.008 --> 00:00:21.418 Doctor Iris Isufi. Dr.

NOTE Confidence: 0.8370638333333333

00:00:21.418 --> 00:00:24.226 Isufi is associate professor in the

NOTE Confidence: 0.837063833333333

 $00:00:24.226 \longrightarrow 00:00:26.770$  Department of Medicine and Hematology

NOTE Confidence: 0.837063833333333

 $00{:}00{:}26.770 \dashrightarrow 00{:}00{:}30.095$  in the Yale Cancer Center and the

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 $00:00:30.095 \longrightarrow 00:00:33.268$  director of our Cell Therapy research

NOTE Confidence: 0.837063833333333

00:00:33.268 --> 00:00:36.562 team and our Clinical Care T.

 $00:00:36.570 \longrightarrow 00:00:39.150$  Program and she's gonna talk to

NOTE Confidence: 0.837063833333333

 $00{:}00{:}39.150 \dashrightarrow 00{:}00{:}41.773$  you about some advances in cell

NOTE Confidence: 0.837063833333333

00:00:41.773 --> 00:00:44.233 therapy at the latest ash meeting.

NOTE Confidence: 0.837063833333333

00:00:44.240 --> 00:00:46.766 So, Doctor Suffi, take it away.

NOTE Confidence: 0.861653135

 $00:00:49.150 \longrightarrow 00:00:51.358$  Thank you Stuart. I'm gonna share my screen.

NOTE Confidence: 0.8588443

 $00:01:00.170 \longrightarrow 00:01:02.250$  Before you start, can I just

NOTE Confidence: 0.8588443

 $00:01:02.250 \longrightarrow 00:01:04.020$  remind everybody if you'd like

NOTE Confidence: 0.911925422307692

 $00:01:04.096 \longrightarrow 00:01:06.384$  to submit questions, there will

NOTE Confidence: 0.911925422307692

 $00:01:06.384 \longrightarrow 00:01:09.156$  be a question and answer period.

NOTE Confidence: 0.911925422307692

 $00:01:09.160 \longrightarrow 00:01:10.378$  Possibly between the

NOTE Confidence: 0.911925422307692

 $00{:}01{:}10.378 \dashrightarrow 00{:}01{:}12.408$  presentations and at the end,

NOTE Confidence: 0.911925422307692

 $00:01:12.410 \longrightarrow 00:01:14.885$  but you can submit questions

NOTE Confidence: 0.911925422307692

00:01:14.885 --> 00:01:18.625 through the chat or Q&A during the

NOTE Confidence: 0.911925422307692

00:01:18.625 --> 00:01:21.550 talk and we'll possibly answer

NOTE Confidence: 0.911925422307692

00:01:21.550 --> 00:01:24.690 them during or during during the

NOTE Confidence: 0.911925422307692

 $00:01:24.690 \longrightarrow 00:01:27.590$  talks or at the end. OK.

 $00:01:29.610 \longrightarrow 00:01:31.608$  Thanks. So I'll take welcome everyone.

NOTE Confidence: 0.822846726666667

 $00:01:31.610 \longrightarrow 00:01:35.082$  I'll take the first half of the session

NOTE Confidence: 0.822846726666667

 $00:01:35.082 \longrightarrow 00:01:38.940$  just to present some of the ash data

NOTE Confidence: 0.822846726666667

 $00:01:38.940 \longrightarrow 00:01:42.822$  on cell therapies and I know this

NOTE Confidence: 0.822846726666667

 $00:01:42.822 \longrightarrow 00:01:45.774$  was talked about that the myeloma.

NOTE Confidence: 0.822846726666667

 $00:01:45.780 \longrightarrow 00:01:49.280$  View as well, but today I'll focus

NOTE Confidence: 0.822846726666667

00:01:49.280 --> 00:01:52.449 particularly on non Hodgkin lymphomas

NOTE Confidence: 0.822846726666667

 $00{:}01{:}52.450 \dashrightarrow 00{:}01{:}59.070$  and some also exciting data on AL.

NOTE Confidence: 0.822846726666667

00:01:59.070 --> 00:02:04.350 These are my disclosures. So the 1st.

NOTE Confidence: 0.796655256

 $00{:}02{:}07.590 \dashrightarrow 00{:}02{:}10.294$  Presentation, the first abstract

NOTE Confidence: 0.796655256

00:02:10.294 --> 00:02:13.286 that I wanted to present is abstract

NOTE Confidence: 0.796655256

 $00:02:13.290 \longrightarrow 00:02:16.290$  655 that's looking at Lysol cell,

NOTE Confidence: 0.796655256

 $00{:}02{:}16.290 \dashrightarrow 00{:}02{:}21.462$  Lysol catagen, mariluz cell and this

NOTE Confidence: 0.796655256

 $00:02:21.462 \longrightarrow 00:02:25.583$  is a cellular therapy product that is

NOTE Confidence: 0.796655256

 $00:02:25.583 \longrightarrow 00:02:29.034$  different from the prior ones on the

00:02:29.034 --> 00:02:32.029 market because it has a defined CD4

NOTE Confidence: 0.796655256

 $00{:}02{:}32.029 \dashrightarrow 00{:}02{:}35.132$  to CD8 ratio and this has already been

NOTE Confidence: 0.796655256

 $00:02:35.132 \longrightarrow 00:02:37.496$  approved in the third line setting.

NOTE Confidence: 0.796655256

00:02:37.500 --> 00:02:39.999 And more recently also in the second

NOTE Confidence: 0.796655256

 $00:02:39.999 \longrightarrow 00:02:41.947$  line setting for diffuse large

NOTE Confidence: 0.796655256

 $00:02:41.947 \longrightarrow 00:02:44.880$  B cell lymphoma, so.

NOTE Confidence: 0.796655256

00:02:44.880 --> 00:02:47.495 Here they presented their primary

NOTE Confidence: 0.796655256

 $00:02:47.495 \longrightarrow 00:02:50.204$  analysis of the randomized phase

NOTE Confidence: 0.796655256

 $00{:}02{:}50.204 \dashrightarrow 00{:}02{:}53.039$  three transform study where lyso

NOTE Confidence: 0.796655256

 $00:02:53.039 \longrightarrow 00:02:57.027$  cell was compared to standard of care

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 $00{:}02{:}57.027 \dashrightarrow 00{:}02{:}59.227$  with salvage chemotherapy alone,

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 $00:02:59.230 \longrightarrow 00:03:02.170$  so patients had a good performance status.

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 $00{:}03{:}02.170 \dashrightarrow 00{:}03{:}07.202$  The ones that were randomized to the

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 $00:03:07.202 \longrightarrow 00:03:10.730$  standard of care arm who had relapsed.

NOTE Confidence: 0.796655256

 $00{:}03{:}10.730 \dashrightarrow 00{:}03{:}13.700$  Um were randomized to receive 3

NOTE Confidence: 0.796655256

00:03:13.700 --> 00:03:15.680 cycles of chemo immunotherapy.

 $00:03:15.680 \longrightarrow 00:03:17.490$  These were high risk patients.

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00:03:17.490 --> 00:03:19.686 They were patients who were either

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 $00:03:19.686 \longrightarrow 00:03:21.874$  primary refractory to their first line

NOTE Confidence: 0.796655256

 $00:03:21.874 \longrightarrow 00:03:23.854$  or patients who had relapsed within

NOTE Confidence: 0.796655256

 $00:03:23.854 \longrightarrow 00:03:26.058$  12 months of their initial therapy.

NOTE Confidence: 0.796655256

 $00:03:26.060 \longrightarrow 00:03:28.034$  So they took this highest risk group

NOTE Confidence: 0.796655256

 $00:03:28.034 \longrightarrow 00:03:30.299$  to compare it to stem cell transplant.

NOTE Confidence: 0.796655256

 $00:03:30.300 \longrightarrow 00:03:32.922$  And so the patients who received

NOTE Confidence: 0.796655256

 $00:03:32.922 \longrightarrow 00:03:34.670$  salvage chemotherapy and achieved

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 $00:03:34.743 \longrightarrow 00:03:37.389$  either a complete or a good partial

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 $00:03:37.389 \longrightarrow 00:03:39.598$  response proceeded to high dose

NOTE Confidence: 0.796655256

 $00{:}03{:}39.598 \dashrightarrow 00{:}03{:}41.110$  chemotherapy and autologous.

NOTE Confidence: 0.796655256

 $00{:}03{:}41.110 \dashrightarrow 00{:}03{:}44.314$  Them self rescue a typically with

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 $00{:}03{:}44.314 \dashrightarrow 00{:}03{:}47.070$  a beam regimen and then.

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 $00:03:47.070 \longrightarrow 00:03:49.667$  The other arm was randomized to receive

 $00:03:49.667 \longrightarrow 00:03:52.498$  lysis cell and so they underwent

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 $00:03:52.498 \longrightarrow 00:03:54.145$  lymphodepletion with fludarabine

NOTE Confidence: 0.796655256

 $00:03:54.145 \longrightarrow 00:03:56.789$  and cyclophosphamide and they were

NOTE Confidence: 0.796655256

 $00:03:56.789 \longrightarrow 00:03:59.386$  allowed to get some bridging if their

NOTE Confidence: 0.796655256

 $00:03:59.386 \longrightarrow 00:04:01.470$  disease was rapidly progressing.

NOTE Confidence: 0.796655256

00:04:01.470 --> 00:04:02.140 Importantly,

NOTE Confidence: 0.796655256

 $00:04:02.140 \longrightarrow 00:04:04.150$  in this trial,

NOTE Confidence: 0.796655256

 $00:04:04.150 \longrightarrow 00:04:06.880$  crossover was allowed for patients

NOTE Confidence: 0.796655256

 $00:04:06.880 \longrightarrow 00:04:10.075$  who received standard of care and

NOTE Confidence: 0.796655256

00:04:10.075 --> 00:04:13.330 were not deemed to be good candidates

NOTE Confidence: 0.796655256

 $00{:}04{:}13.330 \dashrightarrow 00{:}04{:}16.088$  for autologous stem cell transplant.

NOTE Confidence: 0.796655256

 $00:04:16.090 \longrightarrow 00:04:17.263$  For multiple reasons.

NOTE Confidence: 0.796655256

 $00:04:17.263 \longrightarrow 00:04:20.000$  So they crossed over and the primary

NOTE Confidence: 0.796655256

00:04:20.071 --> 00:04:22.333 endpoint was event free survival and

NOTE Confidence: 0.796655256

 $00:04:22.333 \longrightarrow 00:04:25.266$  then they looked at complete response rates,

NOTE Confidence: 0.796655256

 $00{:}04{:}25.266 \to 00{:}04{:}27.626$  progression free and overall survival.

 $00:04:27.630 \longrightarrow 00:04:31.214$  They do have now a 17.5 month follow up.

NOTE Confidence: 0.796655256

 $00:04:31.214 \longrightarrow 00:04:33.680$  And you know that's important because

NOTE Confidence: 0.796655256

 $00:04:33.751 \longrightarrow 00:04:36.481$  we know that the majority of these

NOTE Confidence: 0.796655256

00:04:36.481 --> 00:04:38.711 patients with primary refractory or

NOTE Confidence: 0.796655256

 $00{:}04{:}38.711 \dashrightarrow 00{:}04{:}41.181$ early relapse disease will again

NOTE Confidence: 0.796655256

00:04:41.181 --> 00:04:43.088 relapse within typically within

NOTE Confidence: 0.796655256

 $00:04:43.088 \longrightarrow 00:04:45.596$  the first year of of salvage.

NOTE Confidence: 0.796655256

00:04:45.600 --> 00:04:46.400 So, uh,

NOTE Confidence: 0.796655256

 $00:04:46.400 \longrightarrow 00:04:49.600$  with that median follow-up you can see here,

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 $00{:}04{:}49.600 \dashrightarrow 00{:}04{:}51.620$  there was a significant improvement

NOTE Confidence: 0.796655256

 $00:04:51.620 \longrightarrow 00:04:54.105$  in the event free survival where

NOTE Confidence: 0.796655256

 $00{:}04{:}54.105 \dashrightarrow 00{:}04{:}56.487$  the median event free survival was

NOTE Confidence: 0.796655256

 $00{:}04{:}56.487 \dashrightarrow 00{:}04{:}58.444$  actually not reached compared to

NOTE Confidence: 0.796655256

 $00:04:58.444 \longrightarrow 00:05:00.526$  a median event free survival of

NOTE Confidence: 0.796655256

 $00:05:00.526 \longrightarrow 00:05:02.326$  only 2.4 months in.

 $00:05:02.326 \longrightarrow 00:05:05.218$  The standard of care arm with

NOTE Confidence: 0.796655256

 $00{:}05{:}05.218 \dashrightarrow 00{:}05{:}08.184$  stem cell transplant with a with

NOTE Confidence: 0.796655256

 $00:05:08.184 \longrightarrow 00:05:13.220$  a hazard ratio of 0.35.

NOTE Confidence: 0.796655256

 $00:05:13.220 \longrightarrow 00:05:15.719$  And this was.

NOTE Confidence: 0.796655256

 $00:05:15.720 \longrightarrow 00:05:17.480$  For a self therapy trial,

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 $00:05:17.480 \longrightarrow 00:05:19.664$  relatively large trial

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 $00:05:19.664 \longrightarrow 00:05:22.212$  with about 184 patients,

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 $00:05:22.212 \longrightarrow 00:05:24.396$  92 on each arm.

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 $00{:}05{:}24.400 \dashrightarrow 00{:}05{:}28.024$  So you can see here that for their

NOTE Confidence: 0.796655256

 $00:05:28.024 \longrightarrow 00:05:30.987$  secondary endpoints there is also

NOTE Confidence: 0.796655256

 $00{:}05{:}30.987 {\:{\circ}{\circ}{\circ}}>00{:}05{:}32.892$  statistically significant complete

NOTE Confidence: 0.796655256

 $00:05:32.892 \longrightarrow 00:05:36.042$  response rate of 68% compared to

NOTE Confidence: 0.796655256

 $00{:}05{:}36.042 \dashrightarrow 00{:}05{:}39.170$  40% in the standard of care arm and

NOTE Confidence: 0.796655256

00:05:39.256 --> 00:05:41.916 an improvement in progression free

NOTE Confidence: 0.796655256

 $00:05:41.916 \longrightarrow 00:05:45.748$  survival that was not reached for the cell.

NOTE Confidence: 0.796655256

 $00:05:45.750 \longrightarrow 00:05:48.221$  Therapy group versus only 6.2 months in

 $00:05:48.221 \longrightarrow 00:05:51.150$  the standard of care arm for patients

NOTE Confidence: 0.796655256

 $00{:}05{:}51.150 \dashrightarrow 00{:}05{:}53.400$  who received chemotherapy and transplant.

NOTE Confidence: 0.796655256

00:05:53.400 --> 00:05:54.670 And importantly,

NOTE Confidence: 0.796655256

00:05:54.670 --> 00:05:58.480 despite 67% of patients at crossing

NOTE Confidence: 0.796655256

 $00:05:58.480 \longrightarrow 00:06:01.798$  over from the transplant arm,

NOTE Confidence: 0.796655256

00:06:01.800 --> 00:06:04.887 the chemotherapy arm to receive Lisa cell,

NOTE Confidence: 0.796655256

 $00:06:04.890 \longrightarrow 00:06:05.552$  there was,

NOTE Confidence: 0.796655256

00:06:05.552 --> 00:06:06.214 you know,

NOTE Confidence: 0.796655256

 $00:06:06.214 \longrightarrow 00:06:08.200$  there still seem to be a

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 $00:06:08.277 \longrightarrow 00:06:11.235$  trend favoring overall survival in patients

NOTE Confidence: 0.830955749

 $00:06:11.235 \longrightarrow 00:06:14.160$  who received licea cell where overall

NOTE Confidence: 0.830955749

 $00{:}06{:}14.160 \dashrightarrow 00{:}06{:}17.010$  survival was not reached versus about

NOTE Confidence: 0.830955749

 $00{:}06{:}17.010 \dashrightarrow 00{:}06{:}20.230$  30 months in the standard of care arm.

NOTE Confidence: 0.830955749

 $00:06:20.230 \longrightarrow 00:06:23.902$  So this primary analysis with almost

NOTE Confidence: 0.830955749

00:06:23.902 --> 00:06:26.735 two year of follow-up confirmed

 $00:06:26.735 \longrightarrow 00:06:28.275$  the significant clinical benefit

NOTE Confidence: 0.830955749

 $00{:}06{:}28.275 \dashrightarrow 00{:}06{:}31.037$  of Lisa cell over the standard of

NOTE Confidence: 0.830955749

 $00:06:31.037 \longrightarrow 00:06:33.347$  care and given these very meaningful

NOTE Confidence: 0.830955749

 $00:06:33.347 \longrightarrow 00:06:35.630$  improvements in complete response rates,

NOTE Confidence: 0.830955749

 $00:06:35.630 \longrightarrow 00:06:39.088$  event free and progression free survival this

NOTE Confidence: 0.830955749

 $00:06:39.088 \longrightarrow 00:06:41.874$  and and a trend towards overall survival.

NOTE Confidence: 0.830955749

 $00:06:41.880 \longrightarrow 00:06:44.974$  This has now been approved and is

NOTE Confidence: 0.830955749

 $00:06:44.974 \longrightarrow 00:06:48.023$  considered the standard of care in the

NOTE Confidence: 0.830955749

 $00:06:48.023 \longrightarrow 00:06:50.489$  second line for patients with primary.

NOTE Confidence: 0.830955749

 $00:06:50.490 \longrightarrow 00:06:53.460$  Refractory or early relapsed lymphoma

NOTE Confidence: 0.830955749

 $00{:}06{:}53.460 \dashrightarrow 00{:}06{:}56.912$  and there is another product on

NOTE Confidence: 0.830955749

 $00:06:56.912 \longrightarrow 00:06:59.621$  the market but this was the one

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 $00:06:59.621 \longrightarrow 00:07:02.558$  that had the updated at ASH.

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 $00:07:02.560 \longrightarrow 00:07:06.610$  At the next one that I was also interested

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 $00:07:06.610 \longrightarrow 00:07:10.196$  in is abstract 154 where they looked

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 $00:07:10.196 \longrightarrow 00:07:12.616$  at really aggressive lymphomas that

 $00:07:12.616 \longrightarrow 00:07:15.624$  are high grade with Mick and BCL 2

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 $00{:}07{:}15.624 \to 00{:}07{:}18.418$  plus or minus BCL 6 rearrangements.

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 $00:07:18.420 \longrightarrow 00:07:20.828$  So the so-called double or triple hit

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 $00:07:20.828 \longrightarrow 00:07:22.741$  lymphomas and also double expressor

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 $00:07:22.741 \longrightarrow 00:07:24.365$  lymphomas with dual overexpression

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 $00:07:24.365 \longrightarrow 00:07:26.300$  of MYC and BCL two.

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 $00:07:26.300 \longrightarrow 00:07:29.380$  And we know that those are very

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 $00{:}07{:}29.380 \dashrightarrow 00{:}07{:}31.275$  inferior responses to frontline

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 $00:07:31.275 \longrightarrow 00:07:33.700$  and later lines of chemotherapy.

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00:07:33.700 --> 00:07:35.955 They have very poor outcomes

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 $00{:}07{:}35.955 \dashrightarrow 00{:}07{:}37.759$  with stem cell transplantation.

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00:07:37.760 --> 00:07:40.870 There have already been some

NOTE Confidence: 0.830955749

 $00{:}07{:}40.870 \dashrightarrow 00{:}07{:}43.327$  presentations in terms of the role of

NOTE Confidence: 0.830955749

00:07:43.327 --> 00:07:45.710 cartee for this patient population,

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 $00:07:45.710 \longrightarrow 00:07:48.842$  which has led to similar overall

 $00:07:48.842 \longrightarrow 00:07:49.886$  response rates.

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00:07:49.890 --> 00:07:50.306 However,

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 $00:07:50.306 \longrightarrow 00:07:51.554$  until this abstract,

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00:07:51.554 --> 00:07:54.511 there had not been any data or

NOTE Confidence: 0.830955749

00:07:54.511 --> 00:07:56.791 update on the duration of response

NOTE Confidence: 0.830955749

 $00{:}07{:}56.791 \dashrightarrow 00{:}08{:}00.287$  for these high risk groups and so

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 $00{:}08{:}00.287 \dashrightarrow 00{:}08{:}01.997$  this multicenter retrospective

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 $00:08:01.997 \longrightarrow 00:08:03.707$  analysis evaluated survival.

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 $00:08:03.710 \longrightarrow 00:08:06.422$  Outcomes with Carti and also what

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00:08:06.422 --> 00:08:08.830 happened to patients who produced

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 $00:08:08.830 \longrightarrow 00:08:11.920$  double hit lymphoma or dual overexpress

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 $00:08:11.920 \longrightarrow 00:08:14.479$  or who progressed after court.

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 $00:08:14.480 \longrightarrow 00:08:16.960$  And there was a large group of patients,

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 $00:08:16.960 \longrightarrow 00:08:18.884$  they looked at 408,

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 $00:08:18.884 \longrightarrow 00:08:21.770$  eighty of which had double hit

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 $00:08:21.871 \longrightarrow 00:08:23.952$  and 328 non double hit.

 $00:08:23.952 \longrightarrow 00:08:26.640$  Some of them received access cells,

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 $00:08:26.640 \longrightarrow 00:08:29.304$  some Tessa cell and a minority

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 $00:08:29.304 \longrightarrow 00:08:32.134$  received licea cell and the clinical

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 $00:08:32.134 \longrightarrow 00:08:34.624$  characteristics were similar between the

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 $00:08:34.624 \longrightarrow 00:08:37.819$  double hit and the non double hit group.

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 $00:08:37.820 \longrightarrow 00:08:40.070$  So the median follow-up was also

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00:08:40.070 --> 00:08:42.626 about 18 months for from Carty

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 $00:08:42.626 \longrightarrow 00:08:44.096$  for surviving patients.

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 $00{:}08{:}44.100 \dashrightarrow 00{:}08{:}46.540$  So relatively long follow up.

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 $00:08:46.540 \longrightarrow 00:08:49.330$  And what?

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 $00{:}08{:}49.330 \dashrightarrow 00{:}08{:}55.373$  What they saw actually was that sorry

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 $00:08:55.373 \longrightarrow 00:08:58.194$  was that patients did very well or

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 $00{:}08{:}58.194 \dashrightarrow 00{:}09{:}01.328$  whether they had double hits or dual

NOTE Confidence: 0.830955749

 $00:09:01.328 \longrightarrow 00:09:03.124$  overexpress or lymphoma compared

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 $00:09:03.124 \longrightarrow 00:09:05.709$  to other subtypes of lymphoma.

 $00:09:05.710 \longrightarrow 00:09:08.524$  In terms of their progression free survival,

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 $00:09:08.530 \longrightarrow 00:09:11.806$  overall response rates were no different,

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 $00:09:11.810 \longrightarrow 00:09:13.718$  no statistically significant in

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00:09:13.718 --> 00:09:17.638 the order of 65 to 70% complete

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00:09:17.638 --> 00:09:19.504 response rates also.

NOTE Confidence: 0.830955749

 $00:09:19.510 \longrightarrow 00:09:20.650$  About 50%,

NOTE Confidence: 0.830955749

 $00:09:20.650 \longrightarrow 00:09:24.640$  which is what we expect with the

NOTE Confidence: 0.830955749

 $00:09:24.640 \longrightarrow 00:09:26.392$  run-of-the-mill diffuse large

NOTE Confidence: 0.830955749

 $00:09:26.392 \longrightarrow 00:09:28.728$  B cell lymphoma and.

NOTE Confidence: 0.830955749

 $00:09:28.730 \longrightarrow 00:09:30.968$  The median all overall survival was

NOTE Confidence: 0.830955749

 $00{:}09{:}30.968 \dashrightarrow 00{:}09{:}33.118$  not reached actually for the double

NOTE Confidence: 0.830955749

 $00:09:33.118 \longrightarrow 00:09:35.502$  hit group versus 21 months in the non

NOTE Confidence: 0.830955749

 $00:09:35.568 \longrightarrow 00:09:40.030$  double hit and not statistically significant.

NOTE Confidence: 0.830955749

 $00:09:40.030 \longrightarrow 00:09:40.990$  However,

NOTE Confidence: 0.830955749

00:09:40.990 --> 00:09:41.648 importantly,

NOTE Confidence: 0.830955749

 $00:09:41.648 \longrightarrow 00:09:44.938$  patients with double hit lymphoma

 $00:09:44.938 \longrightarrow 00:09:48.163$  who progressed after court had

NOTE Confidence: 0.830955749

 $00:09:48.163 \longrightarrow 00:09:51.664$  a very poor outcome with overall

NOTE Confidence: 0.830955749

 $00:09:51.664 \longrightarrow 00:09:54.868$  survival that was very short only

NOTE Confidence: 0.830955749

 $00:09:54.868 \longrightarrow 00:09:57.430$  in the order of 2.7 months.

NOTE Confidence: 0.830955749

 $00:09:57.430 \longrightarrow 00:09:59.740$  So this is a group of patients.

NOTE Confidence: 0.830955749

00:09:59.740 --> 00:10:00.718 That you know,

NOTE Confidence: 0.830955749

00:10:00.718 --> 00:10:02.348 if they progress after Carti,

NOTE Confidence: 0.830955749

 $00:10:02.350 \longrightarrow 00:10:05.656$  where they do need better salvage

NOTE Confidence: 0.830955749

 $00:10:05.656 \longrightarrow 00:10:06.758$  strategies for.

NOTE Confidence: 0.880673167142857

 $00:10:06.760 \longrightarrow 00:10:10.155$  So this was the largest analysis basically

NOTE Confidence: 0.880673167142857

 $00:10:10.155 \longrightarrow 00:10:13.502$  that provided some update as to what

NOTE Confidence: 0.880673167142857

 $00:10:13.502 \longrightarrow 00:10:16.220$  happens with these patients with double

NOTE Confidence: 0.880673167142857

 $00{:}10{:}16.301 \dashrightarrow 00{:}10{:}18.660$  hit or dual overexpress or lymphomas.

NOTE Confidence: 0.880673167142857

 $00:10:18.660 \longrightarrow 00:10:21.510$  So those patients should be encouraged

NOTE Confidence: 0.880673167142857

 $00:10:21.510 \longrightarrow 00:10:25.113$  to participate in car T trials and and

 $00:10:25.113 \longrightarrow 00:10:27.960$  should be considered to receive it as

NOTE Confidence: 0.880673167142857

 $00{:}10{:}27.960 \dashrightarrow 00{:}10{:}30.418$  as part of standard of care without

NOTE Confidence: 0.880673167142857

 $00:10:30.418 \longrightarrow 00:10:33.344$  fear that they're not going to respond

NOTE Confidence: 0.880673167142857

 $00:10:33.344 \longrightarrow 00:10:36.427$  as well as the as the regular DLBCL.

NOTE Confidence: 0.880673167142857

 $00:10:36.430 \longrightarrow 00:10:39.545$  So umm, what about patients who progress

NOTE Confidence: 0.880673167142857

 $00:10:39.545 \longrightarrow 00:10:42.220$  after CD19 directed cortisol therapy?

NOTE Confidence: 0.880673167142857

 $00:10:42.220 \longrightarrow 00:10:44.820$  This is a very challenging group of patients.

NOTE Confidence: 0.880673167142857

 $00:10:44.820 \longrightarrow 00:10:47.277$  As you know they die within typically

NOTE Confidence: 0.880673167142857

 $00{:}10{:}47.277 \dashrightarrow 00{:}10{:}49.760$  die within three months of progressing

NOTE Confidence: 0.880673167142857 00:10:49.760 --> 00:10:50.670 after cartee.

NOTE Confidence: 0.880673167142857

 $00{:}10{:}50.670 \dashrightarrow 00{:}10{:}53.918$  And so this was a study from Stanford

NOTE Confidence: 0.880673167142857

00:10:53.918 --> 00:10:56.969 that looked at City 22 directed car T.

NOTE Confidence: 0.880673167142857

 $00:10:56.970 \longrightarrow 00:10:59.004$  In patients who had previously received

NOTE Confidence: 0.880673167142857

00:10:59.004 --> 00:11:01.298 CD 19 directed car T cell therapy,

NOTE Confidence: 0.880673167142857

 $00:11:01.300 \longrightarrow 00:11:03.170$  this was initially published in

NOTE Confidence: 0.880673167142857

 $00{:}11{:}03.170 \dashrightarrow 00{:}11{:}05.040$  Blood where they treated five.

00:11:05.040 --> 00:11:06.885 They treated three patients who

NOTE Confidence: 0.880673167142857

 $00{:}11{:}06.885 \dashrightarrow 00{:}11{:}09.645$  had had all high risk features with

NOTE Confidence: 0.880673167142857

 $00:11:09.645 \longrightarrow 00:11:11.735$  five prior lines of therapy.

NOTE Confidence: 0.880673167142857

00:11:11.740 --> 00:11:12.660 Including Carte,

NOTE Confidence: 0.880673167142857

 $00:11:12.660 \longrightarrow 00:11:16.340$  in fact one of the patients had had

NOTE Confidence: 0.880673167142857

00:11:16.340 --> 00:11:18.285 commercial parties and targeting City

NOTE Confidence: 0.880673167142857

00:11:18.285 --> 00:11:21.184 19 and then also a by specific City

NOTE Confidence: 0.880673167142857

 $00{:}11{:}21.184 \dashrightarrow 00{:}11{:}24.108$ 19 and City 20 core T and had relapsed

NOTE Confidence: 0.880673167142857

00:11:24.108 --> 00:11:26.929 and all of those patients achieved a

NOTE Confidence: 0.880673167142857

 $00{:}11{:}26.929 \dashrightarrow 00{:}11{:}29.540$  complete remission with the city 22

NOTE Confidence: 0.880673167142857

 $00:11:29.540 \longrightarrow 00:11:32.920$  targeted car T so that led to this.

NOTE Confidence: 0.875064976

 $00:11:35.240 \longrightarrow 00:11:39.146$  Moving forward to a larger study with

NOTE Confidence: 0.875064976

00:11:39.146 --> 00:11:42.847 38 participants rate up to 84 years

NOTE Confidence: 0.875064976

 $00:11:42.847 \longrightarrow 00:11:45.733$  old with a good performance status.

NOTE Confidence: 0.875064976

00:11:45.740 --> 00:11:47.180 They were heavily pretreated

 $00:11:47.180 \longrightarrow 00:11:49.960$  with three to 8 lines of therapy.

NOTE Confidence: 0.875064976

 $00:11:49.960 \longrightarrow 00:11:51.984$  The median was four.

NOTE Confidence: 0.875064976

 $00{:}11{:}51.984 \dashrightarrow 00{:}11{:}55.826$  In fact, about 33rd of patients did not

NOTE Confidence: 0.875064976

 $00:11:55.826 \longrightarrow 00:11:59.797$  have remission to any prior line of therapy.

NOTE Confidence: 0.875064976

 $00:11:59.800 \longrightarrow 00:12:02.362$  About 20% had had a transplant

NOTE Confidence: 0.875064976

 $00:12:02.362 \longrightarrow 00:12:04.530$  and they had all had.

NOTE Confidence: 0.875064976

 $00:12:04.530 \longrightarrow 00:12:08.275$  Prior City 19 core T cell therapy.

NOTE Confidence: 0.875064976

00:12:08.280 --> 00:12:09.196 And umm.

NOTE Confidence: 0.875064976

 $00:12:09.196 \longrightarrow 00:12:12.402$  The median time from Luca Fresas to

NOTE Confidence: 0.875064976

00:12:12.402 --> 00:12:15.825 the Court 22 infusion was 18 days,

NOTE Confidence: 0.875064976

 $00:12:15.830 \longrightarrow 00:12:20.168$  so a bit shorter than what we would typically

NOTE Confidence: 0.875064976

 $00:12:20.170 \longrightarrow 00:12:23.030$  expect with the commercial products.

NOTE Confidence: 0.875064976

 $00:12:23.030 \longrightarrow 00:12:26.270$  And some patients did receive bridging.

NOTE Confidence: 0.875064976

 $00:12:26.270 \longrightarrow 00:12:28.480$  So the median follow-up has

NOTE Confidence: 0.875064976

 $00:12:28.480 \longrightarrow 00:12:31.202$  not reached the two year

NOTE Confidence: 0.875064976

 $00:12:31.202 \longrightarrow 00:12:33.728$  mark for some of the cohorts.

00:12:33.730 --> 00:12:37.242 But very importantly the overall

NOTE Confidence: 0.875064976

 $00{:}12{:}37.242 \dashrightarrow 00{:}12{:}39.194$  response rate and complete

NOTE Confidence: 0.875064976

 $00:12:39.194 \longrightarrow 00:12:41.290$  response rates were very high,

NOTE Confidence: 0.875064976

 $00:12:41.290 \longrightarrow 00:12:45.686$  higher than predicted 72% and CR of

NOTE Confidence: 0.875064976

 $00{:}12{:}45.690 \dashrightarrow 00{:}12{:}48.338$ 53% which is similar to what we see

NOTE Confidence: 0.875064976

 $00:12:48.338 \longrightarrow 00:12:51.490$  with first line card T and all of the

NOTE Confidence: 0.875064976

00:12:51.490 --> 00:12:53.110 complete responses have actually.

NOTE Confidence: 0.875064976

00:12:53.110 --> 00:12:54.014 Been very,

NOTE Confidence: 0.875064976

00:12:54.014 --> 00:12:56.726 very durable with only one patient

NOTE Confidence: 0.875064976

 $00:12:56.726 \longrightarrow 00:12:59.507$  who achieved the CR having relapsed.

NOTE Confidence: 0.875064976

 $00:12:59.510 \longrightarrow 00:13:01.876$  And and you can see there the

NOTE Confidence: 0.875064976

 $00:13:01.876 \longrightarrow 00:13:03.311$  progression free survival and

NOTE Confidence: 0.875064976

 $00:13:03.311 \longrightarrow 00:13:05.447$  overall survival curves on the left

NOTE Confidence: 0.875064976

 $00:13:05.447 \longrightarrow 00:13:07.812$  look look actually very good for a

NOTE Confidence: 0.875064976

 $00{:}13{:}07.812 \dashrightarrow 00{:}13{:}09.654$  second line cartee and and compare

00:13:09.660 --> 00:13:12.960 very favourably to first line chart.

NOTE Confidence: 0.875064976

 $00{:}13{:}12.960 \dashrightarrow 00{:}13{:}17.099$  And as you can see the majority of

NOTE Confidence: 0.875064976

 $00:13:17.099 \longrightarrow 00:13:19.868$  the patients experienced grade one

NOTE Confidence: 0.875064976

 $00:13:19.868 \longrightarrow 00:13:25.070$  or two cytokine release syndrome and.

NOTE Confidence: 0.875064976

 $00:13:25.070 \longrightarrow 00:13:26.882$  Neurologic toxicity associated

NOTE Confidence: 0.875064976

 $00{:}13{:}26.882 \dashrightarrow 00{:}13{:}29.902$  with immune effector cell the rapy

NOTE Confidence: 0.875064976

 $00:13:29.902 \longrightarrow 00:13:34.520$  or or eye canyons. And um.

NOTE Confidence: 0.875064976

 $00:13:34.520 \longrightarrow 00:13:34.930$  Interestingly,

NOTE Confidence: 0.875064976

 $00:13:34.930 \longrightarrow 00:13:38.210$  what they saw in the higher dose level,

NOTE Confidence: 0.875064976

 $00:13:38.210 \longrightarrow 00:13:40.940$  which was dose level 2 is that

NOTE Confidence: 0.875064976

 $00{:}13{:}40.940 \dashrightarrow 00{:}13{:}44.393$  there was a significant number of

NOTE Confidence: 0.875064976

 $00:13:44.393 \longrightarrow 00:13:47.890$  patients that experienced what is

NOTE Confidence: 0.875064976

 $00:13:47.890 \longrightarrow 00:13:51.820$  a syndrome that's very much like.

NOTE Confidence: 0.875064976

 $00{:}13{:}51.820 \dashrightarrow 00{:}13{:}54.635$  Of falsity claim for histiocytosis

NOTE Confidence: 0.875064976

 $00:13:54.635 \longrightarrow 00:13:56.324$  and it's it's.

NOTE Confidence: 0.875064976

00:13:56.330 --> 00:13:58.553 Got a name of its own of carnage LH

00:13:58.553 --> 00:14:00.859 where it's a syndrome of five ferritin,

NOTE Confidence: 0.875064976

 $00{:}14{:}00.860 \dashrightarrow 00{:}14{:}03.405$  cytopenia square apathy and liver

NOTE Confidence: 0.875064976

 $00:14:03.405 \longrightarrow 00:14:06.441$  abnormalities and there was just in

NOTE Confidence: 0.875064976

 $00:14:06.441 \longrightarrow 00:14:09.276$  general more toxicity in those level 2.

NOTE Confidence: 0.875064976

 $00:14:09.280 \longrightarrow 00:14:12.642$  So dose level one had very was the one

NOTE Confidence: 0.875064976

 $00:14:12.642 \longrightarrow 00:14:14.280$  that had the results I showed you.

NOTE Confidence: 0.875064976

 $00:14:14.280 \longrightarrow 00:14:17.142$  So that's the dose that they're

NOTE Confidence: 0.875064976

 $00:14:17.142 \longrightarrow 00:14:18.573$  moving forward with.

NOTE Confidence: 0.875064976

 $00:14:18.580 \longrightarrow 00:14:20.800$  And then one patient developed

NOTE Confidence: 0.875064976

 $00{:}14{:}20.800 \dashrightarrow 00{:}14{:}23.609$  treatment related MSDS and AML without

NOTE Confidence: 0.875064976

 $00{:}14{:}23.609 \dashrightarrow 00{:}14{:}26.669$  evidence of lymphoma relapse which again.

NOTE Confidence: 0.875064976

 $00{:}14{:}26.670 \dashrightarrow 00{:}14{:}28.850$  Underscores the importance of us

NOTE Confidence: 0.875064976

 $00:14:28.850 \longrightarrow 00:14:31.030$  following this patients long term.

NOTE Confidence: 0.81361711

00:14:33.680 --> 00:14:40.728 Um, so another study of interest is actually?

NOTE Confidence: 0.81361711

00:14:40.730 --> 00:14:45.326 Engineered allogeneic core T cell therapy,

 $00:14:45.330 \longrightarrow 00:14:47.415$  all the commercial products are

NOTE Confidence: 0.81361711

 $00{:}14{:}47.415 \dashrightarrow 00{:}14{:}49.500$  autologous products and also the

NOTE Confidence: 0.81361711

 $00:14:49.572 \longrightarrow 00:14:51.623$  the one that I just presented the

NOTE Confidence: 0.81361711

00:14:51.623 --> 00:14:54.008 city 22 was an autologous product.

NOTE Confidence: 0.81361711

 $00:14:54.010 \longrightarrow 00:14:58.013$  This is a an aloe gamma delta cortisol

NOTE Confidence: 0.81361711

 $00{:}14{:}58.013 \dashrightarrow 00{:}15{:}00.834$  the rapy and actually it's a first in

NOTE Confidence: 0.81361711

 $00{:}15{:}00.834 \dashrightarrow 00{:}15{:}04.110$  class it instead of targeting C19 like

NOTE Confidence: 0.81361711

 $00:15:04.110 \longrightarrow 00:15:06.500$  the commercial products it targets

NOTE Confidence: 0.81361711

 $00{:}15{:}06.576 \dashrightarrow 00{:}15{:}09.578$  CD 20 and it has both adaptive and

NOTE Confidence: 0.81361711

 $00:15:09.578 \longrightarrow 00:15:11.330$  in nate cytotoxic effector function.

NOTE Confidence: 0.81361711

 $00{:}15{:}11.330 \dashrightarrow 00{:}15{:}13.794$  Which complement card targeting

NOTE Confidence: 0.81361711

 $00:15:13.794 \longrightarrow 00:15:16.258$  potentially enhancing is is

NOTE Confidence: 0.81361711

 $00:15:16.258 \longrightarrow 00:15:19.469$  efficacy and reducing antigen loss.

NOTE Confidence: 0.81361711

 $00:15:19.470 \longrightarrow 00:15:21.422$  It expresses MHC independent

NOTE Confidence: 0.81361711

00:15:21.422 --> 00:15:23.862 gamma delta T cell receptor.

NOTE Confidence: 0.81361711

 $00{:}15{:}23.870 \dashrightarrow 00{:}15{:}26.278$  So the risk of GVHD is low without

00:15:26.278 --> 00:15:28.531 the need for gene editing which

NOTE Confidence: 0.81361711

 $00{:}15{:}28.531 \dashrightarrow 00{:}15{:}30.889$  is more complex and takes longer.

NOTE Confidence: 0.81361711

 $00:15:30.890 \longrightarrow 00:15:33.452$  So this is the industry's most advanced

NOTE Confidence: 0.81361711

 $00:15:33.452 \longrightarrow 00:15:36.236$  core asset using Gamma Delta and they

NOTE Confidence: 0.81361711

 $00:15:36.236 \longrightarrow 00:15:38.666$  presented the multicenter phase one trial

NOTE Confidence: 0.81361711

 $00:15:38.735 \longrightarrow 00:15:41.345$  for relapsed refractory B cell lymphoma.

NOTE Confidence: 0.81361711

00:15:41.350 --> 00:15:43.235 Patients had to have CD20

NOTE Confidence: 0.81361711

00:15:43.235 --> 00:15:45.120 expression on their tumor cells.

NOTE Confidence: 0.81361711

 $00{:}15{:}45.120 \dashrightarrow 00{:}15{:}47.736$  They had to have received at least two

NOTE Confidence: 0.81361711

00:15:47.736 --> 00:15:51.408 prior lines of therapy and at ash they

NOTE Confidence: 0.81361711

00:15:51.408 --> 00:15:53.710 presented the data for their first

NOTE Confidence: 0.81361711

 $00:15:53.710 \longrightarrow 00:15:56.647$  dose cohorts in a three by three dose

NOTE Confidence: 0.81361711

 $00:15:56.647 \longrightarrow 00:15:59.272$  escalation scheme and in dose Level 3.

NOTE Confidence: 0.81361711

 $00:15:59.280 \longrightarrow 00:16:01.688$  They did allow patients to be reduced

NOTE Confidence: 0.81361711

00:16:01.688 --> 00:16:04.379 a week later without any lymphodema,

 $00:16:04.380 \longrightarrow 00:16:07.950$  additional lymphodepletion chemotherapy.

NOTE Confidence: 0.81361711

 $00{:}16{:}07.950 \dashrightarrow 00{:}16{:}10.284$  So the median number of the rapies

NOTE Confidence: 0.81361711

00:16:10.284 --> 00:16:12.519 was four range two to five,

NOTE Confidence: 0.81361711

 $00:16:12.520 \longrightarrow 00:16:15.268$  they were heavily pretreated.

NOTE Confidence: 0.81361711

00:16:15.268 --> 00:16:20.072 And four of the nine patients who

NOTE Confidence: 0.81361711

 $00:16:20.072 \longrightarrow 00:16:22.952$  were evaluable had received prior

NOTE Confidence: 0.81361711

 $00:16:22.952 \longrightarrow 00:16:25.976$  anti CD19 car T cell therapy.

NOTE Confidence: 0.81361711

 $00:16:25.980 \longrightarrow 00:16:27.620$  It was very well tolerated.

NOTE Confidence: 0.81361711

 $00{:}16{:}27.620 \dashrightarrow 00{:}16{:}30.182$  There was no reported graph versus

NOTE Confidence: 0.81361711

 $00{:}16{:}30.182 \dashrightarrow 00{:}16{:}32.946$  host disease and there were no

NOTE Confidence: 0.81361711

 $00:16:32.946 \longrightarrow 00:16:35.381$  Grade 3 cytokine release syndrome

NOTE Confidence: 0.81361711

00:16:35.381 --> 00:16:36.842 or neurologic toxicity.

NOTE Confidence: 0.81361711

 $00:16:36.850 \longrightarrow 00:16:39.846$  And this is their preliminary efficacy data.

NOTE Confidence: 0.81361711

 $00:16:39.850 \longrightarrow 00:16:43.634$  So as you can see there's six months

NOTE Confidence: 0.81361711

 $00:16:43.634 \longrightarrow 00:16:46.418$  complete response rate was in the order

NOTE Confidence: 0.81361711

 $00:16:46.418 \longrightarrow 00:16:50.546$  of 67% and for patients in those Level 3,

 $00:16:50.550 \longrightarrow 00:16:52.839$  actually a small number of three patients,

NOTE Confidence: 0.81361711

 $00:16:52.840 \longrightarrow 00:16:55.527$  they had a complete response rate of 100%.

NOTE Confidence: 0.81361711

00:16:55.527 --> 00:16:58.749 So this compares very favorably to

NOTE Confidence: 0.81361711

 $00:16:58.749 \longrightarrow 00:17:01.374$  autologous products and the advantage

NOTE Confidence: 0.81361711

 $00:17:01.374 \longrightarrow 00:17:05.070$  being that it's an off the shelf product,

NOTE Confidence: 0.81361711

 $00:17:05.070 \longrightarrow 00:17:07.554$  so the turnaround time.

NOTE Confidence: 0.81361711

 $00:17:07.554 \longrightarrow 00:17:09.417$  It's extremely short.

NOTE Confidence: 0.81361711

 $00:17:09.420 \longrightarrow 00:17:15.006$  The cells perhaps are fitter than those

NOTE Confidence: 0.81361711

 $00:17:15.010 \longrightarrow 00:17:18.100$  obtained from a heavily pretreated patient,

NOTE Confidence: 0.81361711

 $00:17:18.100 \longrightarrow 00:17:22.146$  without much in the way of toxicity.

NOTE Confidence: 0.81361711

 $00:17:22.150 \longrightarrow 00:17:24.098$  And then more recently,

NOTE Confidence: 0.81361711

 $00:17:24.098 \longrightarrow 00:17:27.910$  the company opened a dose level 4 cohort,

NOTE Confidence: 0.81361711

 $00{:}17{:}27.910 \dashrightarrow 00{:}17{:}33.976$  so now they have a larger number of patients.

NOTE Confidence: 0.81361711

00:17:33.980 --> 00:17:36.120 However,

NOTE Confidence: 0.81361711

 $00:17:36.120 \longrightarrow 00:17:38.892$  they do not have particularly the higher

00:17:38.892 --> 00:17:41.922 dose levels of three and four do not

NOTE Confidence: 0.81361711

 $00:17:41.922 \longrightarrow 00:17:44.589$  have have very short follow-up and the

NOTE Confidence: 0.81361711

 $00:17:44.589 \longrightarrow 00:17:47.095$  patients who have been treated so far,

NOTE Confidence: 0.81361711

 $00:17:47.100 \longrightarrow 00:17:49.500$  a good number of them if you see

NOTE Confidence: 0.81361711

 $00:17:49.500 \longrightarrow 00:17:52.179$  her in red have actually relapsed

NOTE Confidence: 0.81361711

 $00:17:52.180 \longrightarrow 00:17:56.944$  and so the durability of responses

NOTE Confidence: 0.81361711

 $00:17:56.944 \longrightarrow 00:18:00.120$  is still questionable and.

NOTE Confidence: 0.81361711

00:18:00.120 --> 00:18:01.206 You know,

NOTE Confidence: 0.81361711

00:18:01.206 --> 00:18:05.007 it has investors pretty much really worried.

NOTE Confidence: 0.81361711

00:18:05.010 --> 00:18:07.224 You know about how this product

NOTE Confidence: 0.81361711

 $00{:}18{:}07.224 \dashrightarrow 00{:}18{:}10.069$  is going to do in the long run.

NOTE Confidence: 0.81361711

 $00{:}18{:}10.070 \longrightarrow 00{:}18{:}12.177$  But again we just need to to

NOTE Confidence: 0.81361711

00:18:12.177 --> 00:18:14.294 see what's gonna happen to these

NOTE Confidence: 0.81361711

 $00:18:14.294 \longrightarrow 00:18:16.580$  patients who are getting the higher

NOTE Confidence: 0.81361711

 $00:18:16.580 \longrightarrow 00:18:18.508$  doses with longer follow up.

NOTE Confidence: 0.81361711

 $00:18:18.510 \longrightarrow 00:18:21.926$  And you can see that the patients here

00:18:21.926 --> 00:18:24.349 highlighted in yellow are patients

NOTE Confidence: 0.81361711

 $00{:}18{:}24.349 \dashrightarrow 00{:}18{:}27.307$  who all had prior cortisol therapy,

NOTE Confidence: 0.81361711

 $00:18:27.310 \longrightarrow 00:18:29.690$  anti CD19 cortisol therapy

NOTE Confidence: 0.81361711

 $00:18:29.690 \longrightarrow 00:18:32.665$  and they all have achieved

NOTE Confidence: 0.90459693375

 $00:18:32.670 \longrightarrow 00:18:35.076$  complete remission and.

NOTE Confidence: 0.90459693375

 $00:18:35.076 \longrightarrow 00:18:39.086$  Some of them are still.

NOTE Confidence: 0.90459693375

 $00:18:39.090 \longrightarrow 00:18:42.120$  Responding to treatment.

NOTE Confidence: 0.90459693375

 $00:18:42.120 \longrightarrow 00:18:45.400$  So I'm not going to spend a lot of time here,

NOTE Confidence: 0.90459693375

 $00{:}18{:}45.400 \dashrightarrow 00{:}18{:}48.193$  but just to shift gears to bring

NOTE Confidence: 0.90459693375

 $00{:}18{:}48.193 \dashrightarrow 00{:}18{:}50.691$  your attention that car T cell

NOTE Confidence: 0.90459693375

 $00{:}18{:}50.691 \dashrightarrow 00{:}18{:}52.726$  the rapy is also approved for

NOTE Confidence: 0.90459693375

 $00:18:52.726 \longrightarrow 00:18:54.650$  patients with follicular lymphoma.

NOTE Confidence: 0.90459693375

 $00:18:54.650 \longrightarrow 00:18:57.980$  In the third line setting and

NOTE Confidence: 0.90459693375

 $00:18:57.980 \longrightarrow 00:19:00.826$  this is based on two trials,

NOTE Confidence: 0.90459693375

00:19:00.826 --> 00:19:04.228 Zuma five with the access cell and

 $00:19:04.228 \dashrightarrow 00:19:07.220$  Elara with the TISAGENLECLEUCEL.

NOTE Confidence: 0.90459693375

 $00:19:07.220 \longrightarrow 00:19:09.075$  So this was the Zuma 5 update

NOTE Confidence: 0.90459693375

 $00:19:09.075 \longrightarrow 00:19:10.919$  with a 3 year survival.

NOTE Confidence: 0.90459693375

 $00:19:10.920 \longrightarrow 00:19:13.614$  You can see here that the

NOTE Confidence: 0.90459693375

00:19:13.614 --> 00:19:16.076 overall response rates and the

NOTE Confidence: 0.90459693375

 $00:19:16.076 \longrightarrow 00:19:18.360$  complete response rates with.

NOTE Confidence: 0.90459693375

00:19:18.360 --> 00:19:20.754 Car T cell therapy are very high

NOTE Confidence: 0.90459693375

 $00:19:20.754 \longrightarrow 00:19:23.785$  in the third line setting in both

NOTE Confidence: 0.90459693375

 $00{:}19{:}23.785 \dashrightarrow 00{:}19{:}26.185$  patients with follicular lymphoma and

NOTE Confidence: 0.90459693375

 $00:19:26.185 \longrightarrow 00:19:29.367$  also in patients with marginal zone

NOTE Confidence: 0.90459693375

 $00:19:29.367 \longrightarrow 00:19:31.992$  lymphoma and progression free survival

NOTE Confidence: 0.90459693375

 $00:19:32.000 \longrightarrow 00:19:34.946$  is very good and overall survival

NOTE Confidence: 0.90459693375

 $00:19:34.946 \longrightarrow 00:19:38.489$  is very good for these patients.

NOTE Confidence: 0.90459693375

 $00{:}19{:}38.490 \dashrightarrow 00{:}19{:}41.250$  With relatively long term follow-up,

NOTE Confidence: 0.90459693375

00:19:41.250 --> 00:19:43.626 because in the third line setting,

NOTE Confidence: 0.90459693375

 $00{:}19{:}43.630 \dashrightarrow 00{:}19{:}46.310$  typically what we would expect

 $00:19:46.310 \longrightarrow 00:19:48.970$  from a third line therapy is a

NOTE Confidence: 0.90459693375

 $00:19:48.970 \longrightarrow 00:19:51.179$  shorter duration of response that

NOTE Confidence: 0.90459693375

 $00:19:51.179 \longrightarrow 00:19:53.402$  is typically less than two years

NOTE Confidence: 0.90459693375

 $00:19:53.402 \longrightarrow 00:19:55.250$  and sometimes less than one year

NOTE Confidence: 0.90459693375

00:19:55.318 --> 00:19:57.098 depending on the product used.

NOTE Confidence: 0.90459693375

 $00:19:57.100 \longrightarrow 00:19:59.404$  But here you can see that the median

NOTE Confidence: 0.90459693375

00:19:59.404 --> 00:20:01.291 PFS for follicular lymphoma was

NOTE Confidence: 0.90459693375

00:20:01.291 --> 00:20:03.769 fourteen months and was not reached

NOTE Confidence: 0.90459693375

 $00:20:03.769 \longrightarrow 00:20:05.890$  for a marginal zone lymphoma.

NOTE Confidence: 0.764501193846154

00:20:08.460 --> 00:20:12.892 Umm. And then uh, similar data from the

NOTE Confidence: 0.764501193846154

00:20:12.892 --> 00:20:17.148 Elara study looking at Tisagenlecleucel,

NOTE Confidence: 0.764501193846154

 $00:20:17.150 \longrightarrow 00:20:20:214$  so also targeting CD19, but if with a

NOTE Confidence: 0.764501193846154

 $00:20:20:214 \longrightarrow 00:20:22.673$  different Co stimulatory molecule that

NOTE Confidence: 0.764501193846154

00:20:22.673 --> 00:20:29.104 is 41B with over two years of follow-up,

NOTE Confidence: 0.764501193846154

 $00:20:29.110 \longrightarrow 00:20:31.480$  patients who achieved complete response

00:20:31.480 --> 00:20:34.844 represented here in the top curve have

NOTE Confidence: 0.764501193846154

 $00:20:34.844 \longrightarrow 00:20:37.144$  not reached their median progression

NOTE Confidence: 0.764501193846154

 $00:20:37.144 \longrightarrow 00:20:39.729$  free survival and the anticipated.

NOTE Confidence: 0.764501193846154

 $00:20:39.730 \longrightarrow 00:20:41.645$  For all two year progression

NOTE Confidence: 0.764501193846154

 $00:20:41.645 \longrightarrow 00:20:43.732$  free survival is about 60%.

NOTE Confidence: 0.764501193846154

 $00:20:43.732 \longrightarrow 00:20:45.388$  Umm. So umm.

NOTE Confidence: 0.764501193846154

 $00:20:45.388 \longrightarrow 00:20:48.148$  There was also this additional

NOTE Confidence: 0.764501193846154

 $00:20:48.148 \longrightarrow 00:20:50.347$  presentation that compared access

NOTE Confidence: 0.764501193846154

00:20:50.347 --> 00:20:53.959 cell to other third line standard of

NOTE Confidence: 0.764501193846154

 $00:20:54.056 \longrightarrow 00:20:57.226$  care therapies for relapse refractory

NOTE Confidence: 0.764501193846154

 $00{:}20{:}57.226 \to 00{:}21{:}00.396$  follicular lymphoma and this was

NOTE Confidence: 0.764501193846154

 $00:21:00.400 \longrightarrow 00:21:04.550$  retrospective in nature but compared

NOTE Confidence: 0.764501193846154

 $00:21:04.550 \longrightarrow 00:21:08.270$  to scholar five study that does

NOTE Confidence: 0.764501193846154

 $00:21:08.270 \longrightarrow 00:21:11.160$  show a substantial improvement with

NOTE Confidence: 0.764501193846154

 $00:21:11.254 \longrightarrow 00:21:14.560$  axicom tagen with with the cellular

NOTE Confidence: 0.764501193846154

 $00:21:14.560 \longrightarrow 00:21:17.850$  therapy compared to other third line.

 $00:21:17.850 \longrightarrow 00:21:20.360$  Therapies.

NOTE Confidence: 0.764501193846154

00:21:20.360 --> 00:21:21.436 But again,

NOTE Confidence: 0.764501193846154

00:21:21.436 --> 00:21:24.664 it's not a randomized study and

NOTE Confidence: 0.764501193846154

 $00:21:24.664 \longrightarrow 00:21:26.120$  it's different to.

NOTE Confidence: 0.764501193846154

 $00:21:26.120 \longrightarrow 00:21:28.395$  There may be differences in

NOTE Confidence: 0.764501193846154

 $00:21:28.395 \longrightarrow 00:21:30.215$  baseline characteristics that do

NOTE Confidence: 0.764501193846154

00:21:30.215 --> 00:21:32.318 restrict cross study comparisons,

NOTE Confidence: 0.764501193846154

 $00{:}21{:}32.320 \dashrightarrow 00{:}21{:}34.816$  but this is what the progression

NOTE Confidence: 0.764501193846154

 $00:21:34.816 \longrightarrow 00:21:37.314$  free overall survival and time to

NOTE Confidence: 0.764501193846154

 $00:21:37.314 \longrightarrow 00:21:39.974$  next treatment look like in blue for

NOTE Confidence: 0.764501193846154

00:21:39.974 --> 00:21:41.921 patients who had cortisol therapy

NOTE Confidence: 0.764501193846154

 $00:21:41.921 \longrightarrow 00:21:44.615$  versus at the bottom in red for

NOTE Confidence: 0.764501193846154

 $00{:}21{:}44.615 \dashrightarrow 00{:}21{:}47.800$  patients who have who would have had

NOTE Confidence: 0.764501193846154

 $00:21:47.800 \longrightarrow 00:21:51.610$  other third line standard of care therapies.

NOTE Confidence: 0.764501193846154

 $00:21:51.610 \longrightarrow 00:21:54.666$  And this was published recently in in blood.

00:21:54.670 --> 00:21:58.222 And then I I want to also bring

NOTE Confidence: 0.764501193846154

 $00{:}21{:}58.222 \dashrightarrow 00{:}22{:}00.501$  attention to the study published

NOTE Confidence: 0.764501193846154

 $00:22:00.501 \longrightarrow 00:22:03.469$  by by our very own group led by

NOTE Confidence: 0.764501193846154

00:22:03.469 --> 00:22:06.104 Kunal under the mentorship of

NOTE Confidence: 0.764501193846154

00:22:06.104 --> 00:22:08.829 Scott Huntington where the cost

NOTE Confidence: 0.764501193846154

00:22:08.829 --> 00:22:11.392 effectiveness of car T cell therapy

NOTE Confidence: 0.764501193846154

 $00:22:11.392 \longrightarrow 00:22:14.512$  was compared in a dults with relapsed

NOTE Confidence: 0.764501193846154

 $00:22:14.512 \longrightarrow 00:22:19.240$  refractory follicular lymphoma and.

NOTE Confidence: 0.764501193846154

 $00:22:19.240 \longrightarrow 00:22:22.236$  The cost of core T cell therapy

NOTE Confidence: 0.764501193846154

 $00:22:22.236 \longrightarrow 00:22:26.160$  is about \$730,000 as opposed to

NOTE Confidence: 0.764501193846154

00:22:26.160 --> 00:22:28.764 \$450,000 for the standard of care

NOTE Confidence: 0.764501193846154

 $00:22:28.764 \longrightarrow 00:22:31.656$  with an eyesore of about 80,000

NOTE Confidence: 0.764501193846154

00:22:31.656 --> 00:22:34.336 for quality adjusted life years.

NOTE Confidence: 0.764501193846154

 $00:22:34.340 \longrightarrow 00:22:36.730$  But I think considering the.

NOTE Confidence: 0.8257596575

 $00:22:38.780 \longrightarrow 00:22:41.138$  Risks associated with car T cell

NOTE Confidence: 0.8257596575

 $00{:}22{:}41.138 \dashrightarrow 00{:}22{:}44.048$  the rapy in terms of cytokine release

00:22:44.048 --> 00:22:46.568 syndrome and neurologic toxicity.

NOTE Confidence: 0.839117332222222

 $00{:}22{:}48.700 \dashrightarrow 00{:}22{:}52.795$  We need to do a better job and have

NOTE Confidence: 0.839117332222222

 $00:22:52.800 \longrightarrow 00:22:55.182$  a longer follow-up and and randomized

NOTE Confidence: 0.839117332222222

 $00:22:55.182 \longrightarrow 00:22:57.519$  comparisons to other lines of therapy.

NOTE Confidence: 0.839117332222222

 $00:22:57.520 \longrightarrow 00:23:00.604$  So that we subject these patients

NOTE Confidence: 0.839117332222222

 $00:23:00.604 \longrightarrow 00:23:03.934$  to who have the majority of them

NOTE Confidence: 0.839117332222222

 $00:23:03.934 \longrightarrow 00:23:06.312$  have long progression free survival

NOTE Confidence: 0.839117332222222

 $00{:}23{:}06.312 \dashrightarrow 00{:}23{:}09.189$  so that we subject them to minimal

NOTE Confidence: 0.839117332222222

 $00:23:09.189 \longrightarrow 00:23:12.360$  as as minimal toxicity as we can.

NOTE Confidence: 0.839117332222222

 $00{:}23{:}12.360 \dashrightarrow 00{:}23{:}15.104$  And particularly now we have a new

NOTE Confidence: 0.839117332222222

00:23:15.104 --> 00:23:16.730 bispecific antibody approved for

NOTE Confidence: 0.839117332222222

 $00:23:16.730 \longrightarrow 00:23:18.650$  follicular lymphoma which is not.

NOTE Confidence: 0.839117332222222

 $00:23:18.650 \longrightarrow 00:23:21.538$  A part of these?

NOTE Confidence: 0.839117332222222

 $00:23:21.540 \longrightarrow 00:23:24.868$  Cost effectiveness comparison here,

NOTE Confidence: 0.839117332222222

 $00:23:24.868 \longrightarrow 00:23:27.919$  but I think that's also going to play

 $00:23:27.919 \longrightarrow 00:23:30.966$  a role and we need to see how in the

NOTE Confidence: 0.839117332222222

 $00{:}23{:}30.966 \dashrightarrow 00{:}23{:}33.642$  long run we're going to best sequence

NOTE Confidence: 0.839117332222222

 $00:23:33.642 \longrightarrow 00:23:35.807$  these therepies based on.

NOTE Confidence: 0.877115921428571

 $00:23:38.250 \longrightarrow 00:23:40.140$  The the way of administration

NOTE Confidence: 0.877115921428571

 $00:23:40.140 \longrightarrow 00:23:42.030$  you know multiple times versus

NOTE Confidence: 0.877115921428571

00:23:42.102 --> 00:23:43.870 one time patient preference,

NOTE Confidence: 0.877115921428571

 $00:23:43.870 \longrightarrow 00:23:47.262$  toxicities and cost effectiveness.

NOTE Confidence: 0.877115921428571

 $00:23:47.262 \longrightarrow 00:23:50.360$  So um. I'm going to switch gears

NOTE Confidence: 0.877115921428571

 $00{:}23{:}50.360 \dashrightarrow 00{:}23{:}51.760$  now to mantle cell lymphoma.

NOTE Confidence: 0.877115921428571

 $00:23:51.760 \longrightarrow 00:23:55.440$  This is abstract 623 which is phase

NOTE Confidence: 0.877115921428571

 $00{:}23{:}55.440 \dashrightarrow 00{:}23{:}58.747$  one to two two study of a tandem

NOTE Confidence: 0.877115921428571

 $00:23:58.747 \longrightarrow 00:24:01.901$  by specific anti CD20, anti CD 19.

NOTE Confidence: 0.877115921428571

 $00:24:01.901 \longrightarrow 00:24:04.463$  We do have a product that's

NOTE Confidence: 0.877115921428571

00:24:04.463 --> 00:24:07.065 Brexit prapta gene that's already

NOTE Confidence: 0.877115921428571

 $00:24:07.065 \longrightarrow 00:24:10.650$  approved but it is very toxic and.

NOTE Confidence: 0.83040595

 $00:24:13.070 \longrightarrow 00:24:16.566$  There are. There's the hypothesis

 $00:24:16.566 \longrightarrow 00:24:20.178$  of this study was that if we use a

NOTE Confidence: 0.83040595

00:24:20.178 --> 00:24:22.046 bispecific tandem targeting product

NOTE Confidence: 0.83040595

00:24:22.046 --> 00:24:26.930 targeting both City 20 and city 19 with.

NOTE Confidence: 0.83040595

 $00:24:26.930 \longrightarrow 00:24:29.036$  Expansion with the I7 and I-15

NOTE Confidence: 0.83040595

 $00:24:29.036 \longrightarrow 00:24:31.482$  that we might get less exhausted

NOTE Confidence: 0.83040595

00:24:31.482 --> 00:24:33.887 car products with more durable,

NOTE Confidence: 0.83040595

 $00:24:33.890 \longrightarrow 00:24:36.570$  even more durable clinical activity.

NOTE Confidence: 0.83040595

 $00:24:36.570 \longrightarrow 00:24:42.538$  And this product actually is manufactured

NOTE Confidence: 0.83040595

00:24:42.538 --> 00:24:44.886 using climax prodigy device.

NOTE Confidence: 0.83040595

00:24:44.890 --> 00:24:47.098 It's a fresh infusion and the

NOTE Confidence: 0.83040595

 $00:24:47.098 \longrightarrow 00:24:49.030$  manufacturing time is quite short,

NOTE Confidence: 0.83040595

 $00:24:49.030 \longrightarrow 00:24:51.606$  is somewhere between 8:00 and 12 days.

NOTE Confidence: 0.83040595

 $00:24:51.610 \longrightarrow 00:24:54.760$  So for patients with rapidly

NOTE Confidence: 0.83040595

 $00:24:54.760 \longrightarrow 00:24:57.280$  progressive mantle cell lymphoma.

NOTE Confidence: 0.83040595

 $00:24:57.280 \longrightarrow 00:25:00.232$  It's a great product to have that we

 $00:25:00.232 \longrightarrow 00:25:03.269$  can infuse rapidly and you can see here

NOTE Confidence: 0.83040595

 $00{:}25{:}03.269 \dashrightarrow 00{:}25{:}06.226$  that the manufacturing rate was very high,

NOTE Confidence: 0.83040595

 $00:25:06.230 \longrightarrow 00:25:09.200$  100% with its closed system.

NOTE Confidence: 0.83040595

 $00:25:09.200 \longrightarrow 00:25:12.455$  There were no Grade 3 cytokine release

NOTE Confidence: 0.83040595

 $00:25:12.460 \longrightarrow 00:25:14.882$  syndrome cases and there was only one

NOTE Confidence: 0.83040595

 $00:25:14.882 \longrightarrow 00:25:16.918$  patient with grade three eye cans.

NOTE Confidence: 0.83040595

 $00:25:16.920 \longrightarrow 00:25:18.540$  They were patients that had

NOTE Confidence: 0.83040595

 $00:25:18.540 \longrightarrow 00:25:20.780$  at least 4 lines of therapy.

NOTE Confidence: 0.83040595

 $00{:}25{:}20.780 \dashrightarrow 00{:}25{:}22.640$  They were all exposed to BTK

NOTE Confidence: 0.83040595

 $00:25:22.640 \longrightarrow 00:25:24.989$  inhibitors and you can look at a

NOTE Confidence: 0.83040595

 $00:25:24.989 \longrightarrow 00:25:26.734$  long term progression free survival.

NOTE Confidence: 0.83040595

 $00:25:26.740 \longrightarrow 00:25:29.365$  Looks excellent and and the we already

NOTE Confidence: 0.83040595

 $00:25:29.365 \longrightarrow 00:25:31.975$  have the diffuse large B cell lymphoma

NOTE Confidence: 0.83040595

 $00{:}25{:}31.975 \dashrightarrow 00{:}25{:}34.886$ study but we're gonna go ahead and open

NOTE Confidence: 0.83040595

 $00:25:34.886 \longrightarrow 00:25:37.378$  this for mantle cell lymphoma at Yale.

NOTE Confidence: 0.83040595

00:25:37.380 --> 00:25:38.490 And then finally,

00:25:38.490 --> 00:25:41.742 I'm going to switch gears to talk a little

NOTE Confidence: 0.83040595

 $00:25:41.742 \longrightarrow 00:25:44.382$  bit about T cell and B cell leukemia.

NOTE Confidence: 0.83040595

 $00:25:44.382 \longrightarrow 00:25:49.198$  So this was published in blood this year.

NOTE Confidence: 0.83040595

 $00:25:49.200 \longrightarrow 00:25:51.042$  As we know,

NOTE Confidence: 0.83040595

 $00{:}25{:}51.042 \dashrightarrow 00{:}25{:}55.066$  finding a target for T cell lymphomas

NOTE Confidence: 0.83040595

 $00:25:55.066 \longrightarrow 00:25:57.676$  and leukemias has been challenging.

NOTE Confidence: 0.83040595

00:25:57.680 --> 00:26:00.976 City 7 is a very commonly expressed antigen,

NOTE Confidence: 0.83040595

 $00:26:00.980 \longrightarrow 00:26:04.553$  but it is expressed in the T cells and

NOTE Confidence: 0.83040595

 $00{:}26{:}04.553 \dashrightarrow 00{:}26{:}07.912$  there is concern that there's going to be.

NOTE Confidence: 0.83040595

 $00:26:07.912 \longrightarrow 00:26:10.757$  Fratricide the way this is a Chinese

NOTE Confidence: 0.83040595

00:26:10.757 --> 00:26:13.227 group that they actually developed

NOTE Confidence: 0.83040595

 $00:26:13.227 \longrightarrow 00:26:16.767$  a novel methyl method of CD7 antigen

NOTE Confidence: 0.83040595

 $00{:}26{:}16.767 \dashrightarrow 00{:}26{:}19.731$  masking that makes the cells fratricide

NOTE Confidence: 0.83040595

 $00:26:19.731 \longrightarrow 00:26:23.865$  resistant and this was their initial

NOTE Confidence: 0.83040595

00:26:23.865 --> 00:26:27.616 study was published earlier of these

 $00:26:27.616 \longrightarrow 00:26:30.748$  naturally selected core T cells without

NOTE Confidence: 0.83040595

 $00{:}26{:}30.748 \dashrightarrow 00{:}26{:}34.040$  genetic modification and then abstract

NOTE Confidence: 0.83040595

 $00:26:34.040 \longrightarrow 00:26:37.410$  980 looked at 53 patients that had.

NOTE Confidence: 0.83040595

 $00:26:37.410 \longrightarrow 00:26:40.945$  Relapse refractory T cell all or T cell

NOTE Confidence: 0.83040595

 $00:26:40.945 \longrightarrow 00:26:42.881$  lymphoblastic lymphoma treated with

NOTE Confidence: 0.83040595

 $00:26:42.881 \longrightarrow 00:26:46.792$  this therapy you can see they were very

NOTE Confidence: 0.83040595

 $00:26:46.792 \longrightarrow 00:26:49.276$  heavily pretreated group of patients

NOTE Confidence: 0.83040595

 $00:26:49.276 \longrightarrow 00:26:53.394$  about half of them had more than 5%

NOTE Confidence: 0.83040595

 $00{:}26{:}53.394 \dashrightarrow 00{:}26{:}57.132$  and blast and their mayoral some of

NOTE Confidence: 0.83040595

 $00:26:57.132 \longrightarrow 00:27:01.950$  them had extramedullary disease even and.

NOTE Confidence: 0.83040595

 $00:27:01.950 \longrightarrow 00:27:03.830$  They had.

NOTE Confidence: 0.83040595

 $00:27:03.830 \longrightarrow 00:27:06.994$  Very decent overall end event free survival

NOTE Confidence: 0.83040595

 $00:27:06.994 \longrightarrow 00:27:09.889$  in this relapse refractory setting.

NOTE Confidence: 0.83040595

 $00{:}27{:}09.890 \dashrightarrow 00{:}27{:}13.446$  So the median follow-up is pretty long,

NOTE Confidence: 0.83040595

 $00:27:13.450 \longrightarrow 00:27:14.246$  206 days.

NOTE Confidence: 0.83040595

 $00:27:14.246 \longrightarrow 00:27:16.634$  Some of the data is here.

 $00:27:16.640 \longrightarrow 00:27:19.664$  I'm not going to go into it in detail,

NOTE Confidence: 0.83040595

 $00:27:19.670 \longrightarrow 00:27:24.966$  but suffice it to say that the

NOTE Confidence: 0.83040595

 $00:27:24.966 \longrightarrow 00:27:29.096$  18 month overall survival 75% and

NOTE Confidence: 0.83040595

 $00:27:29.096 \longrightarrow 00:27:31.998$  event free survival of 53% and.

NOTE Confidence: 0.83040595

 $00{:}27{:}31.998 \dashrightarrow 00{:}27{:}35.502$  Some patients were bridged to an

NOTE Confidence: 0.83040595

00:27:35.502 --> 00:27:38.419 allogeneic stem cell transplant,

NOTE Confidence: 0.83040595

 $00:27:38.420 \longrightarrow 00:27:41.516$  but many patients were not and

NOTE Confidence: 0.83040595

 $00{:}27{:}41.516 \dashrightarrow 00{:}27{:}45.236$  and the ones that achieved CR were

NOTE Confidence: 0.83040595

 $00:27:45.236 \longrightarrow 00:27:47.996$  able to maintain the CR.

NOTE Confidence: 0.83040595

 $00{:}27{:}48.000 \dashrightarrow 00{:}27{:}52.266$  So umm, this was highly effective.

NOTE Confidence: 0.83040595

 $00{:}27{:}52.270 \dashrightarrow 00{:}27{:}54.730$  They including in patients with

NOTE Confidence: 0.83040595

 $00:27:54.730 \longrightarrow 00:27:56.698$  extramedullary involvement or patients

NOTE Confidence: 0.83040595

 $00:27:56.698 \longrightarrow 00:28:00.350$  with have prior cart and they did

NOTE Confidence: 0.83040595

 $00:28:00.350 \longrightarrow 00:28:04.410$  identify a patients with the SIL

NOTE Confidence: 0.83040595

 $00:28:04.410 \longrightarrow 00:28:07.770$  tile one having a Porter response

 $00:28:07.770 \longrightarrow 00:28:11.149$  and early relapses and when relapses

NOTE Confidence: 0.83040595

00:28:11.149 --> 00:28:14.329 occur occurred they did see loss

NOTE Confidence: 0.83040595

 $00:28:14.329 \longrightarrow 00:28:16.770$  of city 7 expression.

NOTE Confidence: 0.83040595

00:28:16.770 --> 00:28:20.094 Now the Stephan Grupp group at

NOTE Confidence: 0.83040595

00:28:20.094 --> 00:28:22.310 Penn presented this abstract

NOTE Confidence: 0.762712658

 $00{:}28{:}22.405 \dashrightarrow 00{:}28{:}26.017$  of City 22 targeted cartes in children

NOTE Confidence: 0.762712658

 $00:28:26.017 \longrightarrow 00:28:29.358$  and young adults after having relapsed

NOTE Confidence: 0.762712658

00:28:29.358 --> 00:28:34.834 post city 19 car T cell therapy for ALS

NOTE Confidence: 0.762712658

 $00{:}28{:}34.834 \dashrightarrow 00{:}28{:}38.902$  and they enrolled 19 patients that had

NOTE Confidence: 0.762712658

00:28:38.902 --> 00:28:41.086 a product successfully manufactured.

NOTE Confidence: 0.762712658

 $00{:}28{:}41.090 \dashrightarrow 00{:}28{:}42.782$  17 patients were infused.

NOTE Confidence: 0.762712658

 $00:28:42.782 \longrightarrow 00:28:45.320$  All of them had sitting negative

NOTE Confidence: 0.762712658

 $00:28:45.400 \longrightarrow 00:28:47.300$  disease that had relapsed.

NOTE Confidence: 0.762712658

00:28:47.300 --> 00:28:50.724 Postcard T and some of them had received

NOTE Confidence: 0.762712658

 $00:28:50.724 \longrightarrow 00:28:53.057$  blinatumomab and inotuzumab and nine

NOTE Confidence: 0.762712658

 $00:28:53.057 \longrightarrow 00:28:55.853$  had had a prior transplant including

 $00:28:55.853 \longrightarrow 00:28:58.799$  three with multiple prior transplants.

NOTE Confidence: 0.762712658

 $00:28:58.800 \longrightarrow 00:29:02.076$  They the bone marrow blasts pre infusion

NOTE Confidence: 0.762712658

 $00:29:02.076 \longrightarrow 00:29:05.624$  were high and you can see here that the

NOTE Confidence: 0.762712658

00:29:05.624 --> 00:29:07.985 probability of survival for this group

NOTE Confidence: 0.762712658

 $00:29:07.985 \longrightarrow 00:29:12.140$  of patients getting city 22 therapy.

NOTE Confidence: 0.762712658

00:29:12.140 --> 00:29:18.160 Is is pretty good the 18 month?

NOTE Confidence: 0.762712658

00:29:18.160 --> 00:29:20.831 Uh, overall survival,

NOTE Confidence: 0.762712658

00:29:20.831 --> 00:29:23.837 actually they have been even longer

NOTE Confidence: 0.762712658

 $00:29:23.837 \longrightarrow 00:29:28.060$  follow-up for this study, but.

NOTE Confidence: 0.762712658

 $00:29:28.060 \longrightarrow 00:29:31.420$  You can see here that the

NOTE Confidence: 0.762712658

00:29:31.420 --> 00:29:33.100 probability of survival.

NOTE Confidence: 0.762712658

 $00:29:33.100 \longrightarrow 00:29:38.530$  At 18 month at 18 month Mark is still

NOTE Confidence: 0.762712658

 $00{:}29{:}38.530 \dashrightarrow 00{:}29{:}42.055$  relatively decent for patients who

NOTE Confidence: 0.762712658

 $00:29:42.055 \longrightarrow 00:29:44.860$  otherwise most of them as you all

NOTE Confidence: 0.762712658

00:29:44.860 --> 00:29:47.315 know would have very poor outcomes

 $00:29:47.315 \longrightarrow 00:29:50.237$  and would succumb to their disease.

NOTE Confidence: 0.762712658

 $00:29:50.240 \longrightarrow 00:29:55.168$  So now they have almost 30 months of

NOTE Confidence: 0.762712658

 $00{:}29{:}55.168 \dashrightarrow 00{:}29{:}58.332$  follow-up and the median relapse free

NOTE Confidence: 0.762712658

 $00:29:58.332 \longrightarrow 00:30:01.230$  survival is about five months and

NOTE Confidence: 0.762712658

 $00:30:01.324 \longrightarrow 00:30:04.378$  overall survival is about 16 months.

NOTE Confidence: 0.762712658

 $00:30:04.380 \longrightarrow 00:30:07.579$  So there were two patients that also

NOTE Confidence: 0.762712658

 $00:30:07.579 \longrightarrow 00:30:10.931$  worried treated with this for city 22

NOTE Confidence: 0.762712658

 $00:30:10.931 \longrightarrow 00:30:13.296$  relapse disease after initial infusion

NOTE Confidence: 0.762712658

 $00{:}30{:}13.296 \dashrightarrow 00{:}30{:}16.910$  and one of them went into remission again.

NOTE Confidence: 0.762712658

 $00:30:16.910 \longrightarrow 00:30:20.206$  So there is a possibility of of retreating

NOTE Confidence: 0.762712658

 $00:30:20.206 \dashrightarrow 00:30:24.190$  these patients and all of that data is here.

NOTE Confidence: 0.762712658

00:30:24.190 --> 00:30:27.690 But I just want to emphasize that we can

NOTE Confidence: 0.762712658

 $00:30:27.690 \longrightarrow 00:30:30.986$  salvage a portion of patients who fail CD 19.

NOTE Confidence: 0.762712658

 $00:30:30.990 \longrightarrow 00:30:34.230$  You can see here 77% achieva.

NOTE Confidence: 0.762712658

 $00:30:34.230 \longrightarrow 00:30:38.850$  CR and including undetectable MRD by flow.

NOTE Confidence: 0.762712658 00:30:38.850 --> 00:30:40.540 Um.

 $00:30:40.540 \longrightarrow 00:30:42.691$  So you know,

NOTE Confidence: 0.762712658

 $00:30:42.691 \longrightarrow 00:30:46.993$  they do develop toxicity and particularly.

NOTE Confidence: 0.762712658

 $00:30:47.000 \longrightarrow 00:30:50.164$  The risk of infections in is extremely

NOTE Confidence: 0.762712658

00:30:50.164 --> 00:30:52.400 high and cytopenias after back-to-back

NOTE Confidence: 0.762712658

 $00:30:52.400 \longrightarrow 00:30:54.450$  Carter cell therapies like this.

NOTE Confidence: 0.762712658

 $00:30:54.450 \longrightarrow 00:30:57.765$  So they had successful manufacturing

NOTE Confidence: 0.762712658

00:30:57.765 --> 00:31:01.718 again with an autologous product and

NOTE Confidence: 0.762712658

 $00:31:01.718 \longrightarrow 00:31:04.946$  there were high initial response rates

NOTE Confidence: 0.762712658

 $00:31:04.946 \longrightarrow 00:31:08.293$  but there are later recurrences and

NOTE Confidence: 0.762712658

 $00:31:08.293 \dashrightarrow 00:31:11.670$  I think what was being looked at now

NOTE Confidence: 0.762712658

 $00:31:11.670 \longrightarrow 00:31:14.731$  is how to combine City 19 and City 22

NOTE Confidence: 0.762712658

 $00:31:14.731 \longrightarrow 00:31:17.280$  to to decrease the risk of relapse.

NOTE Confidence: 0.762712658

00:31:17.280 --> 00:31:18.042 I'm not gonna.

NOTE Confidence: 0.762712658

 $00:31:18.042 \longrightarrow 00:31:19.820$  I know we're running out of time,

NOTE Confidence: 0.762712658

 $00:31:19.820 \longrightarrow 00:31:22.396$  so I'm not going to spend too

00:31:22.396 --> 00:31:25.688 much time on on this abstract,

NOTE Confidence: 0.762712658

00:31:25.688 --> 00:31:28.236 but it did compare.

NOTE Confidence: 0.762712658

00:31:28.240 --> 00:31:30.760 Car T cell therapy in both patients

NOTE Confidence: 0.762712658

 $00:31:30.760 \longrightarrow 00:31:33.227$  who had received a blinatumomab and

NOTE Confidence: 0.762712658

 $00:31:33.227 \longrightarrow 00:31:35.849$  inotuzumab and patients who had not

NOTE Confidence: 0.762712658

 $00:31:35.849 \longrightarrow 00:31:38.641$  received blina or inotuzumab and this is

NOTE Confidence: 0.762712658

00:31:38.641 --> 00:31:41.718 in the adult population where they did

NOTE Confidence: 0.762712658

 $00:31:41.718 \longrightarrow 00:31:44.298$  this propensity score matching analysis.

NOTE Confidence: 0.762712658

00:31:44.300 --> 00:31:46.718 And what they actually find found

NOTE Confidence: 0.762712658

00:31:46.718 --> 00:31:49.673 is that the group that received car

NOTE Confidence: 0.762712658

 $00{:}31{:}49.673 \dashrightarrow 00{:}31{:}52.606$  T cell therapy with access cell had

NOTE Confidence: 0.762712658

 $00:31:52.690 \longrightarrow 00:31:55.460$  much higher complete response rates

NOTE Confidence: 0.762712658

00:31:55.460 --> 00:31:58.856 of 85% versus patients who had.

NOTE Confidence: 0.762712658

 $00:31:58.860 \longrightarrow 00:32:02.184$  Other standard of care approaches also

NOTE Confidence: 0.762712658

 $00:32:02.184 \longrightarrow 00:32:04.690$  predominantly chemotherapy of 35% with

NOTE Confidence: 0.762712658

 $00:32:04.690 \longrightarrow 00:32:07.210$  a median overall survival that was

 $00:32:07.210 \longrightarrow 00:32:10.906$  higher at 16 months versus about five months.

NOTE Confidence: 0.762712658

 $00:32:10.910 \dashrightarrow 00:32:14.006$  And this was true in both patients who

NOTE Confidence: 0.762712658

 $00:32:14.006 \longrightarrow 00:32:16.846$  were treated with blue 99-O2 zimat before,

NOTE Confidence: 0.762712658

00:32:16.846 --> 00:32:19.395 but also patients who were treatment

NOTE Confidence: 0.762712658

 $00:32:19.395 \longrightarrow 00:32:22.090$  naive that they both of those groups.

NOTE Confidence: 0.762712658

 $00:32:22.090 \longrightarrow 00:32:25.114$  For both of those groups we should consider

NOTE Confidence: 0.762712658

00:32:25.114 --> 00:32:28.119 car T because patients do respond.

NOTE Confidence: 0.844443311538462

 $00:32:28.120 \longrightarrow 00:32:31.249$  And and may have improved outcomes compared

NOTE Confidence: 0.844443311538462

 $00:32:31.249 \longrightarrow 00:32:34.059$  to other standard of care approaches.

NOTE Confidence: 0.844443311538462

 $00:32:34.060 \longrightarrow 00:32:36.685$  The the relapse phenotype is very important

NOTE Confidence: 0.844443311538462

 $00:32:36.685 \longrightarrow 00:32:39.558$  and it informs our therapeutic decisions.

NOTE Confidence: 0.844443311538462

 $00:32:39.560 \dashrightarrow 00:32:43.004$  So about 22% of patients will relapse

NOTE Confidence: 0.844443311538462

 $00:32:43.004 \longrightarrow 00:32:46.259$  with City 19 positive disease,

NOTE Confidence: 0.844443311538462

 $00{:}32{:}46.260 {\:{\circ}{\circ}{\circ}}>00{:}32{:}49.522$  about 15% with city 19 negative AL

NOTE Confidence: 0.844443311538462

 $00:32:49.522 \dashrightarrow 00:32:51.883$  and about 3% have lineage switched.

 $00:32:51.883 \longrightarrow 00:32:54.130$  And the group that has lineage switch

NOTE Confidence: 0.844443311538462

 $00:32:54.191 \longrightarrow 00:32:56.543$  actually is the group that has the poorest

NOTE Confidence: 0.844443311538462

 $00:32:56.543 \longrightarrow 00:32:58.318$  outcomes and they have quite poor.

NOTE Confidence: 0.844443311538462

 $00:32:58.320 \longrightarrow 00:33:02.058$  Outcomes, even with cartee cell therapy.

NOTE Confidence: 0.844443311538462

 $00:33:02.060 \longrightarrow 00:33:05.572$  And then post Cartee there is even more

NOTE Confidence: 0.844443311538462

 $00:33:05.572 \longrightarrow 00:33:07.819$  increasing complexity of the relapse

NOTE Confidence: 0.844443311538462

 $00:33:07.819 \longrightarrow 00:33:10.411$  immunophenotype and the most difficult of

NOTE Confidence: 0.844443311538462

00:33:10.411 --> 00:33:13.675 all group to to deal with is the group

NOTE Confidence: 0.844443311538462

 $00{:}33{:}13.675 \dashrightarrow 00{:}33{:}16.790$  that postcard team now have both city

NOTE Confidence: 0.844443311538462

00:33:16.790 --> 00:33:20.484 19 and CD20 negative AL and again the

NOTE Confidence: 0.844443311538462

 $00{:}33{:}20.484 \to 00{:}33{:}25.390$  patients with this lineage switch, So what?

NOTE Confidence: 0.844443311538462

 $00:33:25.390 \longrightarrow 00:33:29.287$  This is uh the the group from the

NOTE Confidence: 0.844443311538462

 $00:33:29.287 \longrightarrow 00:33:32.797$  NCI new Rally that published recently

NOTE Confidence: 0.844443311538462

 $00:33:32.797 \longrightarrow 00:33:35.786$  and also presented at ASH that patients

NOTE Confidence: 0.844443311538462

 $00:33:35.786 \longrightarrow 00:33:38.276$  who get blinatumomab prior to car

NOTE Confidence: 0.844443311538462

 $00:33:38.276 \longrightarrow 00:33:41.782$  T cell therapy and do not achieve a

 $00:33:41.782 \longrightarrow 00:33:44.503$  complete response to blinatumomab have

NOTE Confidence: 0.844443311538462

 $00{:}33{:}44.503 \dashrightarrow 00{:}33{:}47.701$  the have very poor outcomes postcard

NOTE Confidence: 0.844443311538462

00:33:47.701 --> 00:33:52.194 T and and that again having city 19

NOTE Confidence: 0.844443311538462

 $00:33:52.194 \longrightarrow 00:33:55.342$  damn disease pre Carty will influence.

NOTE Confidence: 0.844443311538462

 $00:33:55.342 \longrightarrow 00:33:58.078$  The postcard T cell relapse phenotype

NOTE Confidence: 0.844443311538462

 $00{:}33{:}58.078 \dashrightarrow 00{:}34{:}01.193$  that a lot of those patients will

NOTE Confidence: 0.844443311538462

00:34:01.193 --> 00:34:03.630 have city 19 negative disease at,

NOTE Confidence: 0.844443311538462

 $00:34:03.630 \longrightarrow 00:34:05.639$  at the time of relapse and they

NOTE Confidence: 0.844443311538462

 $00:34:05.639 \longrightarrow 00:34:07.749$  will also have very poor outcomes.

NOTE Confidence: 0.844443311538462

 $00{:}34{:}07.750 \dashrightarrow 00{:}34{:}10.423$  So it's very important in a L for us

NOTE Confidence: 0.844443311538462

 $00:34:10.423 \longrightarrow 00:34:13.347$  now to really break down the groups

NOTE Confidence: 0.844443311538462

 $00:34:13.347 \longrightarrow 00:34:15.911$  and follow these patients not just

NOTE Confidence: 0.844443311538462

 $00{:}34{:}15.911 \dashrightarrow 00{:}34{:}18.275$  with B cell a plasia but actually

NOTE Confidence: 0.844443311538462

 $00{:}34{:}18.275 \dashrightarrow 00{:}34{:}22.202$  follow them even more closely with

NOTE Confidence: 0.844443311538462

 $00:34:22.202 \longrightarrow 00:34:26.117$  MRD by NGS techniques because.

 $00:34:26.120 \longrightarrow 00:34:28.800$  Some patients.

NOTE Confidence: 0.844443311538462

 $00:34:28.800 \longrightarrow 00:34:31.176$  May still have some persistent B cells there,

NOTE Confidence: 0.844443311538462

 $00:34:31.180 \longrightarrow 00:34:33.210$  but still relapse early and we really

NOTE Confidence: 0.844443311538462

 $00:34:33.210 \longrightarrow 00:34:35.176$  need to move those patients toward

NOTE Confidence: 0.844443311538462

 $00:34:35.176 \longrightarrow 00:34:37.577$  clinical trials or or doing an urgent

NOTE Confidence: 0.844443311538462

00:34:37.638 --> 00:34:39.498 allogeneic stem cell transplant.

NOTE Confidence: 0.844443311538462

 $00{:}34{:}39.500 \dashrightarrow 00{:}34{:}41.866$  So I think that perhaps we'll leave

NOTE Confidence: 0.844443311538462

 $00:34:41.866 \longrightarrow 00:34:43.971$  questions at the end to allow

NOTE Confidence: 0.844443311538462

 $00:34:43.971 \longrightarrow 00:34:45.676$  also doctor Gowda to present.

NOTE Confidence: 0.844443311538462

 $00:34:45.680 \longrightarrow 00:34:47.588$  So I'm going to stop sharing.

NOTE Confidence: 0.8595013

 $00{:}34{:}50.700 \dashrightarrow 00{:}34{:}54.860$  All right. That was an awful

NOTE Confidence: 0.8595013

 $00:34:54.860 \longrightarrow 00:34:57.200$  lot of exciting information.

NOTE Confidence: 0.8595013

 $00:34:57.200 \longrightarrow 00:34:58.532$  There is one question

NOTE Confidence: 0.8595013

00:34:58.532 --> 00:35:00.298 in the Q&A doctor Soufi,

NOTE Confidence: 0.8595013

 $00:35:00.298 \longrightarrow 00:35:02.860$  maybe you can take a look while

NOTE Confidence: 0.8595013

 $00{:}35{:}02.940 \dashrightarrow 00{:}35{:}04.960$  Doctor Gowda is presenting.

 $00{:}35{:}04.960 \dashrightarrow 00{:}35{:}08.056$  So next is Doctor Lohith Gowda.

NOTE Confidence: 0.8595013

 $00:35:08.060 \longrightarrow 00:35:09.506$  He's assistant professor

NOTE Confidence: 0.8595013

 $00:35:09.506 \longrightarrow 00:35:11.434$  in the transplant room.

NOTE Confidence: 0.8595013

00:35:11.440 --> 00:35:13.186 Cell therapy program here at Yale,

NOTE Confidence: 0.8595013

00:35:13.190 --> 00:35:15.297 and he's going to go over some

NOTE Confidence: 0.8595013

00:35:15.297 --> 00:35:16.700 new and exciting transplant

NOTE Confidence: 0.8595013

 $00:35:16.700 \longrightarrow 00:35:18.840$  results from the ASH meeting.

NOTE Confidence: 0.80558455875

 $00:35:20.010 \longrightarrow 00:35:21.278$  Hello everyone and and

NOTE Confidence: 0.80558455875

00:35:21.278 --> 00:35:22.546 it's a Friday afternoon.

NOTE Confidence: 0.80558455875

00:35:22.550 --> 00:35:24.480 I promise I'll get you

NOTE Confidence: 0.80558455875

 $00{:}35{:}24.480 \dashrightarrow 00{:}35{:}26.940$  guys out for lunch in time.

NOTE Confidence: 0.80558455875

 $00:35:26.940 \longrightarrow 00:35:28.340$  No conflicts of interest.

NOTE Confidence: 0.80558455875

 $00{:}35{:}28.340 \dashrightarrow 00{:}35{:}30.440$  Here are my thoughts comments for

NOTE Confidence: 0.80558455875

00:35:30.506 --> 00:35:32.230 from the study investigators,

NOTE Confidence: 0.80558455875

 $00:35:32.230 \longrightarrow 00:35:34.600$  the study groups, and different

 $00:35:34.600 \longrightarrow 00:35:36.970$  individuals who shared their slides.

NOTE Confidence: 0.80558455875

 $00:35:36.970 \longrightarrow 00:35:39.560$  The main objective of today's talk is

NOTE Confidence: 0.80558455875

 $00:35:39.560 \longrightarrow 00:35:42.068$  largely club under three main headings.

NOTE Confidence: 0.80558455875

 $00:35:42.070 \longrightarrow 00:35:42.940$  Yeah, as we all know,

NOTE Confidence: 0.80558455875

 $00:35:42.940 \longrightarrow 00:35:44.053$  allergenic transplantation as

NOTE Confidence: 0.80558455875

 $00{:}35{:}44.053 \dashrightarrow 00{:}35{:}46.650$ a 70 year track record of cure,

NOTE Confidence: 0.80558455875

 $00:35:46.650 \longrightarrow 00:35:47.882$  but relapses do happen.

NOTE Confidence: 0.80558455875

00:35:47.882 --> 00:35:50.503 So I'm I'm going to present you some

NOTE Confidence: 0.80558455875

 $00{:}35{:}50.503 \dashrightarrow 00{:}35{:}52.639$  data about the role of preemptive

NOTE Confidence: 0.80558455875

 $00:35:52.639 \longrightarrow 00:35:54.080$  maintenance post transplant.

NOTE Confidence: 0.80558455875

 $00:35:54.080 \longrightarrow 00:35:55.580$  One of the Achilles heel of

NOTE Confidence: 0.80558455875

 $00:35:55.580 \longrightarrow 00:35:56.914$  alleged extract point has been

NOTE Confidence: 0.80558455875

00:35:56.914 --> 00:35:58.309 graph to source disease normally

NOTE Confidence: 0.80558455875

00:35:58.309 --> 00:35:59.900 would present under 2 headings,

NOTE Confidence: 0.80558455875

 $00:35:59.900 \longrightarrow 00:36:02.498$  acute and chronic graft resource disease.

NOTE Confidence: 0.80558455875

 $00{:}36{:}02.500 \dashrightarrow 00{:}36{:}03.442$  Based on the most recent data

 $00:36:03.442 \longrightarrow 00:36:04.380$  that I'm going to present,

NOTE Confidence: 0.80558455875

 $00:36:04.380 \dashrightarrow 00:36:05.885$ looks like you might have one drug

NOTE Confidence: 0.80558455875

 $00:36:05.885 \longrightarrow 00:36:07.476$  which is taking care of both of that.

NOTE Confidence: 0.80558455875

 $00:36:07.480 \longrightarrow 00:36:08.860$  So that's the phase three study

NOTE Confidence: 0.80558455875

 $00:36:08.860 \longrightarrow 00:36:10.629$  that I'm going to be talking about.

NOTE Confidence: 0.80558455875

00:36:10.630 --> 00:36:11.154 And finally,

NOTE Confidence: 0.80558455875

00:36:11.154 --> 00:36:13.949 I know it's the last talk of our CME series,

NOTE Confidence: 0.80558455875

 $00:36:13.950 \longrightarrow 00:36:16.650$  but throughout my life group discussion,

NOTE Confidence: 0.80558455875

 $00:36:16.650 \longrightarrow 00:36:17.970$  we've learned that, you know,

NOTE Confidence: 0.80558455875

 $00:36:17.970 \longrightarrow 00:36:19.146$  there are many novel,

NOTE Confidence: 0.80558455875

 $00:36:19.146 \longrightarrow 00:36:20.322$  exciting advances that drugs

NOTE Confidence: 0.80558455875

 $00:36:20.322 \longrightarrow 00:36:21.350$  are coming through.

NOTE Confidence: 0.80558455875

 $00{:}36{:}21.350 \dashrightarrow 00{:}36{:}23.226$  But I'm here to convince you guys

NOTE Confidence: 0.80558455875

00:36:23.226 --> 00:36:24.809 that despite those drug advances,

NOTE Confidence: 0.80558455875

 $00:36:24.810 \longrightarrow 00:36:26.634$  allergenic stem cell transplant

 $00:36:26.634 \longrightarrow 00:36:28.490$  is actually is at the forefront

NOTE Confidence: 0.80558455875

 $00{:}36{:}28.490 \to 00{:}36{:}30.273$  and we anticipate a high number of

NOTE Confidence: 0.80558455875

 $00:36:30.273 \longrightarrow 00:36:31.888$  patients going forward to receive

NOTE Confidence: 0.80558455875

 $00:36:31.888 \longrightarrow 00:36:33.180$  other transplant because outcomes

NOTE Confidence: 0.80558455875

 $00:36:33.227 \longrightarrow 00:36:34.747$  have gotten significantly better.

NOTE Confidence: 0.80558455875

 $00:36:34.750 \longrightarrow 00:36:38.082$  And I'll bring about some data to

NOTE Confidence: 0.80558455875

00:36:38.082 --> 00:36:39.795 support that statement. Alright.

NOTE Confidence: 0.80558455875

00:36:39.795 --> 00:36:41.790 And the first study that I'm going

NOTE Confidence: 0.80558455875

 $00:36:41.790 \longrightarrow 00:36:43.470$  to be talking to you is,

NOTE Confidence: 0.80558455875

 $00:36:43.470 \longrightarrow 00:36:45.892$  is a study that was done across

NOTE Confidence: 0.80558455875

 $00{:}36{:}45.892 \dashrightarrow 00{:}36{:}48.230$  from CFO which was using ID,

NOTE Confidence: 0.80558455875

 $00{:}36{:}48.230 \dashrightarrow 00{:}36{:}50.690$  its two mutation sub group which

NOTE Confidence: 0.80558455875

 $00:36:50.772 \longrightarrow 00:36:53.388$  happens in about 20% of the cases,

NOTE Confidence: 0.80558455875

 $00:36:53.388 \longrightarrow 00:36:54.426 \ 20\%$  of patients.

NOTE Confidence: 0.80558455875

 $00:36:54.430 \longrightarrow 00:36:56.446$  We all know that Doug Anderson

NOTE Confidence: 0.80558455875

00:36:56.446 --> 00:36:58.998 name is approved in mutant ideas

 $00:36:58.998 \longrightarrow 00:37:01.658$  plus two types index subgroup.

NOTE Confidence: 0.80558455875

 $00:37:01.658 \longrightarrow 00:37:04.202$  Those with the last refractory AML

NOTE Confidence: 0.80558455875

 $00:37:04.202 \longrightarrow 00:37:06.867$  D or R is about 40% but there are

NOTE Confidence: 0.80558455875

00:37:06.867 --> 00:37:08.400 responses do not last long with the

NOTE Confidence: 0.80558455875

 $00:37:08.451 \longrightarrow 00:37:10.512$  median duration of response about 5.8 months.

NOTE Confidence: 0.80558455875

 $00:37:10.512 \longrightarrow 00:37:12.258$  So the group here actually tried

NOTE Confidence: 0.80558455875

00:37:12.258 --> 00:37:14.535 to do a maintenance concept post

NOTE Confidence: 0.80558455875

 $00:37:14.535 \longrightarrow 00:37:16.167$  transplant wherein they introduced

NOTE Confidence: 0.80558455875

 $00{:}37{:}16.167 \dashrightarrow 00{:}37{:}18.548$  the drug post transplant from days 50

NOTE Confidence: 0.80558455875

 $00:37:18.548 \longrightarrow 00:37:21.174$  to 18120 at about 100 milligrams per day.

NOTE Confidence: 0.80558455875

 $00{:}37{:}21.180 \dashrightarrow 00{:}37{:}22.776$  The plan was to give for about

NOTE Confidence: 0.80558455875

 $00{:}37{:}22.776 \dashrightarrow 00{:}37{:}24.334$  two years and each cycle would

NOTE Confidence: 0.80558455875

 $00:37:24.334 \longrightarrow 00:37:25.694$  last for about 20-8 days.

NOTE Confidence: 0.80558455875

 $00:37:25.700 \longrightarrow 00:37:26.800$  It's a small group study.

NOTE Confidence: 0.80558455875

 $00:37:26.800 \longrightarrow 00:37:28.064$  The total was 15.

00:37:28.064 --> 00:37:29.644 They included patients and had

NOTE Confidence: 0.80558455875

 $00{:}37{:}29.644 \dashrightarrow 00{:}37{:}31.866$ a transparent CR1CR2 onward MRD

NOTE Confidence: 0.80558455875

 $00:37:31.866 \dashrightarrow 00:37:34.540$  positive cases post alert CT as well.

NOTE Confidence: 0.80558455875

00:37:34.540 --> 00:37:35.191 In this study,

NOTE Confidence: 0.80558455875

 $00:37:35.191 \longrightarrow 00:37:36.900$  the median time to start the drug was

NOTE Confidence: 0.80558455875

 $00:37:36.900 \longrightarrow 00:37:40.450$  105 days. Download various craft.

NOTE Confidence: 0.80558455875

00:37:40.450 --> 00:37:42.138 Various GVHD and various

NOTE Confidence: 0.80558455875

 $00:37:42.138 \longrightarrow 00:37:43.404$  transparent relative conditionings.

NOTE Confidence: 0.80558455875

 $00:37:43.410 \longrightarrow 00:37:45.150$  The median age is population

NOTE Confidence: 0.80558455875

 $00:37:45.150 \longrightarrow 00:37:47.573$  with about 58 years and all great

NOTE Confidence: 0.80558455875

 $00{:}37{:}47.573 \dashrightarrow 00{:}37{:}49.619$  adverse events during the study was

NOTE Confidence: 0.80558455875

 $00{:}37{:}49.619 \dashrightarrow 00{:}37{:}51.490$  reported for the first two cycles,

NOTE Confidence: 0.80558455875

00:37:51.490 --> 00:37:55.254 whereas for grade 3 or higher for

NOTE Confidence: 0.80558455875

 $00:37:55.254 \longrightarrow 00:37:56.710$  subsequent cycles were reported.

NOTE Confidence: 0.80558455875

 $00:37:56.710 \longrightarrow 00:37:57.690$  In the first two cycles,

NOTE Confidence: 0.80558455875

 $00:37:57.690 \longrightarrow 00:38:00.070$  it's usually all of them was included.

 $00:38:00.070 \longrightarrow 00:38:01.945$  The methodology used to monitor

NOTE Confidence: 0.80558455875

 $00:38:01.945 \dashrightarrow 00:38:04.670$  for DS2 was a digital doctor PCR.

NOTE Confidence: 0.80558455875

00:38:04.670 --> 00:38:06.548 And as has been shown here,

NOTE Confidence: 0.80558455875

00:38:06.550 --> 00:38:08.167 if you focus on the right and

NOTE Confidence: 0.80558455875

00:38:08.167 --> 00:38:08.860 one of the NOTE Confidence: 0.784485888095238

 $00{:}38{:}08.926 \dashrightarrow 00{:}38{:}10.798$  commonest concern that we have of

NOTE Confidence: 0.784485888095238

 $00:38:10.798 \longrightarrow 00:38:12.750$  using these drugs is cytopenias.

NOTE Confidence: 0.784485888095238

 $00:38:12.750 \longrightarrow 00:38:14.430$  The risks of cytopenias, lymphopenia,

NOTE Confidence: 0.784485888095238

 $00{:}38{:}14.430 \dashrightarrow 00{:}38{:}16.128$ anemia and neutropenia is was pretty

NOTE Confidence: 0.784485888095238

 $00:38:16.128 \longrightarrow 00:38:18.107$  modest and and it's it's not really

NOTE Confidence: 0.784485888095238

00:38:18.107 --> 00:38:19.948 significant for those of you use the

NOTE Confidence: 0.784485888095238

 $00:38:20.003 \longrightarrow 00:38:21.984$  drug in the pre transplant context that's

NOTE Confidence: 0.784485888095238

 $00{:}38{:}21.984 \dashrightarrow 00{:}38{:}23.848$  that's a major issue but those are

NOTE Confidence: 0.784485888095238

 $00:38:23.848 \longrightarrow 00:38:25.722$  usually the people that have an abnormal

NOTE Confidence: 0.784485888095238

 $00{:}38{:}25.722 \dashrightarrow 00{:}38{:}27.510$  marrow and the disease in association.

 $00:38:27.510 \longrightarrow 00:38:29.470$  So I was surprised to see the

NOTE Confidence: 0.784485888095238

 $00{:}38{:}29.470 \dashrightarrow 00{:}38{:}30.999$  side opinions although existing

NOTE Confidence: 0.784485888095238

00:38:30.999 --> 00:38:32.984 wasn't significantly high and GI

NOTE Confidence: 0.784485888095238

 $00:38:32.984 \longrightarrow 00:38:35.163$  side effect was rather common side

NOTE Confidence: 0.784485888095238

 $00:38:35.163 \longrightarrow 00:38:37.143$  effect interestingly at least as was

NOTE Confidence: 0.784485888095238

 $00{:}38{:}37.150 \dashrightarrow 00{:}38{:}38.760$  presented with the median follow-up

NOTE Confidence: 0.784485888095238

 $00:38:38.760 \longrightarrow 00:38:41.444$  of 17 months the one and two are

NOTE Confidence: 0.784485888095238

 $00:38:41.444 \longrightarrow 00:38:43.472$  progression free survival was about 100%.

NOTE Confidence: 0.784485888095238

00:38:43.480 --> 00:38:44.980 Common when we talk about maintenance,

NOTE Confidence: 0.784485888095238

 $00:38:44.980 \longrightarrow 00:38:47.255$  we talk about flip 3 limited studies.

NOTE Confidence: 0.784485888095238

 $00:38:47.260 \longrightarrow 00:38:49.582$  We're waiting on the full data of the BMT

NOTE Confidence: 0.784485888095238

 $00:38:49.582 \longrightarrow 00:38:51.800$  CTN three that used the three Nevada.

NOTE Confidence: 0.784485888095238

 $00{:}38{:}51.800 \dashrightarrow 00{:}38{:}53.440$  But I think outside of that idea as

NOTE Confidence: 0.784485888095238

 $00:38:53.440 \longrightarrow 00:38:55.151$  to where we have targeted agents is

NOTE Confidence: 0.784485888095238

00:38:55.151 --> 00:38:56.714 an important subgroup and I thought

NOTE Confidence: 0.784485888095238

 $00:38:56.714 \longrightarrow 00:38:58.250$  this would be of meaningful practical

 $00:38:58.250 \longrightarrow 00:38:59.758$  use as we treat our patients.

NOTE Confidence: 0.772969496923077

 $00:39:02.270 \longrightarrow 00:39:03.680$  The other maintenance stadium going

NOTE Confidence: 0.772969496923077

 $00:39:03.680 \dashrightarrow 00:39:05.989$  to talk about is a phase one study.

NOTE Confidence: 0.772969496923077

 $00:39:05.990 \longrightarrow 00:39:08.470$  Some of you might be aware that when

NOTE Confidence: 0.772969496923077

 $00:39:08.470 \dashrightarrow 00:39:10.502$  the clients has also been integrated

NOTE Confidence: 0.772969496923077

 $00:39:10.502 \longrightarrow 00:39:12.267$  in the transplant preparative regimens.

NOTE Confidence: 0.772969496923077

00:39:12.270 --> 00:39:14.718 The study was published by Garcia

NOTE Confidence: 0.772969496923077

 $00{:}39{:}14.718 \dashrightarrow 00{:}39{:}16.350$  and colleagues from Boston.

NOTE Confidence: 0.772969496923077

 $00:39:16.350 \longrightarrow 00:39:17.885$  What they're now presenting is

NOTE Confidence: 0.772969496923077

 $00{:}39{:}17.885 \longrightarrow 00{:}39{:}19.746$  when you integrate whether class to

NOTE Confidence: 0.772969496923077

 $00:39:19.746 \longrightarrow 00:39:21.685$  flow data and cell phone which is

NOTE Confidence: 0.772969496923077

 $00:39:21.685 \longrightarrow 00:39:23.020$  appropriate regiment that's commonly

NOTE Confidence: 0.772969496923077

 $00{:}39{:}23.020 \dashrightarrow 00{:}39{:}24.830$  used in the transplantation context.

NOTE Confidence: 0.772969496923077

 $00:39:24.830 \longrightarrow 00:39:27.845$  There are trying to add the HMM and when

NOTE Confidence: 0.772969496923077

 $00:39:27.845 \longrightarrow 00:39:31.539$  it reflects as a maintenance post transplant.

 $00:39:31.540 \longrightarrow 00:39:33.528$  The last ticket put on really is

NOTE Confidence: 0.772969496923077

 $00{:}39{:}33.528 \dashrightarrow 00{:}39{:}35.385$  focused on using is a Satanism

NOTE Confidence: 0.772969496923077

 $00:39:35.385 \longrightarrow 00:39:37.395$  maintenance and there are many many

NOTE Confidence: 0.772969496923077

 $00:39:37.395 \longrightarrow 00:39:39.058$  interesting reports in that regard.

NOTE Confidence: 0.772969496923077

 $00:39:39.060 \longrightarrow 00:39:40.818$  But the combination as you realize

NOTE Confidence: 0.772969496923077

 $00:39:40.818 \longrightarrow 00:39:42.641$  the doublets and triplets are making

NOTE Confidence: 0.772969496923077

 $00:39:42.641 \longrightarrow 00:39:44.435$  for ays in the non transparent context.

NOTE Confidence: 0.772969496923077

 $00:39:44.440 \longrightarrow 00:39:46.008$  And I also see this now coming

NOTE Confidence: 0.772969496923077

 $00{:}39{:}46.008 {\:\dashrightarrow\:} 00{:}39{:}47.759$  in the post transplant context.

NOTE Confidence: 0.772969496923077

 $00:39:47.760 \longrightarrow 00:39:49.503$  And this is one of those phase

NOTE Confidence: 0.772969496923077

 $00{:}39{:}49.503 \dashrightarrow 00{:}39{:}51.420$  one study to identify the doses.

NOTE Confidence: 0.772969496923077

 $00:39:51.420 \longrightarrow 00:39:53.373$  So they started out with 400

NOTE Confidence: 0.772969496923077

00:39:53.373 --> 00:39:55.477 milligrams from Day 1 to 14 is the

NOTE Confidence: 0.772969496923077

 $00:39:55.477 \longrightarrow 00:39:57.236$  cycling was used at 36 milligrams

NOTE Confidence: 0.772969496923077

 $00:39:57.236 \longrightarrow 00:39:59.419$  per meter square on days one to five.

NOTE Confidence: 0.772969496923077

 $00:39:59.420 \longrightarrow 00:40:00.631$  A lot of user trials in the

 $00:40:00.631 \longrightarrow 00:40:01.600$  past have tried different.

NOTE Confidence: 0.772969496923077

00:40:01.600 --> 00:40:03.408 This is different days and I think

NOTE Confidence: 0.772969496923077

 $00:40:03.408 \longrightarrow 00:40:05.236$  at least in this study they kind of

NOTE Confidence: 0.772969496923077

 $00:40:05.236 \longrightarrow 00:40:06.948$  narrowed it down to a slightly lower

NOTE Confidence: 0.772969496923077

 $00:40:06.948 \longrightarrow 00:40:08.761$  dose which with the hope that perhaps

NOTE Confidence: 0.772969496923077

 $00:40:08.770 \longrightarrow 00:40:11.730$  the combination is well tolerated.

NOTE Confidence: 0.772969496923077

 $00:40:11.730 \longrightarrow 00:40:12.954$  As was expected.

NOTE Confidence: 0.772969496923077

 $00:40:12.954 \longrightarrow 00:40:15.624$  You know, cytopenias worst thing.

NOTE Confidence: 0.772969496923077

 $00:40:15.624 \longrightarrow 00:40:17.249$  Neutropenia was 95%,

NOTE Confidence: 0.772969496923077

00:40:17.249 --> 00:40:18.416 thrombocytopenia was 91%.

NOTE Confidence: 0.772969496923077

 $00:40:18.416 \longrightarrow 00:40:20.361$  So cleverly the DLT definition

NOTE Confidence: 0.772969496923077

 $00:40:20.361 \longrightarrow 00:40:21.929$  that study was grateful.

NOTE Confidence: 0.772969496923077

 $00{:}40{:}21.930 \dashrightarrow 00{:}40{:}23.518$  Looping or thrombocytopenia greater

NOTE Confidence: 0.772969496923077

 $00:40:23.518 \longrightarrow 00:40:25.882$  than two weeks with a median follow-up

NOTE Confidence: 0.772969496923077

 $00:40:25.882 \longrightarrow 00:40:27.347$  of 12 months follow-up regardless

00:40:27.347 --> 00:40:29.070 of the patient got maintenance.

NOTE Confidence: 0.772969496923077

 $00{:}40{:}29.070 \dashrightarrow 00{:}40{:}30.715$  The one year progression free

NOTE Confidence: 0.772969496923077

 $00{:}40{:}30.715 \dashrightarrow 00{:}40{:}32.690$  survival was in relapse report here.

NOTE Confidence: 0.772969496923077

 $00:40:32.690 \longrightarrow 00:40:35.724$  The OS was 70%, PFS was 57%.

NOTE Confidence: 0.772969496923077

 $00:40:35.724 \longrightarrow 00:40:37.608$  There was no non relapse mortality

NOTE Confidence: 0.772969496923077

 $00:40:37.608 \longrightarrow 00:40:39.457$  suggesting it's it's a safer combination

NOTE Confidence: 0.772969496923077

 $00:40:39.457 \longrightarrow 00:40:41.910$  to push you in the post transplant context.

NOTE Confidence: 0.772969496923077

 $00{:}40{:}41.910 \dashrightarrow 00{:}40{:}44.310$  But relapse was still of concern

NOTE Confidence: 0.772969496923077

 $00:40:44.310 \longrightarrow 00:40:45.910$  despite using a doublet.

NOTE Confidence: 0.772969496923077

 $00:40:45.910 \longrightarrow 00:40:47.788$  Nomination in the post transplant context.

NOTE Confidence: 0.67735497125

 $00:40:50.530 \longrightarrow 00:40:53.666$  Now let's switch gears and talk about GVHD.

NOTE Confidence: 0.67735497125

 $00:40:53.670 \longrightarrow 00:40:56.855$  Now many of you know that calcination

NOTE Confidence: 0.67735497125

 $00:40:56.855 \longrightarrow 00:40:58.684$  based combination tachyons for

NOTE Confidence: 0.67735497125

 $00:40:58.684 \longrightarrow 00:41:01.372$  methotrexate has been a standard of care

NOTE Confidence: 0.67735497125

 $00:41:01.372 \longrightarrow 00:41:04.068$  for sorry for the last four decades.

NOTE Confidence: 0.67735497125

00:41:04.070 --> 00:41:06.206 So in order to explore more on how

 $00:41:06.206 \longrightarrow 00:41:09.090$  we can optimize and identify the best

NOTE Confidence: 0.67735497125

00:41:09.090 --> 00:41:11.074 combination BMT CTN 1203 study ran A3

NOTE Confidence: 0.67735497125

00:41:11.074 --> 00:41:13.727 ARM study where in the check to

NOTE Confidence: 0.67735497125

 $00:41:13.727 \longrightarrow 00:41:15.299$  conventional arm track methotrexate

NOTE Confidence: 0.67735497125

 $00{:}41{:}15.299 \dashrightarrow 00{:}41{:}17.055$  with Bortezomib tack methotrexate

NOTE Confidence: 0.67735497125

 $00:41:17.055 \longrightarrow 00:41:18.867$  with the chemokine inhibitor.

NOTE Confidence: 0.67735497125

 $00:41:18.870 \longrightarrow 00:41:20.690$  Versus a full side arm,

NOTE Confidence: 0.67735497125

 $00{:}41{:}20.690 \dashrightarrow 00{:}41{:}23.511$  the phase two study and the winner

NOTE Confidence: 0.67735497125

 $00{:}41{:}23.511 \dashrightarrow 00{:}41{:}26.312$  of that study was the post I am

NOTE Confidence: 0.67735497125

 $00:41:26.312 \longrightarrow 00:41:27.877$  which we call the PCI.

NOTE Confidence: 0.67735497125

00:41:27.880 --> 00:41:30.022 This was then taken to a phase three study

NOTE Confidence: 0.67735497125

 $00{:}41{:}30.022 \dashrightarrow 00{:}41{:}31.897$  where PCI tackled Amos and microphone.

NOTE Confidence: 0.67735497125

 $00{:}41{:}31.900 \dashrightarrow 00{:}41{:}34.312$  It was compared against the historical

NOTE Confidence: 0.67735497125

 $00{:}41{:}34.312 \dashrightarrow 00{:}41{:}37.079$  control which is stacked and methotrexate.

NOTE Confidence: 0.67735497125

 $00:41:37.080 \longrightarrow 00:41:39.170$  The study allowed reduced intensity

00:41:39.170 --> 00:41:40.842 conditioning for individuals 18

NOTE Confidence: 0.67735497125

 $00:41:40.842 \longrightarrow 00:41:43.092$  years or older that have controlled

NOTE Confidence: 0.67735497125

 $00:41:43.092 \longrightarrow 00:41:44.870$  disease and and peripheral

NOTE Confidence: 0.67735497125

 $00:41:44.870 \longrightarrow 00:41:47.000$  blood stem cell grafts were chosen.

NOTE Confidence: 0.67735497125

 $00:41:47.000 \longrightarrow 00:41:49.688$  Donors could be 6 out of 6L

NOTE Confidence: 0.67735497125

00:41:49.688 --> 00:41:52.477 matched or 7 to 8 or 8 sorry,

NOTE Confidence: 0.67735497125

00:41:52.480 --> 00:41:54.940 six out of 6 actually matched

NOTE Confidence: 0.67735497125

 $00:41:54.940 \longrightarrow 00:41:57.095$  donors or 11 antigen mismatched.

NOTE Confidence: 0.67735497125

 $00:41:57.095 \longrightarrow 00:41:59.320$  Unrelated donors were also aligned.

NOTE Confidence: 0.67735497125

00:41:59.320 --> 00:42:01.196 The primary endpoint of the study was

NOTE Confidence: 0.67735497125

00:42:01.196 --> 00:42:03.217 one year GRFS has been defined here,

NOTE Confidence: 0.67735497125

 $00:42:03.220 \longrightarrow 00:42:04.996$  even being defined as grade three

NOTE Confidence: 0.67735497125

 $00:42:04.996 \longrightarrow 00:42:07.032$  to four Q GVHD, chronic GVHD.

NOTE Confidence: 0.67735497125

 $00{:}42{:}07.032 \dashrightarrow 00{:}42{:}08.736$  Requiring systemic must suppression,

NOTE Confidence: 0.67735497125

00:42:08.740 --> 00:42:09.748 relapse, progression, adapt,

NOTE Confidence: 0.67735497125

 $00{:}42{:}09.748 \dashrightarrow 00{:}42{:}11.764$  and there were a few traditional

00:42:11.764 --> 00:42:12.680 standard transplant,

NOTE Confidence: 0.67735497125

 $00{:}42{:}12.680 \dashrightarrow 00{:}42{:}15.450$  Put in and secondary endpoints chosen.

NOTE Confidence: 0.67735497125

00:42:15.450 --> 00:42:19.517 Here's just a summary of what happened.

NOTE Confidence: 0.67735497125

 $00:42:19.520 \longrightarrow 00:42:21.280$  There was slightly more men.

NOTE Confidence: 0.67735497125

 $00:42:21.280 \longrightarrow 00:42:23.574$  The median Asia was about 66%.

NOTE Confidence: 0.67735497125

00:42:23.574 --> 00:42:26.332 Almost half of the people had kind

NOTE Confidence: 0.67735497125

 $00:42:26.332 \longrightarrow 00:42:28.578$  of performance score less than 90.

NOTE Confidence: 0.67735497125

 $00:42:28.580 \longrightarrow 00:42:31.135$  It had a wide range of hematologic

NOTE Confidence: 0.67735497125

 $00:42:31.135 \longrightarrow 00:42:31.500$  malignancies.

NOTE Confidence: 0.67735497125

 $00:42:31.500 \longrightarrow 00:42:33.810$  And and here's the percentage

NOTE Confidence: 0.67735497125

 $00:42:33.810 \longrightarrow 00:42:35.196$  of related unrelated,

NOTE Confidence: 0.67735497125

 $00:42:35.200 \longrightarrow 00:42:37.064$  unrelated donors with unrelated

NOTE Confidence: 0.67735497125

 $00{:}42{:}37.064 \dashrightarrow 00{:}42{:}39.394$  do nor being the Communist platform.

NOTE Confidence: 0.67735497125

 $00:42:39.400 \longrightarrow 00:42:41.325$  They did allow different regiments

NOTE Confidence: 0.67735497125

 $00:42:41.325 \longrightarrow 00:42:42.480$  to be chosen.

 $00:42:42.480 \longrightarrow 00:42:43.584$  That is blue flu,

NOTE Confidence: 0.67735497125

 $00{:}42{:}43.584 \to 00{:}42{:}44.202$  flu, mail.

NOTE Confidence: 0.67735497125

00:42:44.202 --> 00:42:46.938 To go with which perhaps in modern day

NOTE Confidence: 0.67735497125

 $00{:}42{:}46.938 \dashrightarrow 00{:}42{:}49.897$  or some of the common est options used.

NOTE Confidence: 0.67735497125

 $00:42:49.900 \longrightarrow 00:42:51.636$  Planned post transplant maintenance

NOTE Confidence: 0.67735497125

 $00:42:51.636 \longrightarrow 00:42:54.240$  therapies was used in about approximately

NOTE Confidence: 0.67735497125

 $00:42:54.301 \longrightarrow 00:42:56.414$  25% of the people in the post I am orsus,

NOTE Confidence: 0.67735497125

 $00:42:56.420 \longrightarrow 00:42:59.210$  22% in the non Siam.

NOTE Confidence: 0.67735497125

00:42:59.210 --> 00:43:01.646 The study did meet the primary endpoint,

NOTE Confidence: 0.67735497125

 $00:43:01.650 \longrightarrow 00:43:03.588$  the one year graft also source

NOTE Confidence: 0.67735497125

 $00{:}43{:}03.588 \mathrel{--}{>} 00{:}43{:}05.299$  disease relapse with survival was

NOTE Confidence: 0.67735497125

 $00:43:05.299 \longrightarrow 00:43:07.079$  superior with the post transplant

NOTE Confidence: 0.67735497125

 $00:43:07.079 \longrightarrow 00:43:08.796$  cyclophosphamide as has been shown

NOTE Confidence: 0.67735497125

 $00:43:08.796 \longrightarrow 00:43:12.460$  here with that has a ratio of 0.64.

NOTE Confidence: 0.67735497125

 $00:43:12.460 \longrightarrow 00:43:15.727$  The rates of great three to four Q GVHD

NOTE Confidence: 0.67735497125

00:43:15.727 --> 00:43:18.315 was 6.3% versus 14.7% suggesting post

 $00:43:18.315 \longrightarrow 00:43:21.185$  size able to decrease graph resource

NOTE Confidence: 0.67735497125

 $00:43:21.185 \longrightarrow 00:43:24.599$  disease and same with chronic graft

NOTE Confidence: 0.67735497125

 $00:43:24.599 \longrightarrow 00:43:26.306$  associated requiring suppression.

NOTE Confidence: 0.67735497125

 $00:43:26.310 \longrightarrow 00:43:28.940$  The Posi arm had about 12.5%

NOTE Confidence: 0.67735497125

 $00:43:28.940 \longrightarrow 00:43:30.900$  methotrexate armor 25% basically

NOTE Confidence: 0.67735497125

 $00:43:30.900 \longrightarrow 00:43:34.072$  halfing the risk of chronic GVHD

NOTE Confidence: 0.67735497125

 $00:43:34.072 \longrightarrow 00:43:36.440$  requiring suppression and importantly

NOTE Confidence: 0.67735497125

 $00:43:36.440 \longrightarrow 00:43:38.600$  GVHD prelapsarian survival was

NOTE Confidence: 0.67735497125

 $00:43:38.600 \longrightarrow 00:43:41.780$  almost 62% compared to 45% off.

NOTE Confidence: 0.67735497125

 $00{:}43{:}41.780 \dashrightarrow 00{:}43{:}43.844$  Is concerned that when using your

NOTE Confidence: 0.67735497125

 $00{:}43{:}43.844 \dashrightarrow 00{:}43{:}45.840$  depleting agents there's the GL impact.

NOTE Confidence: 0.67735497125

 $00{:}43{:}45.840 \dashrightarrow 00{:}43{:}48.066$  Gmail is impacted as is shown here.

NOTE Confidence: 0.67735497125

 $00{:}43{:}48.070 \dashrightarrow 00{:}43{:}50.415$  It seems to be disentangled and

NOTE Confidence: 0.67735497125

 $00{:}43{:}50.415 \dashrightarrow 00{:}43{:}52.125$  relapse and progression was not a

NOTE Confidence: 0.67735497125

 $00:43:52.125 \longrightarrow 00:43:53.957$  concern with the application of

 $00:43:53.957 \longrightarrow 00:43:55.331$  post transplant cyclophosphamide

NOTE Confidence: 0.67735497125

00:43:55.331 --> 00:43:57.163 compared to tack methotrexate.

NOTE Confidence: 0.67735497125

00:43:57.170 --> 00:43:58.610 Treatment related mortality,

NOTE Confidence: 0.67735497125

00:43:58.610 --> 00:44:00.034 it's 12% if, if,

NOTE Confidence: 0.67735497125 00:44:00.034 --> 00:44:00.266 if, NOTE Confidence: 0.67735497125

00:44:00.266 --> 00:44:01.890 if you all read our books back

NOTE Confidence: 0.67735497125

 $00:44:01.952 \longrightarrow 00:44:03.752$  about 10-15 years or treatment

NOTE Confidence: 0.67735497125

 $00{:}44{:}03.752 \dashrightarrow 00{:}44{:}05.552$  later mortality transplant used to

NOTE Confidence: 0.758474324090909

 $00:44:05.607 \longrightarrow 00:44:08.220$  be about 2530%. Now that number has

NOTE Confidence: 0.758474324090909

 $00:44:08.220 \longrightarrow 00:44:10.390$  come down significantly and the

NOTE Confidence: 0.758474324090909

 $00{:}44{:}10.466 \dashrightarrow 00{:}44{:}12.902$  overall survival in this arm was

NOTE Confidence: 0.758474324090909

 $00:44:12.902 \longrightarrow 00:44:16.195$  about 77% of interest to note here

NOTE Confidence: 0.758474324090909

00:44:16.195 --> 00:44:17.827 is that overall survival at this

NOTE Confidence: 0.758474324090909

00:44:17.827 --> 00:44:19.407 time point actually didn't change,

NOTE Confidence: 0.758474324090909

 $00:44:19.410 \longrightarrow 00:44:21.780$  it was 77%, also 72%.

NOTE Confidence: 0.758474324090909

 $00:44:21.780 \longrightarrow 00:44:25.378$  But remember the study endpoint was GRFS.

 $00:44:25.380 \longrightarrow 00:44:26.689$  So then people tend to ask what

NOTE Confidence: 0.758474324090909

 $00:44:26.689 \longrightarrow 00:44:27.791$  what about the secondary outcomes

NOTE Confidence: 0.758474324090909

 $00:44:27.791 \longrightarrow 00:44:29.279$  in highlighted in purple are the

NOTE Confidence: 0.758474324090909

 $00:44:29.279 \longrightarrow 00:44:30.466$  ones that were not significant

NOTE Confidence: 0.758474324090909

 $00:44:30.466 \longrightarrow 00:44:31.971$  and in the dark bright yellow is

NOTE Confidence: 0.758474324090909

 $00:44:31.980 \longrightarrow 00:44:33.680$  the ones that are significant.

NOTE Confidence: 0.758474324090909

00:44:33.680 --> 00:44:35.500 When your survival didn't change,

NOTE Confidence: 0.758474324090909

 $00{:}44{:}35.500 \dashrightarrow 00{:}44{:}37.200$  when your disease with survival

NOTE Confidence: 0.758474324090909

00:44:37.200 --> 00:44:39.704 didn't changed, TRM did not change.

NOTE Confidence: 0.758474324090909

00:44:39.704 --> 00:44:40.160 Statistically,

NOTE Confidence: 0.758474324090909

00:44:40.160 --> 00:44:41.705 cumulative incidence or Q GVHD

NOTE Confidence: 0.758474324090909

00:44:41.705 --> 00:44:43.959 grades two to four did not change.

NOTE Confidence: 0.758474324090909

 $00{:}44{:}43.960 \dashrightarrow 00{:}44{:}46.216$  But what did change though is

NOTE Confidence: 0.758474324090909

00:44:46.216 --> 00:44:48.032 cumulative incidence of acute GBS

NOTE Confidence: 0.758474324090909

 $00:44:48.032 \longrightarrow 00:44:50.078$  day 100 grades three to four.

00:44:50.080 --> 00:44:51.752 You know if you have grade one and

NOTE Confidence: 0.758474324090909

00:44:51.752 --> 00:44:53.900 two GSD most times it's not of a

NOTE Confidence: 0.758474324090909

 $00:44:53.900 \longrightarrow 00:44:55.225$  significant concern, the higher grade.

NOTE Confidence: 0.758474324090909

 $00:44:55.225 \longrightarrow 00:44:56.755$  It's the other one we are

NOTE Confidence: 0.758474324090909

 $00:44:56.755 \longrightarrow 00:44:58.029$  concerned about with the post.

NOTE Confidence: 0.758474324090909

 $00:44:58.030 \longrightarrow 00:45:01.640 \text{ I was } 6.3\% \text{ compared to about } 14.7\%.$ 

NOTE Confidence: 0.758474324090909

00:45:01.640 --> 00:45:04.390 Similarly chronic GVHD at 12

NOTE Confidence: 0.758474324090909

 $00:45:04.390 \longrightarrow 00:45:07.234$  months was 21% compared to 35%.

NOTE Confidence: 0.758474324090909

00:45:07.234 --> 00:45:09.850 The salary carrier was slightly slower

NOTE Confidence: 0.758474324090909

 $00:45:09.931 \longrightarrow 00:45:12.679$  both for neutrophils and platelets and

NOTE Confidence: 0.758474324090909

 $00:45:12.679 \longrightarrow 00:45:15.675$  as is commonly expected and the

NOTE Confidence: 0.758474324090909

00:45:15.675 --> 00:45:17.600 risk of breakthrough infections will

NOTE Confidence: 0.758474324090909

00:45:17.600 --> 00:45:19.879 not not significantly higher at 12

NOTE Confidence: 0.758474324090909

00:45:19.879 --> 00:45:23.269 months now is the risk of CMV reactivation,

NOTE Confidence: 0.758474324090909

 $00:45:23.270 \longrightarrow 00:45:24.042$  importantly immunosuppression

NOTE Confidence: 0.758474324090909

 $00:45:24.042 \longrightarrow 00:45:25.586$  free survival at one.

 $00:45:25.590 \longrightarrow 00:45:25.892$  Yeah,

NOTE Confidence: 0.758474324090909

 $00:45:25.892 \longrightarrow 00:45:28.610$  was was better off as has been shown here.

NOTE Confidence: 0.73004946875

 $00:45:30.740 \longrightarrow 00:45:32.108$  The other other question

NOTE Confidence: 0.73004946875

00:45:32.108 --> 00:45:34.030 people ask is about, you know,

NOTE Confidence: 0.73004946875

 $00:45:34.030 \longrightarrow 00:45:35.955$  what's the risk of graft failure or

NOTE Confidence: 0.73004946875

 $00:45:35.955 \longrightarrow 00:45:37.858$  how does the chimerism play out?

NOTE Confidence: 0.73004946875

 $00:45:37.860 \longrightarrow 00:45:39.012$  As shown here, they have definitions

NOTE Confidence: 0.73004946875

 $00:45:39.012 \longrightarrow 00:45:40.160$  for what's the full chimerism?

NOTE Confidence: 0.73004946875

00:45:40.160 --> 00:45:41.309 Mixed graph projections.

NOTE Confidence: 0.73004946875

 $00:45:41.309 \longrightarrow 00:45:42.841$  There's really no significant

NOTE Confidence: 0.73004946875

 $00:45:42.841 \longrightarrow 00:45:44.347$  differences based on that

NOTE Confidence: 0.73004946875

 $00:45:44.347 \longrightarrow 00:45:45.877$  between the two treatment arms.

NOTE Confidence: 0.827247843333333

 $00{:}45{:}48.950 \dashrightarrow 00{:}45{:}51.308$  Specifically people ask that, you know,

NOTE Confidence: 0.827247843333333

 $00:45:51.310 \longrightarrow 00:45:53.032$  this is making significant progress in

NOTE Confidence: 0.827247843333333

 $00:45:53.032 \longrightarrow 00:45:55.088$  the field of acute and chronic GVHD.

 $00:45:55.090 \longrightarrow 00:45:56.616$  Does it have any other side effects?

NOTE Confidence: 0.827247843333333

00:45:56.620 --> 00:45:58.828 Well, you know the risk of acute or

NOTE Confidence: 0.827247843333333

 $00:45:58.828 \longrightarrow 00:46:00.829$  chronic GVHD was significantly lower,

NOTE Confidence: 0.827247843333333

 $00:46:00.830 \longrightarrow 00:46:02.654$  but they did come up a concern about

NOTE Confidence: 0.827247843333333

 $00:46:02.654 \longrightarrow 00:46:04.249$  some organ failure and we're looking

NOTE Confidence: 0.827247843333333

 $00:46:04.249 \longrightarrow 00:46:06.236$  for the full manuscript to see which

NOTE Confidence: 0.827247843333333

 $00{:}46{:}06.236 \dashrightarrow 00{:}46{:}07.766$  particular organs were affected as

NOTE Confidence: 0.827247843333333

 $00:46:07.766 \longrightarrow 00:46:09.872$  it was slightly higher in the post

NOTE Confidence: 0.827247843333333

 $00:46:09.872 \longrightarrow 00:46:10.754$  transplant cyclophosphamide arm

NOTE Confidence: 0.827247843333333

 $00:46:10.754 \longrightarrow 00:46:12.180$  compared to the conventional care.

NOTE Confidence: 0.6652379452

00:46:15.600 --> 00:46:17.798 In summary, you know the superior GRS

NOTE Confidence: 0.6652379452

 $00{:}46{:}17.798 \dashrightarrow 00{:}46{:}20.377$  went to the reduced even and Q GVHD led

NOTE Confidence: 0.6652379452

 $00:46:20.377 \longrightarrow 00:46:23.097$  to the post I am winning in this truck.

NOTE Confidence: 0.6652379452

 $00:46:23.100 \longrightarrow 00:46:24.705$  There was no increase in

NOTE Confidence: 0.6652379452

00:46:24.705 --> 00:46:25.668 relapse slash progressive,

NOTE Confidence: 0.6652379452

 $00:46:25.670 \longrightarrow 00:46:27.840$  which is critical importance to our people.

 $00:46:27.840 \longrightarrow 00:46:29.520$  There was slightly delayed

NOTE Confidence: 0.6652379452

 $00:46:29.520 \longrightarrow 00:46:30.360$  hematopoietic recovery.

NOTE Confidence: 0.6652379452

 $00:46:30.360 \longrightarrow 00:46:32.340$  There was more grade 2 GI

NOTE Confidence: 0.6652379452

 $00:46:32.340 \longrightarrow 00:46:34.140$  events in the infection forms,

NOTE Confidence: 0.6652379452

 $00:46:34.140 \longrightarrow 00:46:36.366$  but they're mostly in the first month.

NOTE Confidence: 0.6652379452

 $00:46:36.370 \longrightarrow 00:46:37.866$  Based on the findings,

NOTE Confidence: 0.6652379452

 $00:46:37.866 \longrightarrow 00:46:40.110$  the field is slowly moving towards

NOTE Confidence: 0.6652379452

 $00:46:40.176 \longrightarrow 00:46:42.206$  the option of using postai as a

NOTE Confidence: 0.6652379452

 $00:46:42.210 \longrightarrow 00:46:44.855$  reduced intensity conditioning GVS 3

NOTE Confidence: 0.6652379452

 $00:46:44.855 \longrightarrow 00:46:46.971$  prophylactic options going forwards

NOTE Confidence: 0.6652379452

 $00:46:46.971 \longrightarrow 00:46:49.688$  in patients who are well matched.

NOTE Confidence: 0.6652379452

 $00:46:49.690 \longrightarrow 00:46:50.865$  There there are ongoing studies

NOTE Confidence: 0.6652379452

 $00:46:50.865 \longrightarrow 00:46:52.352$  to look and look for suitable

NOTE Confidence: 0.6652379452

 $00:46:52.352 \longrightarrow 00:46:53.900$  biomarkers and those will be coming

NOTE Confidence: 0.6652379452

 $00:46:53.900 \longrightarrow 00:46:55.450$  out over the next few months.

 $00:46:58.610 \longrightarrow 00:46:59.682$  In that is available,

NOTE Confidence: 0.67660730944

 $00:46:59.682 \longrightarrow 00:47:01.633$  who's one of our leaders in the

NOTE Confidence: 0.67660730944

 $00{:}47{:}01.633 \dashrightarrow 00{:}47{:}03.367$  leukemia program asked me to condense

NOTE Confidence: 0.67660730944

 $00:47:03.367 \longrightarrow 00:47:05.607$  some of the TCP slides with the ash.

NOTE Confidence: 0.67660730944

 $00:47:05.610 \longrightarrow 00:47:07.580$  Hematology slides because those are

NOTE Confidence: 0.67660730944

 $00:47:07.580 \longrightarrow 00:47:09.550$  are really practice changing here.

NOTE Confidence: 0.67660730944

 $00:47:09.550 \longrightarrow 00:47:11.326$  I'm presenting a study that's called

NOTE Confidence: 0.67660730944

00:47:11.326 --> 00:47:13.553 the CRF study that's Seropian was the

NOTE Confidence: 0.67660730944

 $00{:}47{:}13.553 \dashrightarrow 00{:}47{:}15.527$  principal investigator on site for this.

NOTE Confidence: 0.67660730944

00:47:15.530 --> 00:47:16.885 This was a multicenter pivotal

NOTE Confidence: 0.67660730944

 $00:47:16.885 \longrightarrow 00:47:18.701$  phase three study of ISOMAP which is

NOTE Confidence: 0.67660730944

 $00{:}47{:}18.701 \dashrightarrow 00{:}47{:}20.341$  going to talk to you about prior to

NOTE Confidence: 0.67660730944

 $00:47:20.397 \longrightarrow 00:47:22.127$  allogeneic stem cell transplant versus

NOTE Confidence: 0.67660730944

 $00{:}47{:}22.127 \dashrightarrow 00{:}47{:}23.857$  conventional care in older patients

NOTE Confidence: 0.67660730944

 $00:47:23.860 \longrightarrow 00:47:25.810$  with acute relapse refractory leukemia.

NOTE Confidence: 0.67660730944

 $00:47:25.810 \longrightarrow 00:47:27.934$  Remember the majority of the patients

 $00:47:27.934 \longrightarrow 00:47:30.070$  actually don't get to transplant.

NOTE Confidence: 0.67660730944

 $00:47:30.070 \longrightarrow 00:47:31.834$  Look at the median age for these

NOTE Confidence: 0.67660730944

 $00:47:31.834 \longrightarrow 00:47:33.208$  patients that developed leukemia is

NOTE Confidence: 0.67660730944

 $00:47:33.208 \longrightarrow 00:47:35.332$  somewhere around late 60s, early 70s.

NOTE Confidence: 0.67660730944

 $00:47:35.332 \longrightarrow 00:47:37.296$  And they're transplant ineligible.

NOTE Confidence: 0.67660730944

 $00:47:37.300 \longrightarrow 00:47:38.890$  So in that patient population

NOTE Confidence: 0.67660730944

 $00:47:38.890 \longrightarrow 00:47:41.578$  while we were at multiple new drug

NOTE Confidence: 0.67660730944

00:47:41.578 --> 00:47:43.138 developments transplanted historically

NOTE Confidence: 0.67660730944

 $00:47:43.138 \longrightarrow 00:47:44.698$  considered not suitable.

NOTE Confidence: 0.67660730944

00:47:44.700 --> 00:47:45.816 So into that domain,

NOTE Confidence: 0.67660730944

 $00:47:45.816 \longrightarrow 00:47:47.896$  this trial is trying to now make

NOTE Confidence: 0.67660730944

 $00:47:47.896 \longrightarrow 00:47:49.611$  headways with some interesting results

NOTE Confidence: 0.67660730944

 $00{:}47{:}49.611 \dashrightarrow 00{:}47{:}52.267$  as I'm going to show to you all here.

NOTE Confidence: 0.747278952

00:47:55.730 --> 00:47:57.782 As I was mentioning last, in fact,

NOTE Confidence: 0.747278952

00:47:57.782 --> 00:48:00.428 Emilyn generally has got poor prognosis.

00:48:00.430 --> 00:48:01.478 On top of that,

NOTE Confidence: 0.747278952

 $00:48:01.478 \longrightarrow 00:48:04.570$  if you add old rays it makes it complicated.

NOTE Confidence: 0.747278952

 $00{:}48{:}04.570 \dashrightarrow 00{:}48{:}06.010$  There are several reasons for that.

NOTE Confidence: 0.747278952

 $00:48:06.010 \longrightarrow 00:48:07.350$  Historically always believed intensive

NOTE Confidence: 0.747278952

 $00:48:07.350 \longrightarrow 00:48:09.025$  induction and accessory to keep

NOTE Confidence: 0.747278952

 $00{:}48{:}09.025 \dashrightarrow 00{:}48{:}10.227$  permission going for long term.

NOTE Confidence: 0.747278952

 $00{:}48{:}10.230 \dashrightarrow 00{:}48{:}12.118$  But most of these patients are not able

NOTE Confidence: 0.747278952

00:48:12.118 --> 00:48:14.128 to tolerate it and even if they tolerate it,

NOTE Confidence: 0.747278952

 $00:48:14.130 \longrightarrow 00:48:15.894$  the toxicities are higher if you

NOTE Confidence: 0.747278952

 $00:48:15.894 \longrightarrow 00:48:18.290$  continue to long terms and that leads

NOTE Confidence: 0.747278952

 $00:48:18.290 \longrightarrow 00:48:20.230$  to substantial treatment related mortality.

NOTE Confidence: 0.747278952

 $00:48:20.230 \longrightarrow 00:48:21.850$  Now since transplant is a higher

NOTE Confidence: 0.747278952

 $00:48:21.850 \longrightarrow 00:48:22.930$  intensity of treatment compared

NOTE Confidence: 0.747278952

00:48:22.981 --> 00:48:24.246 to the non transparent option,

NOTE Confidence: 0.747278952

 $00:48:24.250 \longrightarrow 00:48:27.364$  the term tends to go up in the population.

NOTE Confidence: 0.747278952

 $00:48:27.370 \longrightarrow 00:48:31.482$  However we are able to get some of those.

00:48:31.482 --> 00:48:34.080 Patients who have relapsed or practicing

NOTE Confidence: 0.747278952

 $00{:}48{:}34.158 \dashrightarrow 00{:}48{:}36.950$  at back into remission and one of the.

NOTE Confidence: 0.747278952

 $00:48:36.950 \longrightarrow 00:48:39.176$  Conventions that we tend to fall in

NOTE Confidence: 0.747278952

00:48:39.176 --> 00:48:41.258 relapse refractory AML is we we tend

NOTE Confidence: 0.747278952

 $00{:}48{:}41.258 \operatorname{--}{>} 00{:}48{:}42.866$  not to transplant those patients in

NOTE Confidence: 0.747278952

 $00:48:42.928 \longrightarrow 00:48:44.770$  active disease because you know back

NOTE Confidence: 0.747278952

 $00:48:44.770 \longrightarrow 00:48:47.324$  maybe prior to 2000 when we used to

NOTE Confidence: 0.747278952

 $00{:}48{:}47.324 \dashrightarrow 00{:}48{:}49.274$  do labs attracts AML who had active

NOTE Confidence: 0.747278952

 $00:48:49.274 \longrightarrow 00:48:50.730$  disease when the data is normal drugs

NOTE Confidence: 0.747278952

00:48:50.779 --> 00:48:52.179 though you know risk of relapse was

NOTE Confidence: 0.747278952

00:48:52.179 --> 00:48:53.587 pretty high in the Tiana was high.

NOTE Confidence: 0.747278952

 $00{:}48{:}53.590 \dashrightarrow 00{:}48{:}55.900$  So based on that there are multiple

NOTE Confidence: 0.747278952

 $00{:}48{:}55.900 \dashrightarrow 00{:}48{:}57.286$ novel drug development strategies

NOTE Confidence: 0.747278952

 $00:48:57.286 \longrightarrow 00:48:58.606$  that have come on.

NOTE Confidence: 0.747278952

00:48:58.610 --> 00:49:00.158 But what I have is not trying to do

00:49:00.158 --> 00:49:02.074 is trying to address the question

NOTE Confidence: 0.747278952

 $00:49:02.074 \longrightarrow 00:49:02.750$  slightly differently.

NOTE Confidence: 0.747278952

 $00:49:02.750 \longrightarrow 00:49:04.646$  So first of all, what is our map?

NOTE Confidence: 0.747278952

 $00:49:04.650 \longrightarrow 00:49:07.548$  Ahmad is basically a combination of things.

NOTE Confidence: 0.747278952

 $00:49:07.550 \longrightarrow 00:49:09.986$  They have a CD45 antibody that's

NOTE Confidence: 0.747278952

 $00{:}49{:}09.986 \dashrightarrow 00{:}49{:}12.101$  conjugated to radioactive iodine and

NOTE Confidence: 0.747278952

00:49:12.101 --> 00:49:14.615 it is designed to deliver targeted

NOTE Confidence: 0.747278952

00:49:14.615 --> 00:49:16.706 myeloablative radiation dose to the

NOTE Confidence: 0.747278952

 $00:49:16.706 \longrightarrow 00:49:18.626$  hematopoietic cells and immune cells

NOTE Confidence: 0.747278952

 $00:49:18.630 \longrightarrow 00:49:20.500$  and then supplemented with reduced

NOTE Confidence: 0.747278952

 $00{:}49{:}20.500 \mathrel{--}{>} 00{:}49{:}21.622$  intensity conditioning priority

NOTE Confidence: 0.747278952

 $00:49:21.622 \longrightarrow 00:49:23.430$  analogy and stem cell transplant.

NOTE Confidence: 0.747278952

 $00:49:23.430 \longrightarrow 00:49:24.726$  Remember good old days when we

NOTE Confidence: 0.747278952

 $00{:}49{:}24.726 \dashrightarrow 00{:}49{:}25.590$  used to do transplant,

NOTE Confidence: 0.747278952

 $00:49:25.590 \longrightarrow 00:49:27.585$  we used to use radiation based regimens,

NOTE Confidence: 0.747278952

 $00{:}49{:}27.590 \dashrightarrow 00{:}49{:}28.694$  TBI kind of.

 $00:49:28.694 \longrightarrow 00:49:31.270$  While it's useful to suppress your immune

NOTE Confidence: 0.747278952

 $00{:}49{:}31.347 \dashrightarrow 00{:}49{:}34.077$  system and radical Kenya and the narrow,

NOTE Confidence: 0.747278952

00:49:34.080 --> 00:49:36.162 it can cause significant argument toxicity

NOTE Confidence: 0.747278952

 $00:49:36.162 \longrightarrow 00:49:38.440$  because it's a total body radiation.

NOTE Confidence: 0.747278952

 $00:49:38.440 \longrightarrow 00:49:39.810$  Here they're trying to develop

NOTE Confidence: 0.747278952

 $00:49:39.810 \longrightarrow 00:49:41.180$  targeted radiation to leukemia cells,

NOTE Confidence: 0.747278952

 $00:49:41.180 \longrightarrow 00:49:42.596$  bone marrow stem cells,

NOTE Confidence: 0.747278952

 $00{:}49{:}42.596 \dashrightarrow 00{:}49{:}44.366$  to address the primary problem

NOTE Confidence: 0.747278952

 $00:49:44.366 \longrightarrow 00:49:46.148$  of cute myeloid leukemia.

NOTE Confidence: 0.747278952

00:49:46.150 --> 00:49:47.918 With induction and conditioning,

NOTE Confidence: 0.747278952

 $00:49:47.918 \longrightarrow 00:49:50.787$  the hope here is that usage of this

NOTE Confidence: 0.747278952

 $00{:}49{:}50.787 \dashrightarrow 00{:}49{:}52.320$  drug would allow rapid access to bone

NOTE Confidence: 0.747278952

 $00{:}49{:}52.367 \dashrightarrow 00{:}49{:}54.132$  marrow transplant for multiple patients

NOTE Confidence: 0.747278952

 $00:49:54.132 \longrightarrow 00:49:55.544$  who relapsed refractory phenotype.

NOTE Confidence: 0.747278952

 $00:49:55.550 \longrightarrow 00:49:57.242$  So this was a prospective randomized

 $00:49:57.242 \longrightarrow 00:49:59.409$  strain study which is a phase three

NOTE Confidence: 0.747278952

 $00:49:59.409 \longrightarrow 00:50:00.729$  study exclusively for patient

NOTE Confidence: 0.747278952

 $00:50:00.729 \longrightarrow 00:50:02.662$  populations greater than 55 to compare

NOTE Confidence: 0.747278952

 $00{:}50{:}02.662 \dashrightarrow 00{:}50{:}04.142$  rates of durable complete remissions

NOTE Confidence: 0.747278952

 $00:50:04.142 \longrightarrow 00:50:05.996$  that would last greater than 180

NOTE Confidence: 0.747278952

00:50:05.996 --> 00:50:07.252 days following initial complete

NOTE Confidence: 0.747278952

 $00:50:07.252 \longrightarrow 00:50:08.509$  remission between the two arms.

NOTE Confidence: 0.747278952

 $00:50:08.510 \longrightarrow 00:50:10.364$  So the study was randomized for

NOTE Confidence: 0.747278952

 $00{:}50{:}10.364 \dashrightarrow 00{:}50{:}12.054$  IMAP followed by transplant versus

NOTE Confidence: 0.747278952

00:50:12.054 --> 00:50:13.646 physicians choice of conventional

NOTE Confidence: 0.747278952

 $00{:}50{:}13.646 \dashrightarrow 00{:}50{:}15.636$  care for transplant and physicians.

NOTE Confidence: 0.747278952

 $00:50:15.640 \longrightarrow 00:50:17.580$  The Commission came included more

NOTE Confidence: 0.747278952

 $00:50:17.580 \longrightarrow 00:50:19.897$  than 20 different drugs that reflect

NOTE Confidence: 0.747278952

 $00{:}50{:}19.897 --> 00{:}50{:}20.884$  on contemporary practice,

NOTE Confidence: 0.747278952

00:50:20.884 --> 00:50:22.569 including the BCL 2 inhibitor,

NOTE Confidence: 0.747278952

 $00:50:22.570 \longrightarrow 00:50:25.730$  split three inhibitors, etc.

 $00:50:25.730 \longrightarrow 00:50:29.006$  Ohh here's how the study design goes.

NOTE Confidence: 0.747278952

00:50:29.010 --> 00:50:30.310 People have relapsed practice

NOTE Confidence: 0.747278952

 $00:50:30.310 \longrightarrow 00:50:31.610$  phenotype greater than 55,

NOTE Confidence: 0.747278952

00:50:31.610 --> 00:50:32.938 randomized 1 to one.

NOTE Confidence: 0.747278952

 $00{:}50{:}32.938 \dashrightarrow 00{:}50{:}34.930$  I am mapped to conventional care.

NOTE Confidence: 0.747278952

 $00:50:34.930 \longrightarrow 00:50:36.370$  Well then look for whether they're

NOTE Confidence: 0.747278952

 $00:50:36.370 \longrightarrow 00:50:38.008$  here or not and if it's a CR,

NOTE Confidence: 0.747278952

 $00:50:38.010 \longrightarrow 00:50:39.120$  what's the duration of CR

NOTE Confidence: 0.747278952

 $00:50:39.120 \longrightarrow 00:50:40.230$  whether the last six months

NOTE Confidence: 0.808253554166667

 $00:50:40.276 \longrightarrow 00:50:42.652$  or not. And that's the pre-specified primary

NOTE Confidence: 0.808253554166667

 $00:50:42.652 \longrightarrow 00:50:44.570$  endpoint lasting greater than 180 days.

NOTE Confidence: 0.808253554166667

 $00{:}50{:}44.570 \dashrightarrow 00{:}50{:}46.628$  Whereas with the conventional care arm

NOTE Confidence: 0.808253554166667

 $00:50:46.630 \dashrightarrow 00:50:49.110$  depends whether they get into CR no CR.

NOTE Confidence: 0.808253554166667

 $00:50:49.110 \dashrightarrow 00:50:51.062$  If they're the CR then they could go

NOTE Confidence: 0.808253554166667

 $00:50:51.062 \longrightarrow 00:50:53.208$  to the standard of care transplant.

 $00:50:53.210 \longrightarrow 00:50:54.896$  Our standard of care physicians choice.

NOTE Confidence: 0.812096425714286

 $00{:}50{:}57.210 \dashrightarrow 00{:}51{:}00.978$  This, this concept of drug delivery

NOTE Confidence: 0.812096425714286

 $00:51:00.978 \longrightarrow 00:51:02.456$  needs hospitalization slightly earlier

NOTE Confidence: 0.812096425714286

 $00:51:02.456 \longrightarrow 00:51:04.722$  than what we would normally do in the

NOTE Confidence: 0.812096425714286

 $00:51:04.722 \longrightarrow 00:51:06.186$  context of a bone marrow transplant.

NOTE Confidence: 0.812096425714286

00:51:06.190 --> 00:51:08.270 So those patients were admitted

NOTE Confidence: 0.812096425714286

 $00:51:08.270 \longrightarrow 00:51:11.398$  around day 19 to get a test dose.

NOTE Confidence: 0.812096425714286

 $00:51:11.400 \longrightarrow 00:51:13.315$  After radioactive iodine and then

NOTE Confidence: 0.812096425714286

 $00:51:13.315 \longrightarrow 00:51:16.261$  they have to be kept in the hospital

NOTE Confidence: 0.812096425714286

 $00:51:16.261 \longrightarrow 00:51:18.744$  for a few days until the body

NOTE Confidence: 0.812096425714286

 $00{:}51{:}18.744 \dashrightarrow 00{:}51{:}20.954$  eliminates all the radioactive doses.

NOTE Confidence: 0.812096425714286

 $00:51:20.960 \longrightarrow 00:51:23.624$  The then the data is then sent across to

NOTE Confidence: 0.812096425714286

 $00:51:23.624 \longrightarrow 00:51:25.844$  develop a the rapeutic dose of the ILAB

NOTE Confidence: 0.812096425714286

 $00:51:25.844 \longrightarrow 00:51:28.379$  which is then given around day minus 12.

NOTE Confidence: 0.812096425714286

00:51:28.380 --> 00:51:30.516 You wait for about 8 days

NOTE Confidence: 0.812096425714286

 $00:51:30.520 \longrightarrow 00:51:31.960$  for that to take effect.

 $00:51:31.960 \longrightarrow 00:51:33.976$  Remember these are people who have

NOTE Confidence: 0.812096425714286

 $00:51:33.976 \longrightarrow 00:51:35.669$  active glass and activities coming

NOTE Confidence: 0.812096425714286

00:51:35.669 --> 00:51:37.678 into this this drug would you know

NOTE Confidence: 0.812096425714286

00:51:37.678 --> 00:51:39.292 Oblate most of those patients and

NOTE Confidence: 0.812096425714286

 $00:51:39.292 \longrightarrow 00:51:41.324$  then you go and use the principles of.

NOTE Confidence: 0.812096425714286

00:51:41.324 --> 00:51:43.298 Transplant just to use low dose of

NOTE Confidence: 0.812096425714286

00:51:43.298 --> 00:51:45.128 immuno ablation with fludarabine and

NOTE Confidence: 0.812096425714286

00:51:45.128 --> 00:51:46.993 TBI which lymphodepletion and also

NOTE Confidence: 0.812096425714286

 $00:51:46.993 \longrightarrow 00:51:48.981$  eradicate some of the disease followed

NOTE Confidence: 0.812096425714286

 $00{:}51{:}48.981 \dashrightarrow 00{:}51{:}50.940$  by hematopoietic stem cell rescue and

NOTE Confidence: 0.812096425714286

 $00{:}51{:}50.940 \dashrightarrow 00{:}51{:}53.670$  the option of GST prophylaxis is tactile

NOTE Confidence: 0.812096425714286

 $00:51:53.670 \longrightarrow 00:51:57.760$  limus cyclist form with microphone.

NOTE Confidence: 0.812096425714286

 $00{:}51{:}57.760 \dashrightarrow 00{:}51{:}59.040$  Here's the concept now.

NOTE Confidence: 0.812096425714286

 $00:51:59.040 \longrightarrow 00:52:00.640$  Equal number of patients randomized.

NOTE Confidence: 0.812096425714286

 $00:52:00.640 \longrightarrow 00:52:02.760$  I'm unconventional.

 $00:52:02.760 \longrightarrow 00:52:05.104$  Case 767766 patients received

NOTE Confidence: 0.812096425714286

 $00:52:05.104 \longrightarrow 00:52:05.960$  therapeutic dose.

NOTE Confidence: 0.812096425714286

 $00:52:05.960 \longrightarrow 00:52:07.815$  66 were able to get a transplant.

NOTE Confidence: 0.812096425714286

00:52:07.820 --> 00:52:09.140 Per protocol analysis,

NOTE Confidence: 0.812096425714286

 $00.52:09.140 \longrightarrow 00.52:10.460$  59 were eligible.

NOTE Confidence: 0.812096425714286 00:52:10.460 --> 00:52:11.204 In contrast,

NOTE Confidence: 0.812096425714286

 $00:52:11.204 \longrightarrow 00:52:13.808$  a number of people in the conventional

NOTE Confidence: 0.812096425714286

 $00:52:13.808 \longrightarrow 00:52:16.574$  care that were able to get to CR was 14.

NOTE Confidence: 0.812096425714286

 $00:52:16.580 \longrightarrow 00:52:18.629$  Not able to get to CR was 62.

NOTE Confidence: 0.812096425714286

00:52:18.629 --> 00:52:20.621 For those who got to CR and were

NOTE Confidence: 0.812096425714286

 $00{:}52{:}20.621 \dashrightarrow 00{:}52{:}22.141$  four teen of them were all four teen

NOTE Confidence: 0.812096425714286

 $00:52:22.141 \longrightarrow 00:52:23.941$  were able to go to transplant those

NOTE Confidence: 0.812096425714286

 $00:52:23.941 \longrightarrow 00:52:26.190$  who did not get to CR of 6218.

NOTE Confidence: 0.812096425714286

 $00{:}52{:}26.190 \dashrightarrow 00{:}52{:}28.200$  Did not receive any further care.

NOTE Confidence: 0.812096425714286

 $00:52:28.200 \longrightarrow 00:52:29.910$  Likely went on to receive what

NOTE Confidence: 0.812096425714286

 $00{:}52{:}29.910 \dashrightarrow 00{:}52{:}31.440$  you call palliative care options

 $00:52:31.440 \longrightarrow 00:52:32.768$  or no further treatment.

NOTE Confidence: 0.812096425714286

 $00:52:32.770 \longrightarrow 00:52:33.866$  Crossed over to IMAP.

NOTE Confidence: 0.812096425714286

 $00:52:33.866 \longrightarrow 00:52:35.822$  The costs over was allowed for people

NOTE Confidence: 0.812096425714286

00:52:35.822 --> 00:52:37.593 who did not reach CR after having

NOTE Confidence: 0.812096425714286

 $00:52:37.593 \longrightarrow 00:52:39.529$  been in the conventional care arm,

NOTE Confidence: 0.812096425714286

 $00:52:39.530 \longrightarrow 00:52:41.756$  but 44 crossed over to MMA.

NOTE Confidence: 0.812096425714286 00:52:41.760 --> 00:52:42.514 Of those, NOTE Confidence: 0.812096425714286

 $00:52:42.514 \longrightarrow 00:52:44.399$  4440 did get to allergenic

NOTE Confidence: 0.812096425714286

 $00:52:44.399 \longrightarrow 00:52:45.530$  stem cell transplant,

NOTE Confidence: 0.812096425714286

 $00:52:45.530 \longrightarrow 00:52:48.392$  and 38 were protocol and were

NOTE Confidence: 0.812096425714286

 $00:52:48.392 \longrightarrow 00:52:50.300$  eligible for protocol analysis.

NOTE Confidence: 0.812096425714286

 $00:52:50.300 \longrightarrow 00:52:50.970$  I'm interested,

NOTE Confidence: 0.812096425714286

 $00{:}52{:}50.970 \dashrightarrow 00{:}52{:}53.315$  I'm trying to run through this past.

NOTE Confidence: 0.812096425714286

 $00:52:53.320 \longrightarrow 00:52:55.804$  The median age is about in the mid 60s.

NOTE Confidence: 0.812096425714286

 $00:52:55.810 \longrightarrow 00:52:57.218$  We had favorable intermediate

 $00:52:57.218 \longrightarrow 00:52:58.274$  and adverse risk.

NOTE Confidence: 0.812096425714286

 $00{:}52{:}58.280 \dashrightarrow 00{:}53{:}00.256$  It included primary induction

NOTE Confidence: 0.812096425714286

00:53:00.256 --> 00:53:01.738 failure earlier relapse,

NOTE Confidence: 0.812096425714286 00:53:01.740 --> 00:53:02.053 relapse, NOTE Confidence: 0.812096425714286

 $00:53:02.053 \longrightarrow 00:53:03.305$  refractory second plus relapse

NOTE Confidence: 0.812096425714286

 $00{:}53{:}03.305 \dashrightarrow 00{:}53{:}05.192$  and I mentioned that with an

NOTE Confidence: 0.812096425714286

00:53:05.192 --> 00:53:06.542 emphasis because those of you

NOTE Confidence: 0.812096425714286

 $00{:}53{:}06.542 \dashrightarrow 00{:}53{:}08.210$  are familiar with asset trial did

NOTE Confidence: 0.812096425714286

 $00:53:08.210 \longrightarrow 00:53:09.560$  not include later relapses and

NOTE Confidence: 0.812096425714286

 $00:53:09.560 \longrightarrow 00:53:11.164$  only with their earlier relapses,

NOTE Confidence: 0.812096425714286

00:53:11.164 --> 00:53:13.943 all of them at about 3 lines

NOTE Confidence: 0.812096425714286

 $00:53:13.943 \longrightarrow 00:53:15.800$  of medium therapies,

NOTE Confidence: 0.812096425714286

00:53:15.800 --> 00:53:18.100 people had already exhausted

NOTE Confidence: 0.812096425714286

 $00:53:18.100 \longrightarrow 00:53:19.250$  targeted therapies.

NOTE Confidence: 0.812096425714286

 $00:53:19.250 \longrightarrow 00:53:20.984$  About 60% of the patient actually

NOTE Confidence: 0.812096425714286

 $00{:}53{:}20.984 \dashrightarrow 00{:}53{:}22.931$  had a KPS score performance score

 $00:53:22.931 \longrightarrow 00:53:24.858$  less than 90% and the matter

NOTE Confidence: 0.812096425714286

00:53:24.858 --> 00:53:26.514 presented and the matter of last

NOTE Confidence: 0.812096425714286

 $00:53:26.514 \longrightarrow 00:53:28.594$  percentage was around 30% and 28%

NOTE Confidence: 0.812096425714286

00:53:28.594 --> 00:53:31.304 which is significantly high truly

NOTE Confidence: 0.812096425714286

 $00:53:31.304 \longrightarrow 00:53:33.910$  reflecting active disease population.

NOTE Confidence: 0.812096425714286

 $00:53:33.910 \longrightarrow 00:53:35.674$  And I'm here are the doses that

NOTE Confidence: 0.812096425714286

 $00:53:35.674 \longrightarrow 00:53:36.430$  are being presented,

NOTE Confidence: 0.812096425714286

 $00{:}53{:}36.430 \longrightarrow 00{:}53{:}39.130$  whether you got a mab or crossover

NOTE Confidence: 0.812096425714286

 $00:53:39.130 \longrightarrow 00:53:41.548$  doses of the matter was about

NOTE Confidence: 0.812096425714286

 $00:53:41.550 \longrightarrow 00:53:44.166$  1616 Gray here where the divided

NOTE Confidence: 0.812096425714286

 $00{:}53{:}44.170 \dashrightarrow 00{:}53{:}46.504$  the crossover time to UTC from

NOTE Confidence: 0.812096425714286

 $00:53:46.504 \longrightarrow 00:53:48.490$  the randomization was 29 days.

NOTE Confidence: 0.812096425714286

 $00{:}53{:}48.490 \dashrightarrow 00{:}53{:}50.152$  With the standard of care on

NOTE Confidence: 0.812096425714286

00:53:50.152 --> 00:53:51.789 the median time was 66 days.

NOTE Confidence: 0.812096425714286

00:53:51.790 --> 00:53:53.704 In the crossover arm the median

 $00:53:53.704 \longrightarrow 00:53:54.980$  days was 61 days.

NOTE Confidence: 0.7668775975

 $00{:}53{:}54.980 \dashrightarrow 00{:}53{:}56.124$  Engraftment was very good.

NOTE Confidence: 0.7668775975

 $00:53:56.124 \longrightarrow 00:53:57.840$  The median time was 14 days

NOTE Confidence: 0.7668775975

 $00:53:57.899 \longrightarrow 00:53:59.777$  which is what we normally see

NOTE Confidence: 0.7668775975

 $00:53:59.777 \longrightarrow 00:54:01.029$  with our standard transplant.

NOTE Confidence: 0.7668775975

 $00:54:01.030 \longrightarrow 00:54:03.025$  Somewhere around there for platelet

NOTE Confidence: 0.7668775975

 $00{:}54{:}03.025 \dashrightarrow 00{:}54{:}05.811$  was about 19 days and the standard

NOTE Confidence: 0.7668775975

00:54:05.811 --> 00:54:08.310 HCT the kind of matching up nicely

NOTE Confidence: 0.7668775975

 $00:54:08.310 \longrightarrow 00:54:11.389$  and the comorbidity index as I was

NOTE Confidence: 0.7668775975

 $00:54:11.389 \longrightarrow 00:54:13.153$  showing here approximately 5050.

NOTE Confidence: 0.7668775975

 $00:54:13.160 \longrightarrow 00:54:16.590$  When when you look at durable yards.

NOTE Confidence: 0.7668775975

 $00.54:16.590 \longrightarrow 00:54:18.132$  Here's the number.

NOTE Confidence: 0.7668775975

00:54:18.132 --> 00:54:20.400 About 22% of the patients that I

NOTE Confidence: 0.7668775975

00:54:20.400 --> 00:54:22.422 had durable CR on the study endpoint

NOTE Confidence: 0.7668775975

 $00:54:22.422 \longrightarrow 00:54:24.227$  versus none in the conventional

NOTE Confidence: 0.7668775975

 $00:54:24.227 \longrightarrow 00:54:26.160$  curriculum in the crossover arm,

 $00:54:26.160 \longrightarrow 00:54:27.968$  91% received transplant with

NOTE Confidence: 0.7668775975

 $00{:}54{:}27.968 --> 00{:}54{:}31.410$  52% of those receiving CR CR.

NOTE Confidence: 0.7668775975

00:54:31.410 --> 00:54:34.050 Posted city maintenance with the TK,

NOTE Confidence: 0.7668775975

 $00:54:34.050 \longrightarrow 00:54:35.744$  I was only allowed for a more

NOTE Confidence: 0.7668775975

 $00:54:35.744 \longrightarrow 00:54:37.030$  patient with three mutations,

NOTE Confidence: 0.7668775975

 $00:54:37.030 \longrightarrow 00:54:38.702$  those toward BCR able

NOTE Confidence: 0.7668775975

00:54:38.702 --> 00:54:39.956 TRANSLOCATIONS that screening.

NOTE Confidence: 0.704628711428571

 $00{:}54{:}42.150 \longrightarrow 00{:}54{:}45.524$  And these are the the survival cost.

NOTE Confidence: 0.704628711428571

 $00:54:45.530 \longrightarrow 00:54:47.866$  The oral survival was doubled with Irma Bomb.

NOTE Confidence: 0.704628711428571

 $00:54:47.870 \longrightarrow 00:54:50.454$  It was 6.4 months compared to 3.2 months.

NOTE Confidence: 0.704628711428571

00:54:50.454 --> 00:54:52.626 One year survival was almost doubled,

NOTE Confidence: 0.704628711428571

 $00:54:52.630 \longrightarrow 00:54:55.930$  26 months was 13 months.

NOTE Confidence: 0.704628711428571

 $00{:}54{:}55.930 \dashrightarrow 00{:}54{:}57.810$  In the crossover covert showing,

NOTE Confidence: 0.704628711428571

 $00:54:57.810 \longrightarrow 00:55:00.603$  the blue line was about 7.1 month and

NOTE Confidence: 0.704628711428571

 $00:55:00.603 \longrightarrow 00:55:04.840$  the survival there was about 3535.8%.

 $00:55:04.840 \longrightarrow 00:55:07.970$  First, sorry.

NOTE Confidence: 0.704628711428571

 $00{:}55{:}07.970 \dashrightarrow 00{:}55{:}09.894$  Forest plots essentially showing

NOTE Confidence: 0.704628711428571

 $00:55:09.894 \longrightarrow 00:55:12.299$  hazard ratios was applicable across

NOTE Confidence: 0.704628711428571

 $00:55:12.299 \longrightarrow 00:55:16.160$  most group except the KPS of 9200.

NOTE Confidence: 0.704628711428571

 $00:55:16.160 \longrightarrow 00:55:18.890$  I relapsed. Refractory now those are

NOTE Confidence: 0.704628711428571

 $00.55:18.890 \longrightarrow 00.55:22.180$  the ones where they crossed the line.

NOTE Confidence: 0.704628711428571

00:55:22.180 --> 00:55:24.021 And and when you look at evently

NOTE Confidence: 0.704628711428571

00:55:24.021 --> 00:55:25.620 survival and intent to trade group,

NOTE Confidence: 0.704628711428571

 $00:55:25.620 \longrightarrow 00:55:30.380$  I'm at a better rate of 28% of 0.2%.

NOTE Confidence: 0.704628711428571

 $00:55:30.380 \longrightarrow 00:55:32.020$  Specifically, when you follow these

NOTE Confidence: 0.704628711428571

 $00{:}55{:}32.020 \to 00{:}55{:}33.660$  patients for long term survival,

NOTE Confidence: 0.704628711428571

 $00:55:33.660 \longrightarrow 00:55:35.480$  six months survival is 100%,

NOTE Confidence: 0.704628711428571

 $00:55:35.480 \longrightarrow 00:55:37.064$  twelve months, 92 percent,

NOTE Confidence: 0.704628711428571

 $00:55:37.064 \longrightarrow 00:55:39.400$  18 months 71% are two years.

NOTE Confidence: 0.704628711428571

 $00:55:39.400 \longrightarrow 00:55:42.005$  Almost 60% of the patients that had

NOTE Confidence: 0.704628711428571

 $00:55:42.005 \longrightarrow 00:55:43.840$  remission were alive and ongoing.

 $00:55:43.840 \longrightarrow 00:55:45.646$  Here are some of the adverse events.

NOTE Confidence: 0.704628711428571

 $00:55:45.650 \longrightarrow 00:55:46.690$  As you can see here,

NOTE Confidence: 0.704628711428571

00.55.46.690 --> 00.55.48.951 we were anticipating a high dose of

NOTE Confidence: 0.704628711428571

 $00:55:48.951 \longrightarrow 00:55:50.660$  chemotherapy might cause problems and

NOTE Confidence: 0.704628711428571

 $00:55:50.660 \longrightarrow 00:55:53.047$  neutropenia was on similar rates both sides.

NOTE Confidence: 0.704628711428571

 $00:55:53.050 \longrightarrow 00:55:54.370$  The mucositis was almost

NOTE Confidence: 0.704628711428571

 $00:55:54.370 \longrightarrow 00:55:55.690$  similar on both sides.

NOTE Confidence: 0.704628711428571

 $00:55:55.690 \longrightarrow 00:55:58.634$  The rates of GVHD was not really different,

NOTE Confidence: 0.704628711428571

 $00:55:58.640 \longrightarrow 00:56:02.430$  but sepsis was lower in the conventional

NOTE Confidence: 0.704628711428571

 $00:56:02.430 \longrightarrow 00:56:05.350$  compared to conventional now.

NOTE Confidence: 0.704628711428571

00:56:05.350 --> 00:56:06.175 So in summary,

NOTE Confidence: 0.704628711428571

00:56:06.175 --> 00:56:07.550 in patients greater than 55

NOTE Confidence: 0.704628711428571

 $00:56:07.550 \longrightarrow 00:56:08.930$  years with active disease,

NOTE Confidence: 0.704628711428571

 $00:56:08.930 \longrightarrow 00:56:12.122$  I'm not followed immediately by reduced

NOTE Confidence: 0.704628711428571

 $00:56:12.122 \longrightarrow 00:56:14.312$  intensity transplant in his population

 $00:56:14.312 \longrightarrow 00:56:16.182$  that's typically not transplant eligible

NOTE Confidence: 0.704628711428571

 $00:56:16.182 \longrightarrow 00:56:18.550$  is now made feasible and possible.

NOTE Confidence: 0.704628711428571

 $00:56:18.550 \longrightarrow 00:56:20.512$  As a result of the study I am having

NOTE Confidence: 0.704628711428571

 $00:56:20.512 \longrightarrow 00:56:22.253$  general was well tolerated and resulted

NOTE Confidence: 0.704628711428571

 $00:56:22.253 \longrightarrow 00:56:24.170$  in engraftment in all those patients

NOTE Confidence: 0.704628711428571

 $00:56:24.170 \longrightarrow 00:56:26.186$  and had a high rate of durable CR

NOTE Confidence: 0.704628711428571

 $00:56:26.186 \longrightarrow 00:56:27.568$  lasting greater than six months.

NOTE Confidence: 0.704628711428571

 $00:56:27.570 \longrightarrow 00:56:29.334$  And for those who have CR lasting

NOTE Confidence: 0.704628711428571

 $00:56:29.334 \longrightarrow 00:56:31.270$  more than six months about 60% of

NOTE Confidence: 0.704628711428571

 $00:56:31.270 \longrightarrow 00:56:33.350$  our life on the long run the rates

NOTE Confidence: 0.704628711428571

 $00{:}56{:}33.350 \dashrightarrow 00{:}56{:}35.898$  of serious adverse events were small.

NOTE Confidence: 0.704628711428571

 $00:56:35.900 \longrightarrow 00:56:37.892$  I am at office of very normal solution

NOTE Confidence: 0.704628711428571

 $00{:}56{:}37.892 \dashrightarrow 00{:}56{:}39.373$  to increase access to transplant

NOTE Confidence: 0.704628711428571

 $00:56:39.373 \longrightarrow 00:56:40.918$  and improve outcomes in patients

NOTE Confidence: 0.704628711428571

 $00:56:40.918 \longrightarrow 00:56:42.789$  that are relapsed and refractory.

NOTE Confidence: 0.704628711428571 00:56:42.790 --> 00:56:43.304 You know,

00:56:43.304 --> 00:56:45.590 I have two more slides and I'm going to,

NOTE Confidence: 0.704628711428571

 $00:56:45.590 \longrightarrow 00:56:47.550$  I'm going to wind up with that.

NOTE Confidence: 0.704628711428571

00:56:47.550 --> 00:56:50.174 Some of you who were at Ash probably

NOTE Confidence: 0.704628711428571

00:56:50.174 --> 00:56:52.520 heard of this trial ASAP trial,

NOTE Confidence: 0.704628711428571

00:56:52.520 --> 00:56:54.888 which is kind of trying to gain access

NOTE Confidence: 0.704628711428571

 $00:56:54.888 \longrightarrow 00:56:56.734$  for alternate transplant for those

NOTE Confidence: 0.704628711428571

00:56:56.734 --> 00:56:58.724 who have primary induction failure,

NOTE Confidence: 0.704628711428571

 $00:56:58.730 \longrightarrow 00:57:00.865$  trying to make a case saying that,

NOTE Confidence: 0.704628711428571

 $00:57:00.870 \longrightarrow 00:57:03.354$  you know the need for further

NOTE Confidence: 0.704628711428571

 $00:57:03.354 \longrightarrow 00:57:04.596$  intensification chemotherapy to

NOTE Confidence: 0.704628711428571

00:57:04.596 --> 00:57:06.622 achieve CR is perhaps not needed as

NOTE Confidence: 0.704628711428571

00:57:06.622 --> 00:57:08.496 long as you can sequentially give

NOTE Confidence: 0.704628711428571

 $00{:}57{:}08.496 \dashrightarrow 00{:}57{:}10.836$  chemotherapy and take them to transplant

NOTE Confidence: 0.704628711428571

 $00{:}57{:}10.836 \dashrightarrow 00{:}57{:}12.776$  if you have a donor available.

NOTE Confidence: 0.704628711428571

00:57:12.776 --> 00:57:15.114 Thereby the kind of trying to show that

 $00:57:15.114 \longrightarrow 00:57:16.752$  you probably don't need to achieve

NOTE Confidence: 0.704628711428571

00:57:16.752 --> 00:57:18.987 CR if you have a donor availability.

NOTE Confidence: 0.704628711428571

00:57:18.990 --> 00:57:20.694 But some of the practices in that study

NOTE Confidence: 0.704628711428571

 $00:57:20.694 \longrightarrow 00:57:22.690$  might not be applicable in the United States.

NOTE Confidence: 0.704628711428571

 $00:57:22.690 \longrightarrow 00:57:24.286$  But for the purposes of discussion

NOTE Confidence: 0.704628711428571

 $00:57:24.286 \longrightarrow 00:57:25.350$  I've left it here.

NOTE Confidence: 0.704628711428571

 $00:57:25.350 \longrightarrow 00:57:27.190$  But I would end my talk by summarizing

NOTE Confidence: 0.704628711428571

 $00:57:27.190 \longrightarrow 00:57:29.268$  this for those of you who are interested.

NOTE Confidence: 0.704628711428571

 $00{:}57{:}29.270 \longrightarrow 00{:}57{:}31.825$  Since ARMA but ASAP are now trying

NOTE Confidence: 0.704628711428571

 $00:57:31.825 \longrightarrow 00:57:34.465$  to advance transplant in the context

NOTE Confidence: 0.704628711428571

 $00:57:34.465 \longrightarrow 00:57:36.285$  of relapse refractory study,

NOTE Confidence: 0.704628711428571

 $00:57:36.290 \longrightarrow 00:57:38.010$  let's let's see what they both talked about.

NOTE Confidence: 0.704628711428571

 $00:57:38.010 \longrightarrow 00:57:39.910$  ASAP Trap was predominantly looking

NOTE Confidence: 0.704628711428571

 $00:57:39.910 \longrightarrow 00:57:41.810$  into fit early relapsed patients

NOTE Confidence: 0.695595272142857

 $00:57:41.870 \longrightarrow 00:57:43.378$  that was primary induction.

NOTE Confidence: 0.695595272142857

 $00:57:43.380 \longrightarrow 00:57:44.943$  They're faster laps.

 $00:57:44.943 \longrightarrow 00:57:47.548$  It uses intensive sequential conditioning.

NOTE Confidence: 0.695595272142857

 $00:57:47.550 \longrightarrow 00:57:49.290$  Our chemotherapy rather followed by

NOTE Confidence: 0.695595272142857

 $00:57:49.290 \longrightarrow 00:57:50.682$  transplant preparation regimen which

NOTE Confidence: 0.695595272142857

00:57:50.682 --> 00:57:52.470 is bluemel TB in an eighth grade.

NOTE Confidence: 0.695595272142857

 $00:57:52.470 \longrightarrow 00:57:54.144$  The flip side to that is one of the

NOTE Confidence: 0.695595272142857

 $00:57:54.144 \longrightarrow 00:57:56.130$  novel therapies that we used to treat

NOTE Confidence: 0.695595272142857

 $00:57:56.130 \longrightarrow 00:57:57.710$  relapsed refractory leukemia was allowed.

NOTE Confidence: 0.695595272142857

 $00:57:57.710 \longrightarrow 00:57:59.862$  So you can argue maybe that's not suitable

NOTE Confidence: 0.695595272142857

 $00{:}57{:}59.862 \dashrightarrow 00{:}58{:}01.448$  for practicing in the United States.

NOTE Confidence: 0.695595272142857

 $00:58:01.450 \longrightarrow 00:58:03.682$  And even then if you know when we've

NOTE Confidence: 0.695595272142857

00:58:03.682 --> 00:58:05.831 known in the past that we use repeated

NOTE Confidence: 0.695595272142857

 $00:58:05.831 \longrightarrow 00:58:06.955$  chemotherapy for labs refractory

NOTE Confidence: 0.695595272142857

 $00{:}58{:}06.955 \dashrightarrow 00{:}58{:}09.107$  disease to make them get into see how

NOTE Confidence: 0.695595272142857

 $00{:}58{:}09.107 \dashrightarrow 00{:}58{:}10.511$  to get the transparent perhaps that's

NOTE Confidence: 0.695595272142857

 $00:58:10.511 \longrightarrow 00:58:12.444$  only about 15 to 20% of the patients.

 $00:58:12.444 \longrightarrow 00:58:14.472$  We think that might impact even

NOTE Confidence: 0.695595272142857

00:58:14.472 --> 00:58:17.210 if you are if you decide to give a

NOTE Confidence: 0.695595272142857

 $00:58:17.210 \longrightarrow 00:58:18.875$  sequential therapy maybe about 700

NOTE Confidence: 0.695595272142857

00:58:18.875 --> 00:58:21.047 to 1000 patients as you're Gerald

NOTE Confidence: 0.695595272142857

 $00:58:21.047 \longrightarrow 00:58:22.906$  summarized it beautifully and may

NOTE Confidence: 0.695595272142857

 $00:58:22.906 \longrightarrow 00:58:24.686$  be eligible to become transparent

NOTE Confidence: 0.695595272142857

 $00:58:24.686 \longrightarrow 00:58:26.628$  using that intensive chemo approach.

NOTE Confidence: 0.695595272142857 00:58:26.628 --> 00:58:27.496 In contrast,

NOTE Confidence: 0.695595272142857

00:58:27.496 --> 00:58:30.100 Sierra included fit or unfit patients

NOTE Confidence: 0.695595272142857

 $00:58:30.100 \longrightarrow 00:58:31.876$  both with primary induction failure or

NOTE Confidence: 0.695595272142857

 $00:58:31.876 \longrightarrow 00:58:33.618$  first relapse who have traditionally

NOTE Confidence: 0.695595272142857

 $00:58:33.618 \longrightarrow 00:58:35.638$  been considered transplant ineligible.

NOTE Confidence: 0.695595272142857

 $00:58:35.640 \longrightarrow 00:58:39.666$  And also included second of later.

NOTE Confidence: 0.695595272142857

 $00:58:39.670 \longrightarrow 00:58:41.546$  Encompassing a extensively relapse

NOTE Confidence: 0.695595272142857

 $00:58:41.546 \longrightarrow 00:58:43.891$  cases including those who are

NOTE Confidence: 0.695595272142857

 $00:58:43.891 \longrightarrow 00:58:46.302$  relapsed with contemporary available

00:58:46.302 --> 00:58:48.178 medications but most people might

NOTE Confidence: 0.695595272142857

00:58:48.178 --> 00:58:50.050 have gone into palliative care are

NOTE Confidence: 0.695595272142857

00:58:50.113 --> 00:58:51.966 now getting eligible to consider

NOTE Confidence: 0.695595272142857

 $00:58:51.966 \longrightarrow 00:58:53.806$  as an extension of transplant.

NOTE Confidence: 0.695595272142857

00:58:53.810 --> 00:58:55.850 And I think as as Doctor Gerard mentioned

NOTE Confidence: 0.695595272142857

 $00:58:55.850 \longrightarrow 00:58:57.973$  he thinks with this concept approximately

NOTE Confidence: 0.695595272142857

00:58:57.973 --> 00:58:59.923 8000 patients who were historically

NOTE Confidence: 0.695595272142857

 $00:58:59.923 \longrightarrow 00:59:01.327$  considered not transparent eligible

NOTE Confidence: 0.695595272142857

 $00:59:01.327 \longrightarrow 00:59:03.247$  may be eligible for other transplant

NOTE Confidence: 0.695595272142857

 $00:59:03.247 \longrightarrow 00:59:05.570$  if you have a donor ready and be available.

NOTE Confidence: 0.695595272142857

00:59:05.570 --> 00:59:08.242 And I posted this drug being explored for

NOTE Confidence: 0.695595272142857

 $00:59:08.242 \longrightarrow 00:59:10.189$  different donors conditioning regimen.

NOTE Confidence: 0.695595272142857

00:59:10.190 --> 00:59:12.030 Both in a hematologic,

NOTE Confidence: 0.695595272142857

 $00:59:12.030 \longrightarrow 00:59:13.870$  both neoplastic and non

NOTE Confidence: 0.695595272142857

 $00:59:13.870 \longrightarrow 00:59:14.790$  neoplastic conditions.

00:59:14.790 --> 00:59:16.309 Going forwards with that I'm going to

NOTE Confidence: 0.695595272142857

 $00:59:16.309 \longrightarrow 00:59:18.088$  invest and thank you all for your attention.

NOTE Confidence: 0.695595272142857

 $00:59:18.090 \longrightarrow 00:59:19.770$  I'll open up the platform provider questions.

NOTE Confidence: 0.695595272142857

 $00:59:19.770 \longrightarrow 00:59:20.378$  Thank you so much.

NOTE Confidence: 0.6043139125

 $00:59:29.850 \longrightarrow 00:59:32.138$  You muted Stewart. Sorry.

NOTE Confidence: 0.593766986666667

00:59:32.190 --> 00:59:35.298 Thanks. Thanks, Louis.

NOTE Confidence: 0.593766986666667

 $00:59:35.300 \longrightarrow 00:59:37.397$  So we have just a few minutes to field

NOTE Confidence: 0.593766986666667

 $00:59:37.397 \longrightarrow 00:59:39.580$  some questions if people want to submit.

NOTE Confidence: 0.59376698666667

00:59:39.580 --> 00:59:41.668 I'll just start with a quick one that

NOTE Confidence: 0.593766986666667

 $00:59:41.668 \longrightarrow 00:59:43.506$  came through the chat that we couldn't

NOTE Confidence: 0.59376698666667

 $00{:}59{:}43.506 \dashrightarrow 00{:}59{:}45.759$  respond to and this is for Doctor Sophie,

NOTE Confidence: 0.593766986666667

 $00:59:45.760 \longrightarrow 00:59:48.912$  can you just comment on the use of

NOTE Confidence: 0.593766986666667

 $00:59:48.912 \longrightarrow 00:59:50.940$  corticosteroids and card T patients?

NOTE Confidence: 0.593766986666667

 $00:59:50.940 \longrightarrow 00:59:51.993$  Are these allowed?

NOTE Confidence: 0.59376698666667

 $00:59:51.993 \longrightarrow 00:59:53.397$  Do they impact therapy?

NOTE Confidence: 0.593766986666667

 $00:59:53.400 \longrightarrow 00:59:56.240$  On paraphrasing the question,

 $00:59:56.240 \longrightarrow 00:59:57.895$  but the question was really

NOTE Confidence: 0.593766986666667

 $00:59:57.895 \longrightarrow 01:00:00.066$  what is the impact of using

NOTE Confidence: 0.593766986666667

 $01:00:00.066 \longrightarrow 01:00:01.850$  steroids in these patients?

NOTE Confidence: 0.825889062142857

 $01:00:02.790 \longrightarrow 01:00:05.470$  Yeah. So we generally try to limit the

NOTE Confidence: 0.825889062142857

 $01:00:05.470 \longrightarrow 01:00:08.749$  use of steroids before cartee collection.

NOTE Confidence: 0.825889062142857

 $01:00:08.750 \longrightarrow 01:00:11.134$  It's it's critical that they have at least.

NOTE Confidence: 0.735509422

01:00:13.470 --> 01:00:16.190 One week window before Cartee.

NOTE Confidence: 0.735509422

 $01:00:16.190 \longrightarrow 01:00:18.830$  We do know that steroids are very lympho

NOTE Confidence: 0.735509422

 $01:00:18.830 \longrightarrow 01:00:20.867$  depleting and the early postpartum

NOTE Confidence: 0.735509422

 $01:00:20.867 \longrightarrow 01:00:23.047$  period when they developed toxicity.

NOTE Confidence: 0.735509422

 $01:00:23.050 \longrightarrow 01:00:25.612$  Though it has been shown that giving

NOTE Confidence: 0.735509422

 $01:00:25.612 \longrightarrow 01:00:28.623$  a short course of either steroids or

NOTE Confidence: 0.735509422

 $01:00:28.623 \longrightarrow 01:00:30.918$  other antibodies like tocilizumab to

NOTE Confidence: 0.735509422

 $01:00:30.918 \longrightarrow 01:00:33.849$  treat cytokine release syndrome or

NOTE Confidence: 0.735509422

 $01:00:33.849 \longrightarrow 01:00:36.262$  neurologic toxicities does not impact

01:00:36.262 --> 01:00:39.090 the long term outcome of these patients.

NOTE Confidence: 0.735509422

 $01{:}00{:}39.090 \dashrightarrow 01{:}00{:}42.936$  But again the steroid tapers are.

NOTE Confidence: 0.735509422

 $01:00:42.940 \longrightarrow 01:00:44.935$  Rather quick, typically less than a week.

NOTE Confidence: 0.846978154210526

 $01:00:48.750 \longrightarrow 01:00:52.198$  OK, thanks. And I see one other one

NOTE Confidence: 0.846978154210526

 $01:00:52.198 \longrightarrow 01:00:55.064$  other question in the chat from

NOTE Confidence: 0.846978154210526

01:00:55.064 --> 01:00:57.459 Doctor Zeiden and that's regards.

NOTE Confidence: 0.846978154210526

 $01:00:57.460 \longrightarrow 01:01:00.622$  The whole issue of remission status

NOTE Confidence: 0.846978154210526

01:01:00.622 --> 01:01:04.362 prior to transplant and asking if in

NOTE Confidence: 0.846978154210526

 $01{:}01{:}04.362 \dashrightarrow 01{:}01{:}07.740$  the ISOMAP study was there a need to

NOTE Confidence: 0.846978154210526

01:01:07.740 --> 01:01:09.500 document CR before the transplant.

NOTE Confidence: 0.846978154210526

 $01:01:09.500 \longrightarrow 01:01:11.460$  So is the short answer is no.

NOTE Confidence: 0.846978154210526

01:01:11.460 --> 01:01:14.624 iMac was part of the transplant conditioning.

NOTE Confidence: 0.846978154210526

 $01:01:14.630 \longrightarrow 01:01:16.820$  So these are people who relapse,

NOTE Confidence: 0.846978154210526

 $01:01:16.820 \longrightarrow 01:01:18.935$  refractory disease had bone marrows

NOTE Confidence: 0.846978154210526

 $01:01:18.935 \longrightarrow 01:01:22.022$  with an average of 30% blasts who

NOTE Confidence: 0.846978154210526

 $01{:}01{:}22.022 \dashrightarrow 01{:}01{:}25.270$  instead of our paradigm of going to

01:01:25.367 --> 01:01:28.014 salvage therapy and requiring remission

NOTE Confidence: 0.846978154210526

 $01:01:28.014 \longrightarrow 01:01:31.310$  that was the that was the control arm.

NOTE Confidence: 0.846978154210526

 $01:01:31.310 \longrightarrow 01:01:33.410$  They just went right to the transplant.

NOTE Confidence: 0.846978154210526

 $01:01:33.410 \longrightarrow 01:01:35.240$  So they got the therapeutic dose

NOTE Confidence: 0.846978154210526

 $01:01:35.240 \longrightarrow 01:01:37.835$  and the the 12 days before the

NOTE Confidence: 0.846978154210526

 $01:01:37.835 \longrightarrow 01:01:39.579$  transplant and that's ablative.

NOTE Confidence: 0.846978154210526

 $01:01:39.580 \longrightarrow 01:01:41.776$  So there's no doing a bone marrow to look.

NOTE Confidence: 0.846978154210526

 $01:01:41.780 \longrightarrow 01:01:44.606$  You saw the average delivery of

NOTE Confidence: 0.846978154210526

 $01:01:44.606 \longrightarrow 01:01:47.020$  radiation there was 16 Gray,

NOTE Confidence: 0.846978154210526

01:01:47.020 --> 01:01:49.358 that's about 3 to 4 Gray higher

NOTE Confidence: 0.846978154210526

 $01:01:49.358 \longrightarrow 01:01:51.089$  total body radiation dose that

NOTE Confidence: 0.846978154210526

 $01:01:51.089 \longrightarrow 01:01:53.063$  we can safely give any patient.

NOTE Confidence: 0.846978154210526

 $01:01:53.070 \longrightarrow 01:01:56.148$  So this is a very ablative

NOTE Confidence: 0.846978154210526

 $01:01:56.150 \longrightarrow 01:01:59.138$  dose of radiotherapy.

NOTE Confidence: 0.846978154210526

 $01:01:59.140 \longrightarrow 01:02:01.835$  And and then marrows are not done

 $01:02:01.835 \longrightarrow 01:02:04.240$  prior to delivering the transplant you

NOTE Confidence: 0.846978154210526

 $01:02:04.240 \longrightarrow 01:02:06.984$  have to rescue the patient with the

NOTE Confidence: 0.846978154210526

 $01:02:07.061 \longrightarrow 01:02:09.372$  graft and the high CR rate confirms

NOTE Confidence: 0.846978154210526

 $01:02:09.372 \longrightarrow 01:02:11.904$  the efficacy of of that agent.

NOTE Confidence: 0.809493941666667

01:02:14.780 --> 01:02:16.028 I think how much? How much?

NOTE Confidence: 0.763167

01:02:17.830 --> 01:02:20.579 So in Americas asking about acquiring

NOTE Confidence: 0.763167

 $01:02:20.579 \longrightarrow 01:02:23.230$  CR in one arm and not the other,

NOTE Confidence: 0.763167

 $01:02:23.230 \longrightarrow 01:02:26.849$  so the other arm was to choose

NOTE Confidence: 0.763167

 $01{:}02{:}26.849 \dashrightarrow 01{:}02{:}28.530$  conventional treatment, you're right.

NOTE Confidence: 0.763167

 $01:02:28.530 \longrightarrow 01:02:29.810$  And then those patients

NOTE Confidence: 0.763167

01:02:29.810 --> 01:02:31.090 don't go to transplant.

NOTE Confidence: 0.763167

 $01:02:31.090 \longrightarrow 01:02:36.456$  Remember this is a group restricted age 55.

NOTE Confidence: 0.763167

01:02:36.456 --> 01:02:39.824 And we don't have,

NOTE Confidence: 0.763167

01:02:39.830 --> 01:02:41.769 if you're referring to the ASAP study,

NOTE Confidence: 0.763167

01:02:41.770 --> 01:02:44.488 we don't have flame PSA regimen,

NOTE Confidence: 0.763167

01:02:44.490 --> 01:02:47.250 which is the popular German regimen.

01:02:47.250 --> 01:02:51.234 And if one looks over 40 years of

NOTE Confidence: 0.763167

 $01{:}02{:}51.234 \dashrightarrow 01{:}02{:}54.473$  evaluations of outcome for allograft

NOTE Confidence: 0.763167

01:02:54.473 --> 01:02:58.038 being the single most predictive.

NOTE Confidence: 0.763167

01:02:58.040 --> 01:02:59.645 Variable for treatment

NOTE Confidence: 0.763167

 $01:02:59.645 \longrightarrow 01:03:01.785$  failure is disease status.

NOTE Confidence: 0.763167

 $01:03:01.790 \longrightarrow 01:03:04.196$  It's an increase in blasts in

NOTE Confidence: 0.763167

 $01:03:04.196 \longrightarrow 01:03:05.800$  the marrow pre transplant.

NOTE Confidence: 0.763167

 $01:03:05.800 \longrightarrow 01:03:06.908$  So remember these these

NOTE Confidence: 0.763167

01:03:06.908 --> 01:03:08.016 were people with actively.

NOTE Confidence: 0.763167

01:03:08.020 --> 01:03:09.670 These weren't people with just

NOTE Confidence: 0.763167

 $01:03:09.670 \longrightarrow 01:03:12.700$  6% blasts in their marrow.

NOTE Confidence: 0.763167

01:03:12.700 --> 01:03:14.239 So they, they,

NOTE Confidence: 0.763167

 $01{:}03{:}14.239 \dashrightarrow 01{:}03{:}17.317$  they were allowed to to crossover,

NOTE Confidence: 0.763167

 $01:03:17.320 \longrightarrow 01:03:19.354$  but these are people who are

NOTE Confidence: 0.763167

 $01:03:19.354 \longrightarrow 01:03:21.202$  conventionally don't go to transplant

 $01:03:21.202 \longrightarrow 01:03:23.357$  around around the world really,

NOTE Confidence: 0.763167

 $01:03:23.360 \longrightarrow 01:03:24.835$  unless they're on a clinical

NOTE Confidence: 0.763167

 $01:03:24.835 \longrightarrow 01:03:26.310$  trial like that German study.

NOTE Confidence: 0.762104

01:03:27.890 --> 01:03:29.430 There's actually an excellent review,

NOTE Confidence: 0.762104

 $01{:}03{:}29.430 \dashrightarrow 01{:}03{:}31.218$  but Zeidan armor and Dan Polia

NOTE Confidence: 0.762104

01:03:31.218 --> 01:03:33.139 Dan Polio about even the need

NOTE Confidence: 0.762104

01:03:33.139 --> 01:03:34.809 for CR after induction therapy.

NOTE Confidence: 0.762104

 $01{:}03{:}34.810 \dashrightarrow 01{:}03{:}36.530$  I'm sure Rama can extrapolate

NOTE Confidence: 0.762104

 $01{:}03{:}36.530 \dashrightarrow 01{:}03{:}38.250$  that into labs refractory setting.

NOTE Confidence: 0.762104

01:03:38.250 --> 01:03:40.105 How CR one came into the foreplay,

NOTE Confidence: 0.762104

 $01:03:40.110 \longrightarrow 01:03:41.286$  whether it's of essence.

NOTE Confidence: 0.762104

 $01:03:41.286 \longrightarrow 01:03:43.499$  I'll refer him back to his own

NOTE Confidence: 0.762104

 $01:03:43.499 \longrightarrow 01:03:45.202$  publication with that which tells you

NOTE Confidence: 0.762104

 $01:03:45.202 \longrightarrow 01:03:47.319$  the real utility of CR in modern times.

NOTE Confidence: 0.702696867857143

01:03:49.190 --> 01:03:53.376 Yeah, what's probably a good subject for

NOTE Confidence: 0.702696867857143

 $01:03:53.376 \longrightarrow 01:03:56.865$  further discussion in our transplant

 $01{:}03{:}56.865 \dashrightarrow 01{:}04{:}00.148$ leukemia meetings. I I slept see

NOTE Confidence: 0.881636893666667

 $01:04:00.240 \longrightarrow 01:04:02.081$  guard also just wanted to say that

NOTE Confidence: 0.881636893666667

 $01:04:02.081 \longrightarrow 01:04:04.198$  this type of therapy is also very

NOTE Confidence: 0.881636893666667

01:04:04.198 --> 01:04:06.106 exciting for other forms of adoptive

NOTE Confidence: 0.881636893666667

01:04:06.171 --> 01:04:08.201 cell therapy because I know that they

NOTE Confidence: 0.881636893666667

01:04:08.201 --> 01:04:10.703 are looking at giving non myeloablative

NOTE Confidence: 0.881636893666667

01:04:10.703 --> 01:04:13.949 doses of this type of radioimmunotherapy

NOTE Confidence: 0.881636893666667

 $01:04:13.949 \longrightarrow 01:04:16.795$  actually at lower doses rather than

NOTE Confidence: 0.881636893666667

 $01:04:16.795 \longrightarrow 01:04:19.025$  ablative for patients pre adoptive

NOTE Confidence: 0.881636893666667

 $01:04:19.100 \longrightarrow 01:04:21.440$  cell therapy and we already have

NOTE Confidence: 0.881636893666667

01:04:21.440 --> 01:04:26.168 data on how radiation might actually.

NOTE Confidence: 0.881636893666667

01:04:26.170 --> 01:04:30.940 Decreased T Reg populations for example,

NOTE Confidence: 0.881636893666667

 $01{:}04{:}30.940 \dashrightarrow 01{:}04{:}32.896$  and that may be actually important

NOTE Confidence: 0.881636893666667

 $01:04:32.896 \longrightarrow 01:04:35.268$  in the postcard T setting as well.

NOTE Confidence: 0.725991024444445

 $01:04:36.830 \longrightarrow 01:04:39.399$  One last question for Doctor Isufi in

 $01:04:39.399 \longrightarrow 01:04:42.996$  the Q&A, how to choose between car T

NOTE Confidence: 0.725991024444445

01:04:42.996 --> 01:04:45.560 cell therapy or immunotherapy, very,

NOTE Confidence: 0.725991024444445

01:04:45.560 --> 01:04:47.760 very appropriate question not just for

NOTE Confidence: 0.725991024444445

01:04:47.760 --> 01:04:50.098 lymphoma, but iris what do you think?

NOTE Confidence: 0.818039439230769

 $01:04:50.340 \longrightarrow 01:04:52.020$  Yeah, so I mean I think that's

NOTE Confidence: 0.818039439230769

 $01:04:52.020 \longrightarrow 01:04:53.969$  a that's a very valid question.

NOTE Confidence: 0.818039439230769

 $01:04:53.970 \longrightarrow 01:04:56.454$  Unfortunately you know immunotherapy

NOTE Confidence: 0.818039439230769

 $01:04:56.454 \longrightarrow 01:05:00.680$  in terms of PD1 PDL one access has

NOTE Confidence: 0.818039439230769

 $01:05:00.680 \longrightarrow 01:05:04.220$  not had very good outcomes in the

NOTE Confidence: 0.818039439230769

01:05:04.220 --> 01:05:06.905 setting of non Hodgkin lymphoma.

NOTE Confidence: 0.818039439230769

 $01{:}05{:}06.910 \dashrightarrow 01{:}05{:}11.670$  Particularly aggressive lymphoma and so.

NOTE Confidence: 0.818039439230769

 $01:05:11.670 \longrightarrow 01:05:13.902$  And you know that those particular

NOTE Confidence: 0.818039439230769

01:05:13.902 --> 01:05:16.900 drugs are not are not have very low

NOTE Confidence: 0.818039439230769

 $01:05:16.900 \longrightarrow 01:05:19.481$  CR rates as single single agents and

NOTE Confidence: 0.818039439230769

 $01:05:19.481 \longrightarrow 01:05:21.987$  they do not add much to combination.

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 $01:05:21.990 \longrightarrow 01:05:25.182$  So I think a court would be preferred

 $01:05:25.182 \longrightarrow 01:05:28.508$  in terms of antibody drug conjugates.

NOTE Confidence: 0.818039439230769

 $01{:}05{:}28.510 \dashrightarrow 01{:}05{:}30.990$  I mean I think that's that's a whole

NOTE Confidence: 0.818039439230769

 $01:05:30.990 \longrightarrow 01:05:33.295$  other class of drugs that is competing

NOTE Confidence: 0.818039439230769

 $01:05:33.295 \longrightarrow 01:05:36.224$  with car T cell therapy in all fronts

NOTE Confidence: 0.818039439230769

01:05:36.224 --> 01:05:37.884 including non Hodgkin lymphoma,

NOTE Confidence: 0.818039439230769

 $01:05:37.890 \longrightarrow 01:05:41.054$  AML and multiple myeloma and I think

NOTE Confidence: 0.818039439230769

 $01:05:41.054 \longrightarrow 01:05:44.438$  we have to look at the targets.

NOTE Confidence: 0.818039439230769

 $01:05:44.440 \longrightarrow 01:05:47.128$  To make sure that when we give these

NOTE Confidence: 0.818039439230769

 $01:05:47.128 \longrightarrow 01:05:48.987$  the rapies the patients retain the

NOTE Confidence: 0.818039439230769

 $01{:}05{:}48.987 \dashrightarrow 01{:}05{:}51.577$  target and and how to sequence them

NOTE Confidence: 0.818039439230769

01:05:51.650 --> 01:05:53.960 is actually a matter of very hot

NOTE Confidence: 0.818039439230769

01:05:53.960 --> 01:05:56.240 debate and ongoing trials right now,

NOTE Confidence: 0.818039439230769

 $01{:}05{:}56.240 \dashrightarrow 01{:}05{:}59.924$  what the best approach might be

NOTE Confidence: 0.818039439230769

 $01:05:59.924 \longrightarrow 01:06:03.280$  with these by specifics I know.

NOTE Confidence: 0.818039439230769

 $01{:}06{:}03.280$  -->  $01{:}06{:}06.376$  There was another question in the in the

Q&A,

 $01:06:06.380 \longrightarrow 01:06:10.980$  for example for, for.

NOTE Confidence: 0.818039439230769

 $01{:}06{:}10.980 \dashrightarrow 01{:}06{:}14.940$  For leukemia in patients who for

NOTE Confidence: 0.818039439230769

01:06:14.940 --> 01:06:17.580 example receive blinatumomab precarity

NOTE Confidence: 0.818039439230769

01:06:17.580 --> 01:06:20.380 you know how do those patients fare

NOTE Confidence: 0.818039439230769

 $01{:}06{:}20.380 \dashrightarrow 01{:}06{:}23.258$  and that because both of those are

NOTE Confidence: 0.818039439230769

01:06:23.258 --> 01:06:25.658 city 19 targeting therapies and so

NOTE Confidence: 0.818039439230769

 $01:06:25.660 \longrightarrow 01:06:28.100$  sequencing is very important there.

NOTE Confidence: 0.818039439230769

 $01:06:28.100 \longrightarrow 01:06:30.206$  And the interpretation of the

NOTE Confidence: 0.818039439230769

 $01{:}06{:}30.206 \dashrightarrow 01{:}06{:}33.666$  data so far is that if they have a

NOTE Confidence: 0.818039439230769

 $01:06:33.666 \longrightarrow 01:06:35.646$  good response to blinatumomab and

NOTE Confidence: 0.818039439230769

 $01:06:35.720 \longrightarrow 01:06:38.096$  they maintain their CD 19 status

NOTE Confidence: 0.818039439230769

 $01:06:38.096 \longrightarrow 01:06:40.200$  pre cartes that they do well.

NOTE Confidence: 0.818039439230769 01:06:40.200 --> 01:06:40.460 However, NOTE Confidence: 0.818039439230769

 $01:06:40.460 \longrightarrow 01:06:42.280$  if they do not have a good

NOTE Confidence: 0.818039439230769

01:06:42.348 --> 01:06:43.830 response to blinatumomab,

 $01:06:43.830 \longrightarrow 01:06:47.425$  they will also respond poorly to

NOTE Confidence: 0.818039439230769

 $01{:}06{:}47.425 \dashrightarrow 01{:}06{:}50.095$  car T unfortunately that's a high

NOTE Confidence: 0.818039439230769

 $01:06:50.095 \longrightarrow 01:06:52.858$  risk group and if they lose City

NOTE Confidence: 0.818039439230769

 $01:06:52.858 \longrightarrow 01:06:55.387$  19 after blina then they actually

NOTE Confidence: 0.818039439230769

01:06:55.387 --> 01:06:58.243 have very poor responses to court.

NOTE Confidence: 0.818039439230769

 $01:06:58.250 \longrightarrow 01:07:01.036$  So we have to be careful about

NOTE Confidence: 0.818039439230769

 $01:07:01.036 \longrightarrow 01:07:03.991$  how we we sequence these therapies

NOTE Confidence: 0.818039439230769

 $01:07:03.991 \longrightarrow 01:07:06.890$  and we have to really monitor.

NOTE Confidence: 0.818039439230769

01:07:06.890 --> 01:07:09.270 I mean I know many academic centers

NOTE Confidence: 0.818039439230769

 $01:07:09.270 \longrightarrow 01:07:11.096$  now when they look at city.

NOTE Confidence: 0.818039439230769

01:07:11.100 --> 01:07:12.438 19 and C22,

NOTE Confidence: 0.818039439230769

01:07:12.438 --> 01:07:15.114 they do not just report for

NOTE Confidence: 0.818039439230769

01:07:15.114 --> 01:07:18.128 example whether it's dim positive,

NOTE Confidence: 0.818039439230769

01:07:18.130 --> 01:07:18.696 you know,

NOTE Confidence: 0.818039439230769

 $01:07:18.696 \longrightarrow 01:07:20.394$  or they will actually report a

NOTE Confidence: 0.818039439230769

 $01:07:20.394 \longrightarrow 01:07:22.349$  number for the level of expression.

 $01:07:22.350 \longrightarrow 01:07:24.138$  And that becomes very important in

NOTE Confidence: 0.818039439230769

01:07:24.138 --> 01:07:26.722 terms of I know that's what the NCI

NOTE Confidence: 0.818039439230769

 $01:07:26.722 \longrightarrow 01:07:28.720$  does and that becomes very important

NOTE Confidence: 0.818039439230769

 $01:07:28.788 \longrightarrow 01:07:30.748$  in terms of what the next therapy

NOTE Confidence: 0.818039439230769

 $01:07:30.748 \longrightarrow 01:07:32.470$  that they use is going to be.

NOTE Confidence: 0.907274934

 $01:07:34.360 \longrightarrow 01:07:36.790$  You know if if I can add to that

NOTE Confidence: 0.907274934

01:07:36.790 --> 01:07:39.004 comment that you know the nature of

NOTE Confidence: 0.907274934

 $01:07:39.004 \longrightarrow 01:07:41.225$  drug development was such that we had

NOTE Confidence: 0.907274934

01:07:41.225 --> 01:07:43.234 to go with enabling and then Karti,

NOTE Confidence: 0.907274934

01:07:43.240 --> 01:07:44.920 Karti despite having heavily

NOTE Confidence: 0.907274934

01:07:44.920 --> 01:07:46.600 treated population had highest

NOTE Confidence: 0.907274934

 $01{:}07{:}46.600 \dashrightarrow 01{:}07{:}49.038$  CR and MRD negative data rates.

NOTE Confidence: 0.907274934

 $01{:}07{:}49.040 \dashrightarrow 01{:}07{:}51.146$  So that kind of tells you that it's a

NOTE Confidence: 0.907274934

01:07:51.146 --> 01:07:52.826 potential drug just that we may not be

NOTE Confidence: 0.907274934

 $01:07:52.826 \longrightarrow 01:07:54.747$  able to get it in time whereas other

 $01:07:54.747 \longrightarrow 01:07:56.764$  drugs may be dispensing it off the shelf.

NOTE Confidence: 0.907274934

 $01:07:56.764 \longrightarrow 01:07:58.004$  In terms of the potential,

NOTE Confidence: 0.907274934

01:07:58.010 --> 01:08:00.450 it's clearly there despite a

NOTE Confidence: 0.907274934

 $01:08:00.450 \longrightarrow 01:08:02.402$  heavily treated population the

NOTE Confidence: 0.907274934

 $01{:}08{:}02.402 \dashrightarrow 01{:}08{:}04.767$  rates of CR compared to Unism.

NOTE Confidence: 0.907274934

01:08:04.770 --> 01:08:05.481 Under Marty negatively,

NOTE Confidence: 0.907274934

 $01:08:05.481 \longrightarrow 01:08:07.388$  there is something that we need to look

NOTE Confidence: 0.907274934

01:08:07.388 --> 01:08:08.816 into it if we're looking into that.

NOTE Confidence: 0.886725964285714

01:08:12.320 --> 01:08:14.497 OK. I think we're out of time.

NOTE Confidence: 0.886725964285714

01:08:14.500 --> 01:08:17.476 Thanks, Doctor Sophie and Doctor Garin,

NOTE Confidence: 0.886725964285714

 $01:08:17.480 \longrightarrow 01:08:19.940$  thanks for all the good questions.

NOTE Confidence: 0.886725964285714

01:08:19.940 --> 01:08:21.984 I hope everybody has a good weekend.

NOTE Confidence: 0.96443205

 $01:08:23.590 \longrightarrow 01:08:24.540$  Thank you.