WEBVTT

- NOTE duration:"01:03:14.9230000"
- NOTE language:en-us
- NOTE Confidence: 0.8286907
- 00:00:00.000 --> 00:00:02.598 Typically this is a CME event

NOTE Confidence: 0.8286907

 $00:00:02.598 \longrightarrow 00:00:04.330$  composed of six sessions.

NOTE Confidence: 0.8286907

 $00{:}00{:}04{.}330 \dashrightarrow 00{:}00{:}07{.}074$  We already had the first session for

NOTE Confidence: 0.8286907

 $00{:}00{:}07{.}074$  -->  $00{:}00{:}10{.}161$  multiple myeloma on January 15th and the NOTE Confidence: 0.8286907

00:00:10.161 --> 00:00:12.456 lymphoid malignancy session last week.

NOTE Confidence: 0.8286907

 $00:00:12.460 \longrightarrow 00:00:15.804$  Today will be updating you on the myeloid

NOTE Confidence: 0.8286907

 $00:00:15.804 \dashrightarrow 00:00:18.702$  malignancy and next week we have an

NOTE Confidence: 0.8286907

 $00:00:18.702 \dashrightarrow 00:00:21.357$  update on pediatric leukemia and also NOTE Confidence: 0.8286907

 $00:00:21.357 \rightarrow 00:00:23.749$  adult acute lymphoblastic leukemia.

NOTE Confidence: 0.8286907

 $00:00:23.750 \longrightarrow 00:00:26.216$  February 12th will be classical or

NOTE Confidence: 0.8286907

 $00{:}00{:}26.216 \dashrightarrow 00{:}00{:}28.692$  non benign hematology and we will

NOTE Confidence: 0.8286907

00:00:28.692 -> 00:00:30.954 conclude on February 19th with cell

NOTE Confidence: 0.8286907

 $00:00:30.954 \dashrightarrow 00:00:33.430$  therapy and transplantation updates.

NOTE Confidence: 0.8444918

 $00:00:38.570 \longrightarrow 00:00:40.280$  So as you can tell,

- NOTE Confidence: 0.8444918
- $00{:}00{:}40{.}280 \dashrightarrow 00{:}00{:}42{.}392$  there are many great abstracts that

 $00{:}00{:}42.392 \dashrightarrow 00{:}00{:}44.709$  are being presented in ash this year,

NOTE Confidence: 0.8444918

 $00:00:44.710 \longrightarrow 00:00:46.335$  and it's very difficult to

NOTE Confidence: 0.8444918

 $00:00:46.335 \longrightarrow 00:00:48.460$  try to cover all of these,

NOTE Confidence: 0.8444918

 $00:00:48.460 \longrightarrow 00:00:50.160$  especially with the time limitation.

NOTE Confidence: 0.8444918

 $00{:}00{:}50{.}160 \dashrightarrow 00{:}00{:}52{.}020$  So here the abstracts that have

NOTE Confidence: 0.8444918

 $00{:}00{:}52{.}020 \dashrightarrow 00{:}00{:}54{.}001$  been selected in this session and

NOTE Confidence: 0.8444918

 $00:00:54.001 \rightarrow 00:00:56.035$  in the other sessions basically are

NOTE Confidence: 0.8444918

 $00:00:56.035 \rightarrow 00:00:58.010$  chosen for their highest impact,

NOTE Confidence: 0.8444918

 $00{:}00{:}58.010 \dashrightarrow 00{:}01{:}00.056$  and the ones that are most

NOTE Confidence: 0.8444918

00:01:00.056 --> 00:01:00.738 relevant clinically,

NOTE Confidence: 0.8444918

 $00{:}01{:}00{.}740 \dashrightarrow 00{:}01{:}02.828$  especially in areas of unmet clinical

NOTE Confidence: 0.8444918

 $00:01:02.828 \rightarrow 00:01:04.951$  need with decided to group them

NOTE Confidence: 0.8444918

 $00{:}01{:}04{.}951 \dashrightarrow 00{:}01{:}07{.}282$  basically by the disease area AML MD's.

NOTE Confidence: 0.8444918

00:01:07.290 --> 00:01:09.747 And my love I almyra preffective neoplasms.

 $00:01:09.750 \longrightarrow 00:01:11.964$  Of course, that doesn't mean that

NOTE Confidence: 0.8444918

 $00:01:11.964 \longrightarrow 00:01:13.828$  the other abstracts that are

NOTE Confidence: 0.8444918

 $00:01:13.828 \dashrightarrow 00:01:15.736$  not presented are not as great.

NOTE Confidence: 0.8444918

 $00:01:15.740 \longrightarrow 00:01:17.500$  It just as time limitation,

NOTE Confidence: 0.8444918

00:01:17.500 --> 00:01:19.292 and also important to remember that a

NOTE Confidence: 0.8444918

00:01:19.292 --> 00:01:21.556 lot of the abstracts contain preliminary

NOTE Confidence: 0.8444918

 $00:01:21.556 \dashrightarrow 00:01:23.476$  information and preliminary data,

NOTE Confidence: 0.8444918

 $00:01:23.480 \longrightarrow 00:01:25.388$  and they have not been peer

NOTE Confidence: 0.8444918

 $00{:}01{:}25{.}388 \dashrightarrow 00{:}01{:}27{.}350$  reviewed or finalize or published.

NOTE Confidence: 0.8444918

 $00:01:27.350 \longrightarrow 00:01:29.541$  So these results always have to be

NOTE Confidence: 0.8444918

 $00{:}01{:}29{.}541 \dashrightarrow 00{:}01{:}31{.}930$  taken with that consideration in mind.

NOTE Confidence: 0.8444918

 $00{:}01{:}31{.}930 \dashrightarrow 00{:}01{:}34{.}079$  We also like to thank all the

NOTE Confidence: 0.8444918

 $00{:}01{:}34.079 \dashrightarrow 00{:}01{:}35.506$  authors of those abstracts

NOTE Confidence: 0.8444918

 $00:01:35.506 \longrightarrow 00:01:37.676$  who have shared their slides.

NOTE Confidence: 0.8444918

 $00{:}01{:}37.680 \dashrightarrow 00{:}01{:}39.626$  With us for this presentation at the

NOTE Confidence: 0.8444918

 $00:01:39.626 \rightarrow 00:01:41.830$  end of the entire Series A recording

- NOTE Confidence: 0.8444918
- $00:01:41.830 \dashrightarrow 00:01:44.216$  of this session and the other sessions

 $00:01:44.216 \rightarrow 00:01:46.806$  will be available on the subsequent week.

NOTE Confidence: 0.8444918

 $00:01:46.810 \longrightarrow 00:01:49.386$  An slice of each presentation that will

NOTE Confidence: 0.8444918

 $00:01:49.386 \rightarrow 00:01:51.844$  also be available for your review and

NOTE Confidence: 0.8444918

 $00:01:51.844 \rightarrow 00:01:54.560$  for people who cannot make the live event.

NOTE Confidence: 0.8444918

 $00:01:54.560 \rightarrow 00:01:57.264$  At the end of the six session series,

NOTE Confidence: 0.8444918

00:01:57.270 --> 00:01:58.965 CME Credit will be provided

NOTE Confidence: 0.8444918

 $00{:}01{:}58{.}965 \dashrightarrow 00{:}02{:}00{.}660$  for those who claim it.

NOTE Confidence: 0.8444918

 $00:02:00.660 \dashrightarrow 00:02:05.079$  You will have to fill a quick form and.

NOTE Confidence: 0.8444918

 $00:02:05.080 \dashrightarrow 00:02:07.660$  Supply some feedback to claim the

NOTE Confidence: 0.8444918

 $00{:}02{:}07.660 \dashrightarrow 00{:}02{:}10.990$  CME credit at the end of the series.

NOTE Confidence: 0.8444918

00:02:10.990 --> 00:02:12.630 So today we'll be covering

NOTE Confidence: 0.8444918

 $00:02:12.630 \longrightarrow 00:02:13.614$  the myeloid neoplasms.

NOTE Confidence: 0.8444918

00:02:13.620 --> 00:02:15.270 As you can see here,

NOTE Confidence: 0.8444918

 $00{:}02{:}15{.}270 \dashrightarrow 00{:}02{:}17{.}573$  I will be updating you for Milo

 $00:02:17.573 \rightarrow 00:02:18.560$  dysplastic syndromes then,

NOTE Confidence: 0.8444918

00:02:18.560 --> 00:02:20.786 Doctor Orish Alice will update us on

NOTE Confidence: 0.8444918

00:02:20.786 --> 00:02:22.829 acute myeloid leukemia and finally doctor,

NOTE Confidence: 0.8444918

 $00:02:22.830 \longrightarrow 00:02:24.480$  but also full update us

NOTE Confidence: 0.8444918

 $00:02:24.480 \longrightarrow 00:02:25.140$  on myeloproliferative.

NOTE Confidence: 0.8444918

 $00{:}02{:}25{.}140 \dashrightarrow 00{:}02{:}27{.}156$  Neoplasm's will try to stick to

NOTE Confidence: 0.8444918

 $00:02:27.156 \longrightarrow 00:02:29.727$  the times that you can see here so

NOTE Confidence: 0.8444918

 $00{:}02{:}29{.}727 \dashrightarrow 00{:}02{:}31{.}886$  that we can allow some time for

NOTE Confidence: 0.8444918

 $00{:}02{:}31.886 \dashrightarrow 00{:}02{:}34.016$  questions in the last 10 minutes.

NOTE Confidence: 0.8444918

 $00:02:34.020 \rightarrow 00:02:36.644$  We can stay a few minutes beyond one.

NOTE Confidence: 0.8444918

 $00:02:36.650 \longrightarrow 00:02:39.922$  For those of you who can stay if

NOTE Confidence: 0.8444918

 $00:02:39.922 \rightarrow 00:02:43.090$  there are many questions as well.

NOTE Confidence: 0.8444918

 $00:02:43.090 \longrightarrow 00:02:45.118$  So I'll start with the updates

NOTE Confidence: 0.8444918

 $00:02:45.118 \dashrightarrow 00:02:47.220$  on my latest ostick syndromes.

NOTE Confidence: 0.8444918

 $00{:}02{:}47{.}220 \dashrightarrow 00{:}02{:}50{.}410$  So these are my disclosures.

NOTE Confidence: 0.8444918

 $00:02:50.410 \rightarrow 00:02:53.226$  So I'm just as many of you know,

- NOTE Confidence: 0.8444918
- $00:02:53.230 \rightarrow 00:02:54.985$  their management is really highly

 $00:02:54.985 \longrightarrow 00:02:55.687$  risk adaptive.

NOTE Confidence: 0.8444918

 $00:02:55.690 \rightarrow 00:02:57.300$  It's somewhat unusual compared to

NOTE Confidence: 0.8444918

 $00:02:57.300 \longrightarrow 00:02:58.910$  other malignancy's in which the

NOTE Confidence: 0.8444918

 $00:02:58.959 \rightarrow 00:03:00.108$  interventions vary significantly

NOTE Confidence: 0.8444918

 $00:03:00.108 \longrightarrow 00:03:02.023$  all the way from observation.

NOTE Confidence: 0.8444918

00:03:02.030 --> 00:03:03.790 For patients with lower risk,

NOTE Confidence: 0.8444918

 $00{:}03{:}03{.}790 \dashrightarrow 00{:}03{:}05{.}904$  MD S All the way to recommending

NOTE Confidence: 0.8444918

00:03:05.904 --> 00:03:07.660 a very aggressive intervention,

NOTE Confidence: 0.8444918

00:03:07.660 --> 00:03:08.968 like allogenic bone marrow

NOTE Confidence: 0.8444918

 $00{:}03{:}08{.}968 \dashrightarrow 00{:}03{:}10{.}276$  transplantation for patients who

NOTE Confidence: 0.8444918

00:03:10.276 --> 00:03:11.879 have very aggressive disease,

NOTE Confidence: 0.8444918

 $00:03:11.880 \longrightarrow 00:03:13.640$  which have a prognosis almost

NOTE Confidence: 0.8444918

 $00{:}03{:}13.640 \dashrightarrow 00{:}03{:}15.048$  like acute myeloid leukemia.

NOTE Confidence: 0.8444918

 $00:03:15.050 \rightarrow 00:03:17.507$  In the most aggressive forms of Andy's,

 $00:03:17.510 \rightarrow 00:03:19.974$  this is actually a schema from 2013,

NOTE Confidence: 0.8444918

 $00{:}03{:}19{.}980 \dashrightarrow 00{:}03{:}23{.}180$  and the reason I'm showing you this one.

NOTE Confidence: 0.8444918

 $00:03:23.180 \longrightarrow 00:03:26.618$  From seven or eight years ago is be cause.

NOTE Confidence: 0.8444918

 $00:03:26.620 \longrightarrow 00:03:28.744$  Not much really has changed in

NOTE Confidence: 0.8444918

 $00{:}03{:}28{.}744 \dashrightarrow 00{:}03{:}31{.}011$  the schema in the management of

NOTE Confidence: 0.8444918

00:03:31.011 -> 00:03:33.699 Andy as until last year until 2020

NOTE Confidence: 0.8444918

 $00{:}03{:}33{.}699 \dashrightarrow 00{:}03{:}36{.}898$  and in 2020 we have the first 2

NOTE Confidence: 0.8444918

00:03:36.898 --> 00:03:38.071 approvers basically since

NOTE Confidence: 0.8375796

 $00{:}03{:}38{.}080 \dashrightarrow 00{:}03{:}40{.}936$  2006 so we had 14 years without any

NOTE Confidence: 0.8375796

00:03:40.936 --> 00:03:43.557 approvals for Andy's until 2020 when we NOTE Confidence: 0.8375796

 $00{:}03{:}43.557 \dashrightarrow 00{:}03{:}46.479$  have two drugs that have been approved.

NOTE Confidence: 0.8375796

00:03:46.480 --> 00:03:49.014 One of them is last battleship which

NOTE Confidence: 0.8375796

 $00{:}03{:}49{.}014 \dashrightarrow 00{:}03{:}51{.}449$  is a transforming growth factor beta,

NOTE Confidence: 0.8375796

 $00{:}03{:}51{.}450 \dashrightarrow 00{:}03{:}54{.}120$  an inhibitor disinhibits. Elegant and.

NOTE Confidence: 0.8375796

00:03:54.120 --> 00:03:56.124 This is recommended for patients who NOTE Confidence: 0.8375796

 $00:03:56.124 \rightarrow 00:03:58.543$  have lower risk MD's who have any

- NOTE Confidence: 0.8375796
- $00:03:58.543 \rightarrow 00:04:00.577$  meandering senior class and other drug,

 $00{:}04{:}00{.}580 \dashrightarrow 00{:}04{:}01{.}940$  was an oral decitabine.

NOTE Confidence: 0.8375796

00:04:01.940 --> 00:04:03.980 An oral version of this item,

NOTE Confidence: 0.8375796

 $00:04:03.980 \longrightarrow 00:04:06.360$  in that we will be talking about,

NOTE Confidence: 0.8375796

 $00{:}04{:}06{.}360 \dashrightarrow 00{:}04{:}09{.}237$  but this was also approved in late

NOTE Confidence: 0.8375796

00:04:09.237 --> 00:04:11.719 2024 patients with high risk MD's.

NOTE Confidence: 0.8375796

 $00{:}04{:}11.720 \dashrightarrow 00{:}04{:}14.504$  So I think it's important to start the

NOTE Confidence: 0.8375796

 $00:04:14.504 \rightarrow 00:04:16.454$  presentation by highlighting that high

NOTE Confidence: 0.8375796

 $00{:}04{:}16{.}454 \dashrightarrow 00{:}04{:}19{.}599$  unmet need for patients with high risk MD S.

NOTE Confidence: 0.8375796

 $00{:}04{:}19{.}600 \dashrightarrow 00{:}04{:}21{.}952$  So these are some real life analysis

NOTE Confidence: 0.8375796

 $00:04:21.952 \longrightarrow 00:04:23.934$  that showed that despite the

NOTE Confidence: 0.8375796

 $00:04:23.934 \rightarrow 00:04:25.738$  introduction of hypomethylating agents

NOTE Confidence: 0.8375796

 $00{:}04{:}25.738 \dashrightarrow 00{:}04{:}28.426$  in for treatment for high risk MD

NOTE Confidence: 0.8375796

 $00{:}04{:}28{.}426 \dashrightarrow 00{:}04{:}30{.}697$  as the outcomes or me and pull the

NOTE Confidence: 0.8375796

 $00:04:30.697 \longrightarrow 00:04:33.196$  overall responses is around 40 to 50%.

 $00:04:33.200 \rightarrow 00:04:33.557$  However,

NOTE Confidence: 0.8375796

00:04:33.557 --> 00:04:35.699 the complete response rate is only

NOTE Confidence: 0.8375796

 $00{:}04{:}35{.}699 \dashrightarrow 00{:}04{:}38{.}295$  around 15% and most of those responses

NOTE Confidence: 0.8375796

 $00{:}04{:}38{.}295 \dashrightarrow 00{:}04{:}40{.}675$  are limited and most patients die

NOTE Confidence: 0.8375796

 $00{:}04{:}40.675 \dashrightarrow 00{:}04{:}42.865$  from the disease relatively quickly.

NOTE Confidence: 0.8375796

 $00{:}04{:}42.870 \dashrightarrow 00{:}04{:}45.453$  You can see here previous real life

NOTE Confidence: 0.8375796

 $00:04:45.453 \dashrightarrow 00:04:47.823$  analysis that we conducted for patients

NOTE Confidence: 0.8375796

 $00:04:47.823 \longrightarrow 00:04:50.602$  who receive is cited in or decide

NOTE Confidence: 0.8375796

00:04:50.678 --> 00:04:53.423 to be in and you can see the median

NOTE Confidence: 0.8375796

 $00{:}04{:}53{.}423 \dashrightarrow 00{:}04{:}55{.}202$  overall survival for older patients.

NOTE Confidence: 0.8375796

 $00{:}04{:}55{.}202 \dashrightarrow 00{:}04{:}57{.}410$  And this was a serious Medicare

NOTE Confidence: 0.8375796

00:04:57.473 --> 00:04:59.753 analysis was eleven months while for

NOTE Confidence: 0.8375796

00:04:59.753 --> 00:05:01.988 patients who were younger and were

NOTE Confidence: 0.8375796

 $00{:}05{:}01{.}988 \dashrightarrow 00{:}05{:}03{.}938$  referred to tertiary big centers in

NOTE Confidence: 0.8375796

 $00:05:03.938 \dashrightarrow 00:05:05.676$  the MD's Clinical Research Consortium.

NOTE Confidence: 0.8375796

 $00:05:05.676 \rightarrow 00:05:08.210$  The median overall survival was 17 months.

- NOTE Confidence: 0.8375796
- $00:05:08.210 \longrightarrow 00:05:10.807$  So basically it's much lower than what

 $00:05:10.807 \rightarrow 00:05:13.079$  is generally described in the literature.

NOTE Confidence: 0.8375796

 $00:05:13.080 \longrightarrow 00:05:14.001$  On 24 months,

NOTE Confidence: 0.8375796

 $00:05:14.001 \rightarrow 00:05:15.843$  and for patients who progress after

NOTE Confidence: 0.8375796

00:05:15.843 --> 00:05:17.720 receiving those hypomethylating agents,

NOTE Confidence: 0.8375796

 $00{:}05{:}17.720 \dashrightarrow 00{:}05{:}19.510$  their survival is even worse.

NOTE Confidence: 0.8375796

 $00:05:19.510 \longrightarrow 00:05:21.448$  This is an important study that

NOTE Confidence: 0.8375796

 $00:05:21.448 \rightarrow 00:05:23.430$  was published by our colleague,

NOTE Confidence: 0.8375796

 $00:05:23.430 \longrightarrow 00:05:24.838$  Doctor to my Propay,

NOTE Confidence: 0.8375796

 $00:05:24.838 \rightarrow 00:05:26.598$  showing that the median survival

NOTE Confidence: 0.8375796

 $00:05:26.598 \rightarrow 00:05:28.068$  was only five months.

NOTE Confidence: 0.8375796

00:05:28.070 --> 00:05:29.840 Basically after failure of hypomethylating

NOTE Confidence: 0.8375796

 $00{:}05{:}29{.}840 \dashrightarrow 00{:}05{:}32{.}595$  agents and I think all of this data

NOTE Confidence: 0.8375796

 $00{:}05{:}32{.}595 \dashrightarrow 00{:}05{:}34{.}145$  highlight the significant unmet need

NOTE Confidence: 0.8375796

 $00{:}05{:}34{.}145 \dashrightarrow 00{:}05{:}36{.}471$  that we should not just routinely

00:05:36.471 -> 00:05:37.707 use hypomethylating agents.

NOTE Confidence: 0.8375796

00:05:37.710 -> 00:05:40.392 But we should try to improve

NOTE Confidence: 0.8375796

 $00:05:40.392 \longrightarrow 00:05:42.180$  the outcomes of patients.

NOTE Confidence: 0.8375796

 $00:05:42.180 \longrightarrow 00:05:44.329$  So going to some of the major

NOTE Confidence: 0.8375796

 $00:05:44.329 \rightarrow 00:05:46.069$  highlights from the ash meeting,

NOTE Confidence: 0.8375796

 $00{:}05{:}46.070 \dashrightarrow 00{:}05{:}48.008$  I will start with this one.

NOTE Confidence: 0.8375796

 $00:05:48.010 \dashrightarrow 00:05:50.594$  This is a drug that I just mentioned.

NOTE Confidence: 0.8375796

00:05:50.600 --> 00:05:52.721 Oral deci TB in that has just

NOTE Confidence: 0.8375796

 $00{:}05{:}52{.}721 \dashrightarrow 00{:}05{:}54{.}489$  been approved in August 2020,

NOTE Confidence: 0.8375796

 $00{:}05{:}54{.}490 \dashrightarrow 00{:}05{:}56{.}770$  so decide to be in the reason why

NOTE Confidence: 0.8375796

 $00{:}05{:}56{.}770 \dashrightarrow 00{:}05{:}59{.}288$  you cannot give this ITB in orally

NOTE Confidence: 0.8375796

 $00:05:59.288 \rightarrow 00:06:01.168$  is because it's highly metabolised

NOTE Confidence: 0.8375796

 $00:06:01.234 \rightarrow 00:06:02.920$  in the gut by this enzyme.

NOTE Confidence: 0.8375796

 $00:06:02.920 \rightarrow 00:06:05.504$  Citadine dominates as well as in the liver,

NOTE Confidence: 0.8375796

 $00:06:05.510 \longrightarrow 00:06:07.778$  so you have significant first pass effect.

NOTE Confidence: 0.8375796

 $00:06:07.780 \rightarrow 00:06:10.468$  So what was done here in to develop

- NOTE Confidence: 0.8375796
- $00:06:10.468 \rightarrow 00:06:13.007$  this drug which is called in covi.

 $00:06:13.010 \dashrightarrow 00:06:15.873$  Is to combine decided being with an

NOTE Confidence: 0.8375796

00:06:15.873 --> 00:06:18.474 inhibitor of this city in Germany

NOTE Confidence: 0.8375796

 $00:06:18.474 \longrightarrow 00:06:21.066$  is called sisters OR and the

NOTE Confidence: 0.8375796

 $00:06:21.066 \longrightarrow 00:06:22.579$  combination in phase one.

NOTE Confidence: 0.8375796

 $00{:}06{:}22.580 \dashrightarrow 00{:}06{:}25.572$  Phase two trials was shown to result in

NOTE Confidence: 0.8375796

00:06:25.572 --> 00:06:27.570 similar pharmacodynamic and pharmacodynamic.

NOTE Confidence: 0.8306338

00:06:29.720 --> 00:06:32.216 Activities to the Ivy decided mean,

NOTE Confidence: 0.8306338

 $00{:}06{:}32.220 \dashrightarrow 00{:}06{:}35.172$  so this combination was taken to a phase

NOTE Confidence: 0.8306338

 $00:06:35.172 \dashrightarrow 00:06:37.809$  three trial that looked at pharmacokinetic

NOTE Confidence: 0.8306338

 $00:06:37.809 \longrightarrow 00:06:40.539$  equivalence as a final end point,

NOTE Confidence: 0.8306338

 $00{:}06{:}40{.}540 \dashrightarrow 00{:}06{:}43{.}578$  and this trial was presented in 2019

NOTE Confidence: 0.8306338

 $00{:}06{:}43.578 \dashrightarrow 00{:}06{:}46.776$  and you can see A at the bottom.

NOTE Confidence: 0.8306338

00:06:46.780 --> 00:06:49.685 The final conclusion, which you have 99%

NOTE Confidence: 0.8306338

00:06:49.690 --> 00:06:50.938 equivalence pharmacokinetic equivalence

00:06:50.938 - > 00:06:53.018 between oral and Ivy decitabine.

NOTE Confidence: 0.8306338

 $00{:}06{:}53{.}020 \dashrightarrow 00{:}06{:}56{.}748$  However, the follow up from this study was

NOTE Confidence: 0.8306338

 $00{:}06{:}56{.}748 \dashrightarrow 00{:}06{:}59{.}659$  somewhat limited and an important update. NOTE Confidence: 0.8306338

00:06:59.660 --> 00:07:02.061 Was presented in the American side of

NOTE Confidence: 0.8306338

 $00:07:02.061 \dashrightarrow 00:07:04.078$  hematology meeting this year by Doctor

NOTE Confidence: 0.8306338

00:07:04.078 --> 00:07:06.756 Savona, and this trial is actually a trial.

NOTE Confidence: 0.8306338

 $00:07:06.760 \longrightarrow 00:07:08.310$  We participated in an many

NOTE Confidence: 0.8306338

 $00:07:08.310 \longrightarrow 00:07:10.480$  of you in the care centers,

NOTE Confidence: 0.8306338

 $00{:}07{:}10.480 \dashrightarrow 00{:}07{:}12.170$  have refer patients for us,

NOTE Confidence: 0.8306338

 $00:07:12.170 \longrightarrow 00:07:14.186$  so we thank you for that.

NOTE Confidence: 0.8306338

 $00{:}07{:}14.190 \dashrightarrow 00{:}07{:}16.374$  So the update from the certain study

NOTE Confidence: 0.8306338

 $00{:}07{:}16.374 \dashrightarrow 00{:}07{:}18.116$  showed that the complete response

NOTE Confidence: 0.8306338

00:07:18.116 --> 00:07:20.653 rate was around 22% and the median

NOTE Confidence: 0.8306338

 $00:07:20.653 \dashrightarrow 00:07:22.408$  overall survival after median follow

NOTE Confidence: 0.8306338

 $00{:}07{:}22{.}408 \dashrightarrow 00{:}07{:}24{.}990$  up of 24 months has not yet been

NOTE Confidence: 0.8306338

 $00{:}07{:}24.990 \dashrightarrow 00{:}07{:}26.614$  reached and the median duration

- NOTE Confidence: 0.8306338
- $00:07:26.614 \rightarrow 00:07:28.726$  of best response was 12 months.
- NOTE Confidence: 0.8306338
- $00:07:28.730 \longrightarrow 00:07:31.350$  So I think well.
- NOTE Confidence: 0.8306338
- $00:07:31.350 \rightarrow 00:07:33.966$  The follow up still needs to be longer.
- NOTE Confidence: 0.8306338
- $00:07:33.970 \dashrightarrow 00:07:36.546$  It's important to know that for now it NOTE Confidence: 0.8306338
- $00{:}07{:}36{.}546 \dashrightarrow 00{:}07{:}38{.}974$  seems that oral version of Decitabine is
- NOTE Confidence: 0.8306338
- $00{:}07{:}38{.}974 \dashrightarrow 00{:}07{:}41{.}808$  very similar to how we decide to be in,
- NOTE Confidence: 0.8306338
- $00{:}07{:}41.810 \dashrightarrow 00{:}07{:}43.916$  and I think we have a lot of data
- NOTE Confidence: 0.8306338
- $00:07:43.916 \longrightarrow 00:07:46.090$  now suggesting that it can be
- NOTE Confidence: 0.8306338
- $00{:}07{:}46.090 \dashrightarrow 00{:}07{:}47.960$  completely replacing the IBD side
- NOTE Confidence: 0.8306338
- $00:07:48.024 \rightarrow 00:07:49.989$  been as monotherapy for Andy's.
- NOTE Confidence: 0.8306338
- $00:07:49.990 \longrightarrow 00:07:52.662$  And on this note also I like to
- NOTE Confidence: 0.8306338
- $00{:}07{:}52.662 \dashrightarrow 00{:}07{:}54.965$  highlight that many of you are aware
- NOTE Confidence: 0.8306338
- $00{:}07{:}54.965 \dashrightarrow 00{:}07{:}57.560$  that there is an oral version of is
- NOTE Confidence: 0.8306338
- $00{:}07{:}57{.}560 \dashrightarrow 00{:}08{:}00{.}210$  cited in the CC-486 or on your leg.
- NOTE Confidence: 0.8306338
- $00:08:00.210 \longrightarrow 00:08:01.850$  That has been approved,
- NOTE Confidence: 0.8306338

 $00:08:01.850 \longrightarrow 00:08:03.806$  but this is was only approved

NOTE Confidence: 0.8306338

00:08:03.806 --> 00:08:06.009 in AML on your egg Aurora.

NOTE Confidence: 0.8306338

 $00:08:06.010 \longrightarrow 00:08:08.439$  Laser sighted in is very different in

NOTE Confidence: 0.8306338

00:08:08.439 --> 00:08:10.178 pharmacokinetics. Ann for Neko Dynamics.

NOTE Confidence: 0.8306338

00:08:10.178 --> 00:08:12.260 Then I be decided in an.

NOTE Confidence: 0.8306338

 $00{:}08{:}12.260 \dashrightarrow 00{:}08{:}13.078$  I'm sorry.

NOTE Confidence: 0.8306338

 $00:08:13.078 \rightarrow 00:08:15.941$  Then Ivy is exciting in and therefore

NOTE Confidence: 0.8306338

 $00:08:15.941 \longrightarrow 00:08:18.920$  should not be used in MD as its only

NOTE Confidence: 0.8306338

00:08:18.920 --> 00:08:21.445 approved for AML and I think it should

NOTE Confidence: 0.8306338

 $00{:}08{:}21.445 \dashrightarrow 00{:}08{:}23.708$  be used only in that sitting and

NOTE Confidence: 0.8306338

 $00{:}08{:}23.708 \dashrightarrow 00{:}08{:}25.784$  AML only in the maintenance setting.

NOTE Confidence: 0.8306338

 $00:08:25.790 \dashrightarrow 00:08:27.146$  After achieving remission with

NOTE Confidence: 0.8306338

 $00{:}08{:}27.146 \dashrightarrow 00{:}08{:}28.841$  intensive chemotherapy and not as

NOTE Confidence: 0.8306338

 $00:08:28.841 \rightarrow 00:08:30.777$  a replacement as monotherapy or.

NOTE Confidence: 0.8306338

 $00{:}08{:}30{.}780 \dashrightarrow 00{:}08{:}32{.}495$  In combination with Venator class

NOTE Confidence: 0.8306338

 $00:08:32.495 \longrightarrow 00:08:34.580$  so this is important to note.

- NOTE Confidence: 0.8306338
- $00:08:34.580 \dashrightarrow 00:08:36.170$  I think another combination that's

 $00{:}08{:}36{.}170 \dashrightarrow 00{:}08{:}38{.}152$  attracting a lot of attention as

NOTE Confidence: 0.8306338

 $00:08:38.152 \rightarrow 00:08:39.500$  a combination of hypomethylating

NOTE Confidence: 0.8306338

 $00:08:39.500 \longrightarrow 00:08:40.848$  agents with Veneto class.

NOTE Confidence: 0.8306338

 $00:08:40.850 \longrightarrow 00:08:42.866$  So this is an update that was

NOTE Confidence: 0.8306338

 $00{:}08{:}42.866 \dashrightarrow 00{:}08{:}44.913$  presented by Doctor Garcia and her

NOTE Confidence: 0.8306338

 $00:08:44.913 \rightarrow 00:08:46.783$  colleagues in the frontline setting,

NOTE Confidence: 0.8306338

 $00:08:46.790 \rightarrow 00:08:49.278$  so this is a phase One piece study

NOTE Confidence: 0.8306338

 $00{:}08{:}49{.}278 \dashrightarrow 00{:}08{:}51{.}702$  that looked at combination of SSI tied

NOTE Confidence: 0.8306338

 $00{:}08{:}51.702 \dashrightarrow 00{:}08{:}54.457$  in with Veneto class and this is a

NOTE Confidence: 0.8306338

 $00{:}08{:}54{.}457 \dashrightarrow 00{:}08{:}56{.}683$  single arm study and they provided an

NOTE Confidence: 0.8306338

 $00{:}08{:}56.690 \dashrightarrow 00{:}08{:}59.175$  update here in around 78 patients and

NOTE Confidence: 0.8306338

 $00{:}08{:}59{.}175 \dashrightarrow 00{:}09{:}02{.}300$  what you can see is a very high CR rates.

NOTE Confidence: 0.8306338

 $00:09:02.300 \dashrightarrow 00:09:05.135$  So the CR rate is around 40%.

NOTE Confidence: 0.8306338

 $00:09:05.140 \dashrightarrow 00:09:08.479$  Remember that the CR rate would is cited in.

 $00:09:08.480 \longrightarrow 00:09:10.330$  Monotherapy is only around 15%

NOTE Confidence: 0.8306338

 $00{:}09{:}10.330 \dashrightarrow 00{:}09{:}12.815$  to 20% at best and the overall

NOTE Confidence: 0.8306338

 $00:09:12.815 \longrightarrow 00:09:14.790$  response rate is around 80%.

NOTE Confidence: 0.8306338

 $00:09:14.790 \longrightarrow 00:09:15.530$  The responses,

NOTE Confidence: 0.8306338

 $00:09:15.530 \longrightarrow 00:09:17.010$  as you can see,

NOTE Confidence: 0.8306338

 $00{:}09{:}17.010 \dashrightarrow 00{:}09{:}19.332$  sorry for that responses were durable

NOTE Confidence: 0.8306338

 $00{:}09{:}19{.}332 \dashrightarrow 00{:}09{:}22{.}344$  around 13 months and the median follow up

NOTE Confidence: 0.8306338

 $00:09:22.344 \rightarrow 00:09:25.169$  on the study was somewhat short 16 months,

NOTE Confidence: 0.8306338

 $00{:}09{:}25{.}170 \dashrightarrow 00{:}09{:}27{.}030$  but the survival so far,

NOTE Confidence: 0.8306338

 $00:09:27.030 \dashrightarrow 00:09:28.514$  especially for those patients

NOTE Confidence: 0.8306338

 $00:09:28.514 \dashrightarrow 00:09:29.998$  who have complete responses,

NOTE Confidence: 0.8676015

00:09:30.000 -> 00:09:31.245 appear quite significant.

NOTE Confidence: 0.8676015

 $00{:}09{:}31.245 \dashrightarrow 00{:}09{:}34.150$  However, I think these data are important

NOTE Confidence: 0.8676015

 $00:09:34.213 \rightarrow 00:09:36.625$  to take into consideration still early.

NOTE Confidence: 0.8676015

 $00{:}09{:}36{.}630 \dashrightarrow 00{:}09{:}38{.}842$  A single arm. We don't have randomized

NOTE Confidence: 0.8676015

 $00:09:38.842 \rightarrow 00:09:41.464$  data and we have many drugs that

- NOTE Confidence: 0.8676015
- $00:09:41.464 \rightarrow 00:09:43.469$  shown excellent data as monotherapy,

 $00{:}09{:}43.470 \dashrightarrow 00{:}09{:}45.474$  but when they went to randomized

NOTE Confidence: 0.8676015

 $00:09:45.474 \dashrightarrow 00:09:47.675$  setting they did not basically show

NOTE Confidence: 0.8676015

 $00{:}09{:}47.675 \dashrightarrow 00{:}09{:}49.660$  improvement in overall survival and

NOTE Confidence: 0.8676015

 $00:09:49.660 \dashrightarrow 00:09:52.259$  I think This is why it's important

NOTE Confidence: 0.8676015

 $00{:}09{:}52.259 \dashrightarrow 00{:}09{:}54.263$  to wait for the randomized data

NOTE Confidence: 0.8676015

 $00:09:54.270 \longrightarrow 00:09:56.790$  before this could be used as a,

NOTE Confidence: 0.8676015

 $00:09:56.790 \rightarrow 00:10:00.669$  you know a setting in like in routine clinic.

NOTE Confidence: 0.8676015

 $00:10:00.670 \longrightarrow 00:10:03.030$  Practice.

NOTE Confidence: 0.8676015

 $00{:}10{:}03.030 \dashrightarrow 00{:}10{:}05.571$  Another I think important study is the

NOTE Confidence: 0.8676015

 $00{:}10{:}05{.}571 \dashrightarrow 00{:}10{:}08{.}755$  one we conducted here at at At Yale in

NOTE Confidence: 0.8676015

 $00{:}10{:}08.755 \dashrightarrow 00{:}10{:}10.700$  collaboration with many other centers.

NOTE Confidence: 0.8676015

 $00{:}10{:}10{.}700$  -->  $00{:}10{:}13{.}535$  And we also provided an update from this data NOTE Confidence: 0.8676015

00:10:13.535 --> 00:10:16.537 in the American Society of Hematology here.

NOTE Confidence: 0.8676015

 $00{:}10{:}16{.}540$  -->  $00{:}10{:}19{.}012$  The other side in and venetoclax were used NOTE Confidence: 0.8676015

 $00:10:19.012 \rightarrow 00:10:21.650$  in the relapsed or refractory setting,

NOTE Confidence: 0.8676015

 $00{:}10{:}21.650 \dashrightarrow 00{:}10{:}23.470$  and as you can see,

NOTE Confidence: 0.8676015

 $00{:}10{:}23.470 \dashrightarrow 00{:}10{:}26.025$  the response rate is around 40% total.

NOTE Confidence: 0.8676015

00:10:26.025 --> 00:10:28.580 Around 7% of those have complete responses,

NOTE Confidence: 0.8676015

 $00:10:28.580 \longrightarrow 00:10:30.463$  but many of those who have more

NOTE Confidence: 0.8676015

 $00:10:30.463 \rightarrow 00:10:31.839$  complete responses also achieved

NOTE Confidence: 0.8676015

 $00:10:31.839 \rightarrow 00:10:33.372$  significant hematologic improvement

NOTE Confidence: 0.8676015

 $00{:}10{:}33{.}372 \dashrightarrow 00{:}10{:}34{.}905$  transfusion independence of.

NOTE Confidence: 0.8676015

00:10:34.910 --> 00:10:35.891 Latest on blood.

NOTE Confidence: 0.8676015

00:10:35.891 --> 00:10:37.199 As you can see.

NOTE Confidence: 0.8676015

 $00{:}10{:}37{.}200 \dashrightarrow 00{:}10{:}39{.}156$  So there are significant clinical benefits.

NOTE Confidence: 0.8676015

 $00{:}10{:}39{.}160 \dashrightarrow 00{:}10{:}42{.}430$  But also as you can see on the right side,

NOTE Confidence: 0.8676015

 $00{:}10{:}42{.}430 \dashrightarrow 00{:}10{:}43{.}738$  the median overall survival

NOTE Confidence: 0.8676015

 $00{:}10{:}43.738 \dashrightarrow 00{:}10{:}45.700$  of all patients was 12 months,

NOTE Confidence: 0.8676015

 $00{:}10{:}45{.}700 \dashrightarrow 00{:}10{:}47{.}704$  which compares favorably than the four

NOTE Confidence: 0.8676015

 $00:10:47.704 \rightarrow 00:10:50.467$  to six months that I showed you earlier

- NOTE Confidence: 0.8676015
- $00{:}10{:}50{.}467 \dashrightarrow 00{:}10{:}52{.}507$  in the typical refractory relapsed MD

 $00{:}10{:}52.573 \dashrightarrow 00{:}10{:}54.624$  S setting and even patients who have

NOTE Confidence: 0.8676015

 $00{:}10{:}54.624 \dashrightarrow 00{:}10{:}56.162$  more OCR have significant survival.

NOTE Confidence: 0.8676015

 $00:10:56.162 \longrightarrow 00:10:58.444$  As you can see with 15 months.

NOTE Confidence: 0.8676015

00:10:58.450 --> 00:10:58.778 Again,

NOTE Confidence: 0.8676015

00:10:58.778 --> 00:11:00.418 this is single ARM study,

NOTE Confidence: 0.8676015

00:11:00.420 --> 00:11:01.056 not randomized,

NOTE Confidence: 0.8676015

 $00{:}11{:}01{.}056$  -->  $00{:}11{:}04{.}030$  and I think we need more data before this

NOTE Confidence: 0.8676015

 $00:11:04.030 \rightarrow 00:11:06.599$  could be used in routine clinical practice.

NOTE Confidence: 0.8676015

 $00{:}11{:}06{.}600 \dashrightarrow 00{:}11{:}07{.}988$  There are important differences

NOTE Confidence: 0.8676015

 $00:11:07.988 \longrightarrow 00:11:09.723$  in how financial classes used

NOTE Confidence: 0.8676015

 $00{:}11{:}09{.}723 \dashrightarrow 00{:}11{:}11{.}689$  in real life setting or for Andy

NOTE Confidence: 0.8676015

 $00{:}11{:}11{.}689 \dashrightarrow 00{:}11{:}13{.}439$  as compared to AML for example.

NOTE Confidence: 0.8676015

 $00:11:13.440 \longrightarrow 00:11:15.000$  And both of those studies,

NOTE Confidence: 0.8676015

 $00:11:15.000 \rightarrow 00:11:17.488$  Veneto class was given only for 14 days,

 $00:11:17.490 \longrightarrow 00:11:20.280$  not the 28 days that are given in AML.

NOTE Confidence: 0.8676015

 $00{:}11{:}20.280 \dashrightarrow 00{:}11{:}21.970$  And that's important because MTS

NOTE Confidence: 0.8676015

00:11:21.970 --> 00:11:24.060 patients might not tolerate the same

NOTE Confidence: 0.8676015

 $00{:}11{:}24.060 \dashrightarrow 00{:}11{:}25.775$  degree of myelosuppression that their

NOTE Confidence: 0.8676015

 $00{:}11{:}25.775 \dashrightarrow 00{:}11{:}28.109$  male patients who tend to be somewhat

NOTE Confidence: 0.8676015

 $00{:}11{:}28{.}109 \dashrightarrow 00{:}11{:}30{.}216$  younger than on average and MD's patients.

NOTE Confidence: 0.8676015

 $00:11:30.220 \rightarrow 00:11:32.884$  So we have now around a nice face retrial.

NOTE Confidence: 0.8676015

00:11:32.890 --> 00:11:33.781 The Verona trial,

NOTE Confidence: 0.8676015

 $00{:}11{:}33.781 \dashrightarrow 00{:}11{:}34.969$  which is looking at,

NOTE Confidence: 0.8676015

 $00{:}11{:}34{.}970 \dashrightarrow 00{:}11{:}37{.}290$  is cited in versus cases cited in with

NOTE Confidence: 0.8676015

 $00{:}11{:}37{.}290 \dashrightarrow 00{:}11{:}38{.}916$  venetoclax in the frontline setting

NOTE Confidence: 0.8676015

00:11:38.916 --> 00:11:41.219 among patients with high risk MBS and

NOTE Confidence: 0.8676015

 $00:11:41.280 \dashrightarrow 00:11:43.288$  this study is going to open at Yale.

NOTE Confidence: 0.8676015

 $00{:}11{:}43.290 \dashrightarrow 00{:}11{:}45.618$  We are also opening at a number of

NOTE Confidence: 0.8676015

00:11:45.618 --> 00:11:47.352 daycare centers and I encourage you

NOTE Confidence: 0.8676015

 $00:11:47.352 \longrightarrow 00:11:49.683$  to enroll patients on it to see if

- NOTE Confidence: 0.8676015
- $00:11:49.683 \rightarrow 00:11:51.881$  this setup we actually will change the
- NOTE Confidence: 0.8676015
- 00:11:51.881 --> 00:11:54.950 standard management of high risk MD's.
- NOTE Confidence: 0.8676015
- $00{:}11{:}54{.}950 \dashrightarrow 00{:}11{:}57{.}044$  Another update that was prevent presented
- NOTE Confidence: 0.8676015
- $00:11:57.044 \rightarrow 00:11:59.126$  in the American state of Mythology
- NOTE Confidence: 0.8676015
- $00:11:59.126 \rightarrow 00:12:00.998$  meeting was on this drug people,
- NOTE Confidence: 0.8676015
- $00{:}12{:}01{.}000 \dashrightarrow 00{:}12{:}03{.}368$  and it is that which is the 1st
- NOTE Confidence: 0.8676015
- $00:12:03.368 \longrightarrow 00:12:05.369$  in class need it inhibitor.
- NOTE Confidence: 0.8676015
- $00{:}12{:}05{.}370 \dashrightarrow 00{:}12{:}07{.}698$  So this this is an upstream of the
- NOTE Confidence: 0.8676015
- $00{:}12{:}07.698 \dashrightarrow 00{:}12{:}09.629$  proteasome and it was shown in
- NOTE Confidence: 0.8676015
- $00:12:09.629 \rightarrow 00:12:11.234$  early phase trials in combination
- NOTE Confidence: 0.8676015
- $00:12:11.234 \rightarrow 00:12:13.587$  with their society into lead to
- NOTE Confidence: 0.8676015
- $00{:}12{:}13.587 \dashrightarrow 00{:}12{:}14.769$  improvement and responses.
- NOTE Confidence: 0.8676015
- 00:12:14.770 --> 00:12:16.226 This trial randomized patients,
- NOTE Confidence: 0.8676015
- 00:12:16.226 --> 00:12:18.746 but this was a randomized phase two
- NOTE Confidence: 0.8676015
- $00{:}12{:}18.746 \dashrightarrow 00{:}12{:}20.650$  trial in which not only patients with
- NOTE Confidence: 0.8676015

 $00:12:20.650 \rightarrow 00:12:23.509$  MD as but also patients with illegal plastic,

NOTE Confidence: 0.8049437

 $00{:}12{:}23.510 \dashrightarrow 00{:}12{:}26.100$  AML and CML were randomized to receive.

NOTE Confidence: 0.8049437

 $00{:}12{:}26.100 \dashrightarrow 00{:}12{:}28.989$  Cited in alone or as a sighted in with

NOTE Confidence: 0.8049437

 $00:12:28.989 \rightarrow 00:12:31.692$  people needed stat and this trial also

NOTE Confidence: 0.8049437

 $00{:}12{:}31{.}692 \dashrightarrow 00{:}12{:}34{.}697$  was actually open here at at year and what

NOTE Confidence: 0.8049437

 $00{:}12{:}34.697 \dashrightarrow 00{:}12{:}37.206$  you can see here or the subgroup analysis NOTE Confidence: 0.8049437

 $00:12:37.206 \rightarrow 00:12:40.164$  of the patients who had higher risk and

NOTE Confidence: 0.8049437

 $00{:}12{:}40{.}164 \dashrightarrow 00{:}12{:}42{.}747$  the S which were a total of 67 patients.

NOTE Confidence: 0.8049437

 $00{:}12{:}42.750 \dashrightarrow 00{:}12{:}44.955$  This paper this this was just also

NOTE Confidence: 0.8049437

00:12:44.955 --> 00:12:46.410 published in Leukemia Journal.

NOTE Confidence: 0.8049437

 $00{:}12{:}46{.}410 \dashrightarrow 00{:}12{:}48{.}950$  What you can see is that there was like a

NOTE Confidence: 0.8049437

00:12:49.013 --> 00:12:51.737 marginal improvement in event free survival, NOTE Confidence: 0.8049437

 $00:12:51.740 \rightarrow 00:12:54.169$  But the primary endpoint of the study

NOTE Confidence: 0.8049437

 $00:12:54.169 \rightarrow 00:12:56.289$  the overall survival was not improved.

NOTE Confidence: 0.8049437

 $00{:}12{:}56{.}290 \dashrightarrow 00{:}12{:}58{.}915$  And I think most notable here is

NOTE Confidence: 0.8049437

 $00:12:58.915 \rightarrow 00:13:01.190$  that the overall response rate,

- NOTE Confidence: 0.8049437
- $00:13:01.190 \longrightarrow 00:13:03.230$  but especially the CR rate,

 $00:13:03.230 \longrightarrow 00:13:05.466$  was significantly higher with

NOTE Confidence: 0.8049437

 $00:13:05.466 \longrightarrow 00:13:08.261$  the combination compared to the

NOTE Confidence: 0.8049437

 $00:13:08.261 \rightarrow 00:13:10.509$  monotherapy and was more durable.

NOTE Confidence: 0.8049437

 $00:13:10.510 \dashrightarrow 00:13:13.723$  There is a phase three trial of the same.

NOTE Confidence: 0.8049437

00:13:13.730 --> 00:13:15.921 Basically, design of P1 is a sighted

NOTE Confidence: 0.8049437

 $00:13:15.921 \rightarrow 00:13:18.030$  in compared to azacitidine alone.

NOTE Confidence: 0.8049437

00:13:18.030 --> 00:13:18.744 This trial,

NOTE Confidence: 0.8049437

 $00{:}13{:}18{.}744 \dashrightarrow 00{:}13{:}20{.}529$  actually called the Panther trial,

NOTE Confidence: 0.8049437

 $00:13:20.530 \longrightarrow 00:13:22.654$  has fully accrued and we expect

NOTE Confidence: 0.8049437

 $00:13:22.654 \rightarrow 00:13:24.470$  results from the study soon.

NOTE Confidence: 0.8049437

 $00{:}13{:}24.470 \dashrightarrow 00{:}13{:}27.599$  So I think this also could potentially

NOTE Confidence: 0.8049437

 $00{:}13{:}27{.}599 \dashrightarrow 00{:}13{:}30{.}231$  be a practice changing if the

NOTE Confidence: 0.8049437

 $00{:}13{:}30{.}231 \dashrightarrow 00{:}13{:}32{.}637$  if there is us are posted.

NOTE Confidence: 0.8049437

 $00:13:32.640 \longrightarrow 00:13:33.567$  How about immunotherapy?

00:13:33.567 --> 00:13:35.421 Many of you use like immune

NOTE Confidence: 0.8049437

00:13:35.421 --> 00:13:37.109 checkpoint inhibitors such as anti PD,

NOTE Confidence: 0.8049437

00:13:37.110 --> 00:13:37.965 One PD, L1,

NOTE Confidence: 0.8049437

00:13:37.965 --> 00:13:39.390 CLU for routinely for management

NOTE Confidence: 0.8049437

 $00:13:39.390 \longrightarrow 00:13:40.390$  of solid tumors,

NOTE Confidence: 0.8049437

 $00:13:40.390 \rightarrow 00:13:42.532$  we've been trying to use these drugs

NOTE Confidence: 0.8049437

 $00{:}13{:}42{.}532 \dashrightarrow 00{:}13{:}45{.}493$  for some time now in high risk MD ASAN

NOTE Confidence: 0.8049437

 $00:13:45.493 \rightarrow 00:13:47.369$  myeloid malignancy really and so far

NOTE Confidence: 0.8049437

 $00{:}13{:}47{.}369 \dashrightarrow 00{:}13{:}51{.}110$  a lot of the data has been single arm and.

NOTE Confidence: 0.8049437

00:13:51.110 --> 00:13:52.394 A single center data.

NOTE Confidence: 0.8049437

 $00{:}13{:}52{.}394 \dashrightarrow 00{:}13{:}55{.}029$  This is what I'm showing you is a

NOTE Confidence: 0.8049437

00:13:55.029 --> 00:13:56.955 presentation from ASH 2019 in which

NOTE Confidence: 0.8049437

 $00{:}13{:}56{.}955 \dashrightarrow 00{:}13{:}59{.}204$  we showed with colleagues from other

NOTE Confidence: 0.8049437

 $00:13:59.204 \rightarrow 00:14:01.514$  centers in a randomized phase two

NOTE Confidence: 0.8049437

 $00:14:01.520 \longrightarrow 00:14:03.410$  study that the combination of is

NOTE Confidence: 0.8049437

 $00{:}14{:}03{.}410 \dashrightarrow 00{:}14{:}05{.}998$  cited in with the anti PDL one door

- NOTE Confidence: 0.8049437
- $00:14:05.998 \longrightarrow 00:14:07.888$  volume app which is approved for

 $00:14:07.955 \rightarrow 00:14:10.337$  several solid tumors did not improve

NOTE Confidence: 0.8049437

 $00:14:10.337 \rightarrow 00:14:12.444$  outcomes compared to other sighting.

NOTE Confidence: 0.8049437

 $00:14:12.444 \rightarrow 00:14:15.528$  However I think this is probably

NOTE Confidence: 0.8049437

 $00{:}14{:}15{.}528 \dashrightarrow 00{:}14{:}17{.}690$  just related to PD L1.

NOTE Confidence: 0.8049437

 $00{:}14{:}17.690 \dashrightarrow 00{:}14{:}20.266$  And does not extend necessarily to other

NOTE Confidence: 0.8049437

 $00:14:20.266 \rightarrow 00:14:22.830$  classes of immune checkpoint inhibitors.

NOTE Confidence: 0.8049437

 $00:14:22.830 \longrightarrow 00:14:25.086$  And on that note,

NOTE Confidence: 0.8049437

 $00:14:25.086 \rightarrow 00:14:27.342$  another immune checkpoint inhibitor

NOTE Confidence: 0.8049437

 $00:14:27.342 \longrightarrow 00:14:29.759$  called sabatella mob or MPG 453.

NOTE Confidence: 0.8049437

 $00:14:29.760 \longrightarrow 00:14:31.630$  Is basically being studied in

NOTE Confidence: 0.8049437

 $00:14:31.630 \longrightarrow 00:14:33.126$  combination with hypomethylating agents,

NOTE Confidence: 0.8049437

00:14:33.130 --> 00:14:35.368 not only for high risk MD's,

NOTE Confidence: 0.8049437

 $00{:}14{:}35{.}370 \dashrightarrow 00{:}14{:}37{.}918$  but also for AML patients and the

NOTE Confidence: 0.8049437

 $00{:}14{:}37{.}918 \dashrightarrow 00{:}14{:}40{.}183$  data from what was presented in

 $00:14:40.183 \longrightarrow 00:14:43.191$  in ash this year showed this is a

NOTE Confidence: 0.8049437

 $00:14:43.191 \rightarrow 00:14:45.465$  single arm again phase one study,

NOTE Confidence: 0.8049437

00:14:45.470 --> 00:14:48.454 but it showed the CR rate of 23%

NOTE Confidence: 0.8049437

 $00:14:48.460 \longrightarrow 00:14:50.330$  which is slightly higher than

NOTE Confidence: 0.8049437

 $00{:}14{:}50{.}330 \dashrightarrow 00{:}14{:}52{.}200$  what you expect with monotherapy,

NOTE Confidence: 0.8049437

 $00:14:52.200 \longrightarrow 00:14:54.818$  but the overall response rate was 64%,

NOTE Confidence: 0.8049437

 $00{:}14{:}54{.}820 \dashrightarrow 00{:}14{:}57{.}457$  and what you can see on the right hand

NOTE Confidence: 0.8049437

 $00:14:57.457 \rightarrow 00:15:00.538$  is that there was encouraging durability.

NOTE Confidence: 0.8049437

 $00{:}15{:}00{.}540 \dashrightarrow 00{:}15{:}01{.}653$  Of the combination,

NOTE Confidence: 0.8049437

 $00{:}15{:}01{.}653 \dashrightarrow 00{:}15{:}03{.}508$  especially with patients who have

NOTE Confidence: 0.8049437

 $00:15:03.508 \rightarrow 00:15:05.718$  long or very high risk disease,

NOTE Confidence: 0.8049437

 $00{:}15{:}05{.}720 \dashrightarrow 00{:}15{:}07{.}988$  and I would note the side effect

NOTE Confidence: 0.8049437

 $00{:}15{:}07{.}988 \dashrightarrow 00{:}15{:}11{.}021$  profile here it does not seem to add

NOTE Confidence: 0.8049437

 $00{:}15{:}11{.}021 \dashrightarrow 00{:}15{:}13{.}490$  myelosuppression to the exercise again alone,

NOTE Confidence: 0.8049437

 $00:15:13.490 \longrightarrow 00:15:14.756$  and also importantly,

NOTE Confidence: 0.8049437

 $00:15:14.756 \longrightarrow 00:15:16.866$  the incidence of immune related

- NOTE Confidence: 0.8049437
- $00:15:16.866 \dashrightarrow 00:15:19.039$  effects seems to be low with this.

 $00{:}15{:}19{.}040 \dashrightarrow 00{:}15{:}20{.}520$  With this particular agent,

NOTE Confidence: 0.8049437

 $00:15:20.520 \longrightarrow 00:15:22.370$  so appears on this data.

NOTE Confidence: 0.8049437

 $00:15:22.370 \rightarrow 00:15:24.220$  There are ongoing several study.

NOTE Confidence: 0.8049437

 $00{:}15{:}24{.}220 \dashrightarrow 00{:}15{:}27{.}444$  We just completed a cruel to a randomized

NOTE Confidence: 0.8049437

 $00{:}15{:}27{.}444 \dashrightarrow 00{:}15{:}30{.}624$  phase two study in higher risk MD S of.

NOTE Confidence: 0.82144034

 $00{:}15{:}30{.}630 \dashrightarrow 00{:}15{:}32{.}814$  Is there with the battle map versus

NOTE Confidence: 0.82144034

 $00:15:32.814 \rightarrow 00:15:35.306$  is alone and this study is completed

NOTE Confidence: 0.82144034

 $00{:}15{:}35{.}306 \dashrightarrow 00{:}15{:}37{.}532$  accrual and we expect the results

NOTE Confidence: 0.82144034

 $00:15:37.601 \longrightarrow 00:15:39.484$  in the next one to two years.

NOTE Confidence: 0.82144034

 $00:15:39.490 \longrightarrow 00:15:40.802$  There's another face retrial

NOTE Confidence: 0.82144034

 $00{:}15{:}40.802 \dashrightarrow 00{:}15{:}42.770$  that will open here as well.

NOTE Confidence: 0.82144034

 $00{:}15{:}42.770 \dashrightarrow 00{:}15{:}44.410$  Called the stimulus MD S2,

NOTE Confidence: 0.82144034

 $00{:}15{:}44{.}410 \dashrightarrow 00{:}15{:}46{.}714$  which is a randomized phase three

NOTE Confidence: 0.82144034

 $00:15:46.714 \longrightarrow 00:15:48.939$  of the same combination is with

00:15:48.939 --> 00:15:51.109 the battle map versus Asia and we

NOTE Confidence: 0.82144034

 $00{:}15{:}51{.}109 \dashrightarrow 00{:}15{:}53{.}143$  have our as well a frontline study

NOTE Confidence: 0.82144034

 $00{:}15{:}53{.}143 \dashrightarrow 00{:}15{:}55{.}390$  with a 7 is events a battle map.

NOTE Confidence: 0.82144034

 $00{:}15{:}55{.}390 \dashrightarrow 00{:}15{:}57{.}572$  All of those are open at at

NOTE Confidence: 0.82144034

 $00{:}15{:}57{.}572 \dashrightarrow 00{:}15{:}59{.}192$  yet another interesting immune

NOTE Confidence: 0.82144034

00:15:59.192 --> 00:16:01.480 checkpoint inhibitor is the CD 47.

NOTE Confidence: 0.82144034

00:16:01.480 --> 00:16:03.965 Anti CD 47. They don't eat me.

NOTE Confidence: 0.82144034

 $00:16:03.970 \longrightarrow 00:16:05.690$  Signal inhibitor mag rolling up

NOTE Confidence: 0.82144034

00:16:05.690 --> 00:16:07.778 what was presented in ash this

NOTE Confidence: 0.82144034

00:16:07.778 --> 00:16:09.892 year was an update and what the NOTE Confidence: 0.82144034

 $00{:}16{:}09{.}892 \dashrightarrow 00{:}16{:}11{.}851$  authors shown the significant plus NOTE Confidence: 0.82144034

 $00{:}16{:}11.851 \dashrightarrow 00{:}16{:}13.575$  reduction among all patients.

NOTE Confidence: 0.82144034

 $00{:}16{:}13.580 \dashrightarrow 00{:}16{:}16{.}002$  But the data was most impressive in NOTE Confidence: 0.82144034

00:16:16.002 --> 00:16:18.251 patients who have TP 53 mutations NOTE Confidence: 0.82144034

00:16:18.251 --> 00:16:20.525 in which the median overall survival

NOTE Confidence: 0.82144034

 $00:16:20.525 \rightarrow 00:16:22.480$  among patients who had TP 50.

- NOTE Confidence: 0.82144034
- $00:16:22.480 \longrightarrow 00:16:23.792$  Three was 12 months,
- NOTE Confidence: 0.82144034
- $00{:}16{:}23.792 \dashrightarrow 00{:}16{:}25.760$  which is higher than what we
- NOTE Confidence: 0.82144034
- $00:16:25.833 \rightarrow 00:16:28.179$  typically expect it to nine months.
- NOTE Confidence: 0.82144034
- $00:16:28.180 \rightarrow 00:16:30.665$  Generally in patients who have this mutation.
- NOTE Confidence: 0.82144034
- $00:16:30.670 \dashrightarrow 00:16:33.267$  So this drug now is being studied.
- NOTE Confidence: 0.82144034
- $00{:}16{:}33{.}270 \dashrightarrow 00{:}16{:}35{.}015$  In a randomized trial called
- NOTE Confidence: 0.82144034
- 00:16:35.015 --> 00:16:37.131 the enhance in high risk MD's
- NOTE Confidence: 0.82144034
- $00:16:37.131 \rightarrow 00:16:39.210$  whether they have TP 53 or not,
- NOTE Confidence: 0.82144034
- $00:16:39.210 \longrightarrow 00:16:41.520$  magherally map with laser versus is alone,
- NOTE Confidence: 0.82144034
- $00{:}16{:}41.520 \dashrightarrow 00{:}16{:}44.067$  but also there are efforts to study it in
- NOTE Confidence: 0.82144034
- $00{:}16{:}44.067 \dashrightarrow 00{:}16{:}46.468$  acute myeloid leukemia patients as well,
- NOTE Confidence: 0.82144034
- $00:16:46.470 \longrightarrow 00:16:49.270$  especially those with TP 53.
- NOTE Confidence: 0.82144034
- 00:16:49.270 --> 00:16:50.538 This is a transplant
- NOTE Confidence: 0.82144034
- $00{:}16{:}50{.}538 \dashrightarrow 00{:}16{:}52{.}123$  abstract and as I mentioned,
- NOTE Confidence: 0.82144034
- $00{:}16{:}52{.}130 \dashrightarrow 00{:}16{:}53{.}875$  there is a separate transplant
- NOTE Confidence: 0.82144034

00:16:53.875 --> 00:16:55.271 presentation that will happen

NOTE Confidence: 0.82144034

 $00{:}16{:}55{.}271 \dashrightarrow 00{:}16{:}56{.}900$  at the end of the series,

NOTE Confidence: 0.82144034

00:16:56.900 --> 00:16:58.928 but I just wanted to highlight

NOTE Confidence: 0.82144034

 $00{:}16{:}58{.}928 \dashrightarrow 00{:}17{:}00{.}624$  this the conclusion from this

NOTE Confidence: 0.82144034

 $00:17:00.624 \longrightarrow 00:17:02.310$  because this is in my view,

NOTE Confidence: 0.82144034

 $00{:}17{:}02{.}310 \dashrightarrow 00{:}17{:}04{.}254$  one of the most important abstracts

NOTE Confidence: 0.82144034

 $00{:}17{:}04{.}254 \dashrightarrow 00{:}17{:}06{.}207$  from this as h because it showed

NOTE Confidence: 0.82144034

00:17:06.207 --> 00:17:07.707 in a randomized trial data,

NOTE Confidence: 0.82144034

 $00{:}17{:}07{.}710 \dashrightarrow 00{:}17{:}09{.}300$  so here this was randomized.

NOTE Confidence: 0.82144034

 $00{:}17{:}09{.}300 \dashrightarrow 00{:}17{:}11{.}548$  All the data that we have about MD's

NOTE Confidence: 0.82144034

00:17:11.548 --> 00:17:13.540 improving survival in high risk MD's

NOTE Confidence: 0.82144034

 $00{:}17{:}13.540$  -->  $00{:}17{:}14.912$  patients compared to hypomethylating

NOTE Confidence: 0.82144034

 $00:17:14.912 \longrightarrow 00:17:16.930$  agents alone is based on Markov

NOTE Confidence: 0.82144034

 $00{:}17{:}16{.}930 \dashrightarrow 00{:}17{:}18{.}210$  decision analysis and modeling,

NOTE Confidence: 0.82144034

 $00{:}17{:}18{.}210 \dashrightarrow 00{:}17{:}20{.}148$  but this is the first randomized

NOTE Confidence: 0.82144034

 $00:17:20.148 \longrightarrow 00:17:21.440$  trial to actually show.

- NOTE Confidence: 0.82144034
- 00:17:21.440 --> 00:17:23.285 An absolute improvement in overall
- NOTE Confidence: 0.82144034
- $00:17:23.285 \rightarrow 00:17:25.520$  survival and the three year survival
- NOTE Confidence: 0.82144034
- $00:17:25.520 \longrightarrow 00:17:27.506$  for donor versus no donor arm.
- NOTE Confidence: 0.82144034
- $00{:}17{:}27{.}510 \dashrightarrow 00{:}17{:}31{.}236$  And I think what is very important is this
- NOTE Confidence: 0.82144034
- $00:17:31.236 \rightarrow 00:17:34.935$  study allowed patients after the age of 75.
- NOTE Confidence: 0.82144034
- $00{:}17{:}34{.}940 \dashrightarrow 00{:}17{:}37{.}276$  And this is important to get out there,
- NOTE Confidence: 0.82144034
- $00{:}17{:}37{.}280 \dashrightarrow 00{:}17{:}39{.}198$  that because we still see patients who
- NOTE Confidence: 0.82144034
- 00:17:39.198 --> 00:17:41.655 are like 72 who come to us very later
- NOTE Confidence: 0.82144034
- $00{:}17{:}41.655 \dashrightarrow 00{:}17{:}43.769$  there and their scores and being told
- NOTE Confidence: 0.82144034
- $00:17:43.769 \rightarrow 00:17:45.779$  they were not candidates for transplant.
- NOTE Confidence: 0.82144034
- 00:17:45.780 --> 00:17:47.936 So I think it's important to know
- NOTE Confidence: 0.82144034
- $00{:}17{:}47{.}936$  -->  $00{:}17{:}50{.}203$  that even patients up to the age of NOTE Confidence: 0.82144034
- $00{:}17{:}50{.}203 \dashrightarrow 00{:}17{:}51{.}843$ 75 could be considered for curative NOTE Confidence: 0.82144034
- 00:17:51.843 --> 00:17:53.957 therapy and they should be re ferd
- NOTE Confidence: 0.82144034
- $00{:}17{:}53{.}957 \dashrightarrow 00{:}17{:}55{.}802$  for big Centers for clinical trials
- NOTE Confidence: 0.82144034

 $00:17:55.802 \rightarrow 00:17:57.342$  as well as transplant consideration

NOTE Confidence: 0.82144034

 $00{:}17{:}57{.}342 \dashrightarrow 00{:}17{:}58{.}966$  in the last couple of minutes.

NOTE Confidence: 0.82144034

 $00{:}17{:}58{.}970 \dashrightarrow 00{:}18{:}00{.}958$  I will talk about lower risk MD's

NOTE Confidence: 0.82144034

 $00{:}18{:}00{.}958 \dashrightarrow 00{:}18{:}03{.}023$  as I mentioned was partnership has

NOTE Confidence: 0.82144034

 $00{:}18{:}03{.}023 \dashrightarrow 00{:}18{:}04{.}943$  been approved after ESA failure.

NOTE Confidence: 0.82144034

00:18:04.950 --> 00:18:06.790 For patients who have RingCentral

NOTE Confidence: 0.82144034

00:18:06.790 --> 00:18:09.210 plastic anemia from lower risk MD's now,

NOTE Confidence: 0.82144034

 $00:18:09.210 \longrightarrow 00:18:11.569$  this drug is being studied in the

NOTE Confidence: 0.82144034

 $00{:}18{:}11.569 \dashrightarrow 00{:}18{:}13.829$  frontline setting in the commands trial,

NOTE Confidence: 0.82144034

 $00{:}18{:}13.830 \dashrightarrow 00{:}18{:}16.161$  so this is it's being studied compared

NOTE Confidence: 0.82144034

 $00{:}18{:}16{.}161 \dashrightarrow 00{:}18{:}18{.}266$  to low Earth roelle powerton and

NOTE Confidence: 0.82144034

 $00:18:18.266 \longrightarrow 00:18:20.688$  this or a potent procrit and this

NOTE Confidence: 0.7745304

 $00:18:20.756 \rightarrow 00:18:23.360$  is in the frontline setting and regardless

NOTE Confidence: 0.7745304

 $00{:}18{:}23.360 \dashrightarrow 00{:}18{:}26.610$  so whether you have ringstad or plus or not,

NOTE Confidence: 0.7745304

00:18:26.610 --> 00:18:29.165 you could be randomized to either a

NOTE Confidence: 0.7745304

 $00:18:29.165 \rightarrow 00:18:32.046$  proton or low spatter set and this trial

- NOTE Confidence: 0.7745304
- $00:18:32.046 \rightarrow 00:18:35.029$  is open in the care centers as well.

 $00:18:35.030 \rightarrow 00:18:38.500$  So many of you will be able to enroll in it.

NOTE Confidence: 0.7745304

 $00:18:38.500 \rightarrow 00:18:40.698$  Another interesting drug is the emitted step,

NOTE Confidence: 0.7745304

 $00{:}18{:}40.700 \dashrightarrow 00{:}18{:}42.625$  which is the 1st in class telomerase

NOTE Confidence: 0.7745304

 $00{:}18{:}42.625 \dashrightarrow 00{:}18{:}44.598$  inhibitor which has been shown also

NOTE Confidence: 0.7745304

 $00{:}18{:}44.598 \dashrightarrow 00{:}18{:}46.058$  to improve transfusion independence.

NOTE Confidence: 0.7745304

 $00{:}18{:}46.060 \dashrightarrow 00{:}18{:}47.920$  Regardless of having RingCentral Plus or

NOTE Confidence: 0.7745304

 $00{:}18{:}47{.}920 \dashrightarrow 00{:}18{:}50{.}156$  not and some of those responses which

NOTE Confidence: 0.7745304

 $00{:}18{:}50{.}156 \dashrightarrow 00{:}18{:}52{.}670$  occur in 42% of patients were at durable.

NOTE Confidence: 0.7745304

 $00{:}18{:}52.670 \dashrightarrow 00{:}18{:}55.190$  Now we have actually an open study here.

NOTE Confidence: 0.7745304

00:18:55.190 --> 00:18:57.388 The High Merge study the phase three

NOTE Confidence: 0.7745304

 $00{:}18{:}57{.}388 \dashrightarrow 00{:}18{:}59{.}848$  so this is a randomized study after

NOTE Confidence: 0.7745304

00:18:59.848 --> 00:19:02.689 he has a failure so frontline we have

NOTE Confidence: 0.7745304

 $00{:}19{:}02.689 \dashrightarrow 00{:}19{:}05.097$  the commands in lower risk and be as.

NOTE Confidence: 0.7745304

 $00{:}19{:}05{.}100 \dashrightarrow 00{:}19{:}07{.}524$  Refractory, we have the Hymer study

00:19:07.524 --> 00:19:09.891 for patients after failure of PSA

NOTE Confidence: 0.7745304

 $00:19:09.891 \rightarrow 00:19:11.925$  in which patients are randomized to

NOTE Confidence: 0.7745304

 $00{:}19{:}11{.}925 \dashrightarrow 00{:}19{:}14{.}110$  him until a stat versus placebo.

NOTE Confidence: 0.7745304

 $00{:}19{:}14{.}110$  -->  $00{:}19{:}16{.}886$  In the last minute I wanna show you NOTE Confidence: 0.7745304

 $00:19:16.886 \rightarrow 00:19:18.877$  another like non interventional study

NOTE Confidence: 0.7745304

 $00{:}19{:}18{.}877 \dashrightarrow 00{:}19{:}22{.}415$  that we did in patients with MD S who NOTE Confidence: 0.7745304

 $00{:}19{:}22{.}415 \dashrightarrow 00{:}19{:}24{.}903$  have lower who have an emia and as you NOTE Confidence:  $0{.}7745304$ 

 $00{:}19{:}24{.}910 \dashrightarrow 00{:}19{:}27{.}790$  know one of the open questions in MDSS.

NOTE Confidence: 0.7745304

 $00{:}19{:}27{.}790 \dashrightarrow 00{:}19{:}29{.}746$  When do you transfuse patients with NOTE Confidence:  $0{.}7745304$ 

 $00{:}19{:}29{.}746$  -->  $00{:}19{:}32{.}281$  MD S and many people use different NOTE Confidence: 0.7745304

 $00{:}19{:}32{.}281$  -->  $00{:}19{:}34{.}983$  cut off seven or eight of hemoglobin? NOTE Confidence: 0.7745304

00:19:34.990 --> 00:19:37.293 Here we used verified quality of life

NOTE Confidence: 0.7745304

00:19:37.293 --> 00:19:39.120 instrument in a investigator initiated

NOTE Confidence: 0.7745304

 $00:19:39.120 \longrightarrow 00:19:41.822$  effort led by Doctor Go in Table.

NOTE Confidence: 0.7745304

00:19:41.830 --> 00:19:43.082 Go on Dana Farber.

NOTE Confidence: 0.7745304

 $00:19:43.082 \longrightarrow 00:19:45.835$  And we looked at the quality of life

- NOTE Confidence: 0.7745304
- $00:19:45.835 \rightarrow 00:19:47.835$  improvement before and after transfusion

 $00{:}19{:}47.835 \dashrightarrow 00{:}19{:}50.843$  and what we have shown is that most

NOTE Confidence: 0.7745304

 $00:19:50.843 \longrightarrow 00:19:52.889$  patients 2/3 of patients did not

NOTE Confidence: 0.7745304

 $00:19:52.889 \rightarrow 00:19:54.434$  experience an improvement in their

NOTE Confidence: 0.7745304

 $00:19:54.434 \rightarrow 00:19:56.340$  quality of life after transfusion.

NOTE Confidence: 0.7745304

 $00{:}19{:}56{.}340 \dashrightarrow 00{:}19{:}58{.}755$  So I think that puts into question

NOTE Confidence: 0.7745304

00:19:58.755 --> 00:20:00.210 our practice of Troy.

NOTE Confidence: 0.7745304

 $00:20:00.210 \rightarrow 00:20:01.880$  Using patients based on hemoglobin

NOTE Confidence: 0.7745304

00:20:01.880 --> 00:20:03.216 cut offs of aid,

NOTE Confidence: 0.7745304

00:20:03.220 --> 00:20:05.306 and I think it's important to try

NOTE Confidence: 0.7745304

 $00:20:05.306 \longrightarrow 00:20:07.282$  to study this in more extensive

NOTE Confidence: 0.7745304

 $00{:}20{:}07{.}282 \dashrightarrow 00{:}20{:}09{.}641$  sitting about what is the right cut

NOTE Confidence: 0.7745304

00:20:09.704 --> 00:20:11.228 off for transfusions in,

NOTE Confidence: 0.7745304

 $00:20:11.230 \longrightarrow 00:20:12.900$  especially in the outpatient setting.

NOTE Confidence: 0.7745304

 $00{:}20{:}12{.}900 \dashrightarrow 00{:}20{:}14{.}808$  For patients with ambius rather than

 $00:20:14.808 \longrightarrow 00:20:16.909$  using random cut offs of hemoglobin.

NOTE Confidence: 0.7745304

 $00{:}20{:}16{.}910 \dashrightarrow 00{:}20{:}19{.}295$  So this is my last slide and I will

NOTE Confidence: 0.7745304

 $00:20:19.295 \longrightarrow 00:20:21.735$  give the floor now to my colleague

NOTE Confidence: 0.7745304

 $00:20:21.735 \longrightarrow 00:20:23.987$  Doctor Rory Challis who will update

NOTE Confidence: 0.7745304

 $00{:}20{:}23.987 \dashrightarrow 00{:}20{:}25.927$  us on acute myeloid leukemia.

NOTE Confidence: 0.7745304

 $00{:}20{:}25{.}930 \dashrightarrow 00{:}20{:}27{.}302$  Updates from the ash.

NOTE Confidence: 0.7745304

 $00:20:27.302 \longrightarrow 00:20:29.778$  Thank you and we'll be happy all

NOTE Confidence: 0.7745304

 $00:20:29.778 \longrightarrow 00:20:31.836$  of us will be taking questions.

NOTE Confidence: 0.7745304

 $00{:}20{:}31.840 \dashrightarrow 00{:}20{:}34.280$  At the end of that seminar at 12:50,

NOTE Confidence: 0.7745304

 $00:20:34.280 \longrightarrow 00:20:34.590$  thanks.

NOTE Confidence: 0.78832996

00:20:52.070 --> 00:20:53.700 OK, How are we looking?

NOTE Confidence: 0.78832996

00:20:53.700 --> 00:20:55.646 Every seeing a full slide who

NOTE Confidence: 0.78832996

00:20:55.646 --> 00:21:00.100 screens two screens again? Sorry.

NOTE Confidence: 0.78832996

 $00:21:00.100 \longrightarrow 00:21:01.828$  Standard technical difficulties.

NOTE Confidence: 0.80935025

00:21:07.370 --> 00:21:09.786 Yeah, I think you need to swap your

NOTE Confidence: 0.80935025

 $00:21:09.790 \rightarrow 00:21:11.310$  screens. Let's try this again.

- NOTE Confidence: 0.8119342
- 00:21:15.390 --> 00:21:18.156 Yep. How's that? That looks good,

 $00:21:18.160 \longrightarrow 00:21:19.240$  not yet ticket.

NOTE Confidence: 0.9394388

 $00{:}21{:}20{.}540 \dashrightarrow 00{:}21{:}21{.}070$  Yes.

NOTE Confidence: 0.88221246

00:21:22.750 --> 00:21:23.310 Looks good.

NOTE Confidence: 0.8302369

 $00:21:25.320 \longrightarrow 00:21:27.272$  You're seeing one. Yes, one scream.

NOTE Confidence: 0.8302369

00:21:27.272 --> 00:21:30.290 You're good to go alright? Do this by then.

NOTE Confidence: 0.8640053

 $00:21:32.410 \longrightarrow 00:21:33.379$  Sorry bout that.

NOTE Confidence: 0.88886964

 $00:21:35.390 \rightarrow 00:21:36.220$  OK.

NOTE Confidence: 0.85143447

 $00:21:38.370 \rightarrow 00:21:43.258$  Alright one screen we're good to go so.

NOTE Confidence: 0.85143447

 $00:21:43.260 \longrightarrow 00:21:45.200$  Thanks for the introduction.

NOTE Confidence: 0.85143447

 $00:21:45.200 \longrightarrow 00:21:47.625$  I'll be specifically focusing on

NOTE Confidence: 0.85143447

 $00{:}21{:}47.625 \dashrightarrow 00{:}21{:}50.032$  the highlights presented this past

NOTE Confidence: 0.85143447

 $00{:}21{:}50{.}032 \dashrightarrow 00{:}21{:}52{.}804$  meeting as they pertain to AML.

NOTE Confidence: 0.85143447

 $00{:}21{:}52{.}810 \dashrightarrow 00{:}21{:}57{.}470$  I have no disclosures, so.

NOTE Confidence: 0.85143447

 $00:21:57.470 \rightarrow 00:22:00.720$  Again, you're still seeing one screen, right?

00:22:00.720 --> 00:22:03.200 OK, it's a bit hard to really focus

NOTE Confidence: 0.85143447

 $00{:}22{:}03.200 \dashrightarrow 00{:}22{:}05.935$  in on really a select few updates

NOTE Confidence: 0.85143447

 $00:22:05.935 \longrightarrow 00:22:08.280$  from an entire years worth of.

NOTE Confidence: 0.85143447

 $00:22:08.280 \dashrightarrow 00:22:12.186$  I would say progress in the field.

NOTE Confidence: 0.85143447

 $00:22:12.190 \longrightarrow 00:22:14.598$  So I'll try to really focus on agents

NOTE Confidence: 0.85143447

 $00{:}22{:}14.598 \dashrightarrow 00{:}22{:}16.991$  with which we already have some

NOTE Confidence: 0.85143447

00:22:16.991 --> 00:22:18.715 familiar that Phillip familiarity,

NOTE Confidence: 0.85143447

 $00:22:18.720 \rightarrow 00:22:21.268$  but also some new combinations or regiments,

NOTE Confidence: 0.85143447

00:22:21.270 --> 00:22:23.692 some of which you can guess we're

NOTE Confidence: 0.85143447

 $00:22:23.692 \longrightarrow 00:22:25.934$  going to include the BCL two

NOTE Confidence: 0.85143447

 $00:22:25.934 \longrightarrow 00:22:27.438$  inhibitor of medical acts.

NOTE Confidence: 0.85143447

 $00{:}22{:}27{.}440 \dashrightarrow 00{:}22{:}29{.}820$  All of these are all the studies

NOTE Confidence: 0.85143447

 $00:22:29.820 \rightarrow 00:22:32.302$  I'll be discussing are going to be

NOTE Confidence: 0.85143447

 $00:22:32.302 \rightarrow 00:22:34.384$  interventional of only really try to

NOTE Confidence: 0.85143447

 $00{:}22{:}34.455 \dashrightarrow 00{:}22{:}36.777$  give some minimal background so it's

NOTE Confidence: 0.85143447

 $00:22:36.777 \rightarrow 00:22:39.052$  really focused on the updates themselves.

- NOTE Confidence: 0.85143447
- $00{:}22{:}39{.}052 \dashrightarrow 00{:}22{:}40{.}496$  So jump right in.
- NOTE Confidence: 0.85143447
- $00{:}22{:}40{.}500 \dashrightarrow 00{:}22{:}42{.}720$  As many of you are.
- NOTE Confidence: 0.85143447
- 00:22:42.720 --> 00:22:44.460 Aware Gilteritinib is a
- NOTE Confidence: 0.85143447
- $00:22:44.460 \longrightarrow 00:22:45.765$  flip through inhibitor,
- NOTE Confidence: 0.85143447
- $00{:}22{:}45{.}770 \dashrightarrow 00{:}22{:}48{.}724$  which in the Admiral trial was shown
- NOTE Confidence: 0.85143447
- $00:22:48.724 \rightarrow 00:22:51.244$  to improve survival when compared
- NOTE Confidence: 0.85143447
- $00:22:51.244 \rightarrow 00:22:53.596$  with classical salvage chemotherapy
- NOTE Confidence: 0.85143447
- $00{:}22{:}53.596 \dashrightarrow 00{:}22{:}55.948$  in their refractory setting.
- NOTE Confidence: 0.85143447
- $00{:}22{:}55{.}950 \dashrightarrow 00{:}22{:}57{.}876$  So its approval for such over
- NOTE Confidence: 0.85143447
- $00{:}22{:}57.876 \dashrightarrow 00{:}22{:}59.654$  the outcomes for these patients
- NOTE Confidence: 0.85143447
- $00:22:59.654 \rightarrow 00:23:00.950$  treated with guilt,
- NOTE Confidence: 0.85143447
- 00:23:00.950 --> 00:23:03.798 or it never guilt are still quite poor.
- NOTE Confidence: 0.85143447
- 00:23:03.800 --> 00:23:05.825 The preclinical data does support
- NOTE Confidence: 0.85143447
- $00{:}23{:}05{.}825 \dashrightarrow 00{:}23{:}07{.}850$  some synergy when Gilteritinib is
- NOTE Confidence: 0.85143447
- 00:23:07.915 --> 00:23:09.979 combined with a BCL two inhibitor
- NOTE Confidence: 0.85143447

 $00{:}23{:}09{.}979 \dashrightarrow 00{:}23{:}12{.}348$  and those data prompted the launch of

NOTE Confidence: 0.85143447

 $00{:}23{:}12{.}348 \dashrightarrow 00{:}23{:}14{.}504$  the trial that I'll be talking about.

NOTE Confidence: 0.85143447

00:23:14.510 --> 00:23:16.658 In brief, you can see here,

NOTE Confidence: 0.85143447

 $00{:}23{:}16.660 \dashrightarrow 00{:}23{:}19.164$  so this was done in the context of

NOTE Confidence: 0.85143447

 $00:23:19.164 \rightarrow 00:23:21.299$  the following trial schema patients,

NOTE Confidence: 0.85143447

 $00:23:21.300 \longrightarrow 00:23:22.724$  as you guessed it,

NOTE Confidence: 0.85143447

00:23:22.724 --> 00:23:24.148 had relapsed refractory disease,

NOTE Confidence: 0.85143447

 $00:23:24.150 \longrightarrow 00:23:25.734$  including wild type patients.

NOTE Confidence: 0.85143447

 $00{:}23{:}25{.}734 \dashrightarrow 00{:}23{:}27{.}714$  In the dose escalation phase,

NOTE Confidence: 0.85143447

 $00:23:27.720 \rightarrow 00:23:30.177$  without you know, a low white counts.

NOTE Confidence: 0.85143447

 $00:23:30.180 \longrightarrow 00:23:31.940$  They really had controlled proliferation.

NOTE Confidence: 0.85143447

00:23:31.940 --> 00:23:33.820 They received standard phonetic lacks

NOTE Confidence: 0.85143447

 $00:23:33.820 \longrightarrow 00:23:35.700$  4 milligrams in combination with

NOTE Confidence: 0.85143447

00:23:35.754 --> 00:23:37.578 either guilt 80 or 120 milligrams,

NOTE Confidence: 0.85143447

 $00{:}23{:}37{.}580 \dashrightarrow 00{:}23{:}39{.}995$  which the latter of which is the

NOTE Confidence: 0.85143447

 $00{:}23{:}39{.}995 \dashrightarrow 00{:}23{:}42{.}507$  standard dose that was studied in Phase

- NOTE Confidence: 0.85143447
- 00:23:42.507 --> 00:23:44.970 3 testing, and this was later expanded,
- NOTE Confidence: 0.85143447
- $00:23:44.970 \longrightarrow 00:23:46.374$  so the demographics were,
- NOTE Confidence: 0.85143447
- 00:23:46.374 --> 00:23:48.836 for the most part, I would say,
- NOTE Confidence: 0.85143447
- $00:23:48.836 \longrightarrow 00:23:50.596$  expected with regards to age,
- NOTE Confidence: 0.85143447
- $00:23:50.600 \longrightarrow 00:23:52.819$  set of genetic risk given the inclusion
- NOTE Confidence: 0.85143447
- $00{:}23{:}52{.}819 \dashrightarrow 00{:}23{:}54{.}819$  criteria that I mentioned before,
- NOTE Confidence: 0.85143447
- $00:23:54.820 \longrightarrow 00:23:56.684$  a majority of patients.
- NOTE Confidence: 0.85143447
- 00:23:56.684 --> 00:23:58.548 Did have ITD mutations?
- NOTE Confidence: 0.85143447
- 00:23:58.550 --> 00:23:59.304 Of note,
- NOTE Confidence: 0.85143447
- $00:23:59.304 \longrightarrow 00:24:01.189$  65% of patients received prior
- NOTE Confidence: 0.85143447
- $00:24:01.189 \rightarrow 00:24:03.521$  therapy with the flip three inhibitor
- NOTE Confidence: 0.85143447
- $00{:}24{:}03{.}521 \dashrightarrow 00{:}24{:}05{.}783$  and a third enrolled after they
- NOTE Confidence: 0.85143447
- $00{:}24{:}05{.}783 \dashrightarrow 00{:}24{:}08{.}419$  had a relapse after all ogeneic
- NOTE Confidence: 0.85143447
- 00:24:08.419 --> 00:24:10.607 metaplastic stem cell transplantation.
- NOTE Confidence: 0.85143447
- $00:24:10.610 \rightarrow 00:24:12.445$  All patients experienced an adverse
- NOTE Confidence: 0.85143447

 $00:24:12.445 \longrightarrow 00:24:14.710$  event in nearly all grade three,

NOTE Confidence: 0.85143447

 $00:24:14.710 \rightarrow 00:24:16.580$  with unsurprisingly, was being cytopenias.

NOTE Confidence: 0.85143447

00:24:16.580 --> 00:24:17.324 You know,

NOTE Confidence: 0.85143447

 $00{:}24{:}17{.}324 \dashrightarrow 00{:}24{:}19{.}556$  given the combination with medical access,

NOTE Confidence: 0.85143447

 $00{:}24{:}19.560 \dashrightarrow 00{:}24{:}22.115$ you know a very well known Milo

NOTE Confidence: 0.85143447

 $00{:}24{:}22.115 \dashrightarrow 00{:}24{:}23.670$  toxic amount suppressive agent,

NOTE Confidence: 0.85143447

 $00:24:23.670 \rightarrow 00:24:25.896$  but perhaps some contribution of guilt.

NOTE Confidence: 0.85143447

 $00:24:25.900 \longrightarrow 00:24:27.046$  And as well,

NOTE Confidence: 0.85143447

 $00{:}24{:}27.046 \dashrightarrow 00{:}24{:}29.338$  three patients were reported as having

NOTE Confidence: 0.85143447

 $00:24:29.338 \rightarrow 00:24:31.245$  laboratory tumor lysis syndrome with

NOTE Confidence: 0.85143447

00:24:31.245 --> 00:24:33.740 only one of these having clinical TLS,

NOTE Confidence: 0.85143447

 $00:24:33.740 \longrightarrow 00:24:35.232$  only 60% of patients,

NOTE Confidence: 0.85143447

 $00:24:35.232 \longrightarrow 00:24:37.470$  at least as of last follow-up,

NOTE Confidence: 0.85143447

 $00:24:37.470 \longrightarrow 00:24:40.746$  discontinued the drug due to adverse events.

NOTE Confidence: 0.85143447

00:24:40.750 --> 00:24:41.430 Of note,

NOTE Confidence: 0.85143447

 $00:24:41.430 \rightarrow 00:24:44.150$  no patients died within a month of dosing,

- NOTE Confidence: 0.85143447
- $00:24:44.150 \longrightarrow 00:24:49.199$  but six died with up to 60 days out.

00:24:49.200 --> 00:24:51.960 Amongst 41 amongst 41 adult patients,

NOTE Confidence: 0.85143447

 $00:24:51.960 \rightarrow 00:24:55.149$  only three achieved CR or 7% specifically.

NOTE Confidence: 0.85143447

 $00{:}24{:}55{.}149 \dashrightarrow 00{:}24{:}55{.}578$  However,

NOTE Confidence: 0.85143447

 $00{:}24{:}55{.}578 \dashrightarrow 00{:}24{:}57{.}723$ 27% of patients achieved a

NOTE Confidence: 0.85143447

 $00:24:57.723 \rightarrow 00:24:59.780$  less than CR remission,

NOTE Confidence: 0.8010021

 $00{:}24{:}59{.}780 \dashrightarrow 00{:}25{:}04{.}487$  which here was inclusive of CR or CR P.

NOTE Confidence: 0.8010021

 $00{:}25{:}04{.}490 \dashrightarrow 00{:}25{:}06{.}650$  Half of patients achieved MFS or

NOTE Confidence: 0.8010021

 $00{:}25{:}06.650 \dashrightarrow 00{:}25{:}08.490$ morphologic leukemia Free State again,

NOTE Confidence: 0.8010021

 $00:25:08.490 \longrightarrow 00:25:11.088$  in the context of the Netflix

NOTE Confidence: 0.8010021

 $00{:}25{:}11.088 \dashrightarrow 00{:}25{:}12.387$  related mileage suppression.

NOTE Confidence: 0.8010021

 $00:25:12.390 \dashrightarrow 00:25:13.096$  Amongst responders,

NOTE Confidence: 0.8010021

 $00:25:13.096 \rightarrow 00:25:15.920$  the median time to response was one month,

NOTE Confidence: 0.8010021

 $00{:}25{:}15{.}920 \dashrightarrow 00{:}25{:}17{.}332$  but best responses were

NOTE Confidence: 0.8010021

 $00{:}25{:}17{.}332 \dashrightarrow 00{:}25{:}19{.}450$  observed up to four months out.

 $00{:}25{:}19{.}450 \dashrightarrow 00{:}25{:}21{.}005$  No more could differences in

NOTE Confidence: 0.8010021

 $00{:}25{:}21.005 \dashrightarrow 00{:}25{:}23.009$  response or the types of response

NOTE Confidence: 0.8010021

 $00{:}25{:}23.009 \dashrightarrow 00{:}25{:}25.301$  for that matter were apparent after

NOTE Confidence: 0.8010021

 $00{:}25{:}25{.}301 \dashrightarrow 00{:}25{:}27{.}216$  accounting for prior flip three

NOTE Confidence: 0.8010021

 $00{:}25{:}27{.}216 \dashrightarrow 00{:}25{:}28{.}981$  inhibitor exposure other than may be

NOTE Confidence: 0.8010021

 $00{:}25{:}28{.}981 \dashrightarrow 00{:}25{:}31{.}452$  a little less or chance of CR.

NOTE Confidence: 0.8010021

00:25:31.452 --> 00:25:33.217 As you can see here,

NOTE Confidence: 0.8010021

 $00:25:33.220 \longrightarrow 00:25:37.030$  7.3 versus one quote versus 3.6%.

NOTE Confidence: 0.8010021

 $00{:}25{:}37.030 \dashrightarrow 00{:}25{:}38.655$  The median overall survival for

NOTE Confidence: 0.8010021

 $00{:}25{:}38.655 \dashrightarrow 00{:}25{:}40.740$  the overall cohort was 12.3 months

NOTE Confidence: 0.8010021

 $00:25:40.740 \longrightarrow 00:25:42.328$  and specifically not reached,

NOTE Confidence: 0.8010021

 $00{:}25{:}42{.}330 \dashrightarrow 00{:}25{:}44{.}442$  including an unreached lower limit of

NOTE Confidence: 0.8010021

 $00{:}25{:}44{.}442 \dashrightarrow 00{:}25{:}46{.}910$  the 95% confidence interval for ITD patients.

NOTE Confidence: 0.8010021

 $00{:}25{:}46{.}910 \dashrightarrow 00{:}25{:}48{.}585$  Clear differences in survival were

NOTE Confidence: 0.8010021

 $00{:}25{:}48.585 \dashrightarrow 00{:}25{:}50.800$  noted based on prior filter exposure,

NOTE Confidence: 0.8010021

 $00:25:50.800 \longrightarrow 00:25:53.455$  so I would say in some the addition of

 $00:25:53.455 \rightarrow 00:25:55.674$  attacks appears to augment the efficacy

NOTE Confidence: 0.8010021

 $00:25:55.674 \rightarrow 00:25:58.560$  of of guilt monotherapy in this situation,

NOTE Confidence: 0.8010021

 $00:25:58.560 \longrightarrow 00:26:00.325$  which based on the Admiral

NOTE Confidence: 0.8010021

 $00:26:00.325 \rightarrow 00:26:02.090$  trial I had mentioned before,

NOTE Confidence: 0.8010021

 $00:26:02.090 \longrightarrow 00:26:03.742$  predicts a median survival

NOTE Confidence: 0.8010021

 $00{:}26{:}03.742 \dashrightarrow 00{:}26{:}06.870$  around 9 nine and a half months.

NOTE Confidence: 0.8010021

 $00{:}26{:}06{.}870 \dashrightarrow 00{:}26{:}09{.}054$  This is at the expense of near

NOTE Confidence: 0.8010021

00:26:09.054 --> 00:26:09.990 double hematologic toxicity,

NOTE Confidence: 0.8010021

 $00{:}26{:}09{.}990 \dashrightarrow 00{:}26{:}12{.}358$  which I think we can all agree is

NOTE Confidence: 0.8010021

 $00:26:12.358 \rightarrow 00:26:14.049$  attributable to the phonetic LAX,

NOTE Confidence: 0.8010021

 $00:26:14.050 \longrightarrow 00:26:14.968$  but of course.

NOTE Confidence: 0.8010021

00:26:14.968 --> 00:26:16.804 Just heating some caution and saying

NOTE Confidence: 0.8010021

 $00{:}26{:}16.804 \dashrightarrow 00{:}26{:}19.017$  it appears to increase the efficacy

NOTE Confidence: 0.8010021

 $00:26:19.017 \rightarrow 00:26:21.260$  outside of a randomized clinical trial,

NOTE Confidence: 0.8010021

 $00{:}26{:}21{.}260 \dashrightarrow 00{:}26{:}22{.}994$  so this isn't of course need

 $00:26:22.994 \longrightarrow 00:26:24.520$  to at least confirm this.

NOTE Confidence: 0.8010021

 $00:26:24.520 \longrightarrow 00:26:25.708$  This likely benefit here.

NOTE Confidence: 0.77116615

 $00{:}26{:}27.760 \dashrightarrow 00{:}26{:}29.490$  Jump into the next update.

NOTE Confidence: 0.77116615

 $00:26:29.490 \longrightarrow 00:26:33.819$  I have 40 or so older patients with AML.

NOTE Confidence: 0.77116615

00:26:33.820 --> 00:26:35.590 Have generally a poor outcomes,

NOTE Confidence: 0.77116615

 $00{:}26{:}35{.}590 \dashrightarrow 00{:}26{:}37{.}564$  but there there is some variance

NOTE Confidence: 0.77116615

 $00{:}26{:}37.564 \dashrightarrow 00{:}26{:}39.480$  noted to improve these outcomes.

NOTE Confidence: 0.77116615

 $00:26:39.480 \rightarrow 00:26:41.610$  Ventures like the following are underway,

NOTE Confidence: 0.77116615

00:26:41.610 --> 00:26:43.794 so next I'd like to discuss the

NOTE Confidence: 0.77116615

00:26:43.794 --> 00:26:45.989 interim results of a striking study

NOTE Confidence: 0.77116615

 $00{:}26{:}45{.}989 \dashrightarrow 00{:}26{:}47{.}979$  of cladribine and lodosa Terrapin,

NOTE Confidence: 0.77116615

 $00:26:47.980 \longrightarrow 00:26:49.750$  which is essentially a double

NOTE Confidence: 0.77116615

 $00:26:49.750 \longrightarrow 00:26:51.166$  nucleoside backbone and Aza,

NOTE Confidence: 0.77116615

 $00{:}26{:}51{.}170 \dashrightarrow 00{:}26{:}53{.}994$  both with the addition of an ethics course.

NOTE Confidence: 0.77116615

 $00{:}26{:}54.000 \dashrightarrow 00{:}26{:}56.124$  The double clad plus Ldac backbone

NOTE Confidence: 0.77116615

 $00:26:56.124 \rightarrow 00:26:57.890$  has been previously studied this.

- NOTE Confidence: 0.77116615
- $00:26:57.890 \longrightarrow 00:27:00.122$  This isn't showing here in this

 $00{:}27{:}00{.}122 \dashrightarrow 00{:}27{:}02{.}349$  slide with alternating decide to be

NOTE Confidence: 0.77116615

 $00:27:02.349 \rightarrow 00:27:04.044$  as treatment for newly diagnosed.

NOTE Confidence: 0.77116615

 $00{:}27{:}04.050 \dashrightarrow 00{:}27{:}07.490$  Older patients with AML and this led to

NOTE Confidence: 0.77116615

00:27:07.490 --> 00:27:10.561 a composite CR of 68%, including CR 50%.

NOTE Confidence: 0.77116615

 $00{:}27{:}10.561 \dashrightarrow 00{:}27{:}13.123$  Quite quite nice with a median

NOTE Confidence: 0.77116615

 $00:27:13.123 \longrightarrow 00:27:15.310$  OS of well over a year.

NOTE Confidence: 0.77116615

 $00{:}27{:}15{.}310 \dashrightarrow 00{:}27{:}18{.}222$  It appears 14.8 months with quite low

NOTE Confidence: 0.77116615

 $00:27:18.222 \longrightarrow 00:27:21.738$  for an 8 week rates of mortality.

NOTE Confidence: 0.77116615

 $00:27:21.740 \longrightarrow 00:27:23.726$  So this is the actual trial.

NOTE Confidence: 0.77116615

 $00{:}27{:}23.730 \dashrightarrow 00{:}27{:}25.716$  This scheme is a little complex,

NOTE Confidence: 0.77116615

 $00{:}27{:}25{.}720 \dashrightarrow 00{:}27{:}27{.}380$  but essentially like I mentioned,

NOTE Confidence: 0.77116615

 $00:27:27.380 \longrightarrow 00:27:27.730$  older,

NOTE Confidence: 0.77116615

 $00{:}27{:}27{.}730 \dashrightarrow 00{:}27{:}29{.}480$  newly diagnosed patients with AML

NOTE Confidence: 0.77116615

 $00{:}27{:}29{.}480 \dashrightarrow 00{:}27{:}31{.}699$  received clad plus ldac with van with.

 $00{:}27{:}31.700 \dashrightarrow 00{:}27{:}33.360$  As you can see here,

NOTE Confidence: 0.77116615

 $00{:}27{:}33{.}360 \dashrightarrow 00{:}27{:}35{.}035$  the standard dose reductions for

NOTE Confidence: 0.77116615

00:27:35.035 --> 00:27:37.089 CYP 3A four inhibitor use receive

NOTE Confidence: 0.77116615

 $00:27:37.089 \rightarrow 00:27:38.337$  this for cycle one,

NOTE Confidence: 0.77116615

 $00{:}27{:}38{.}340 \dashrightarrow 00{:}27{:}40{.}384$  with cycle to being the same three

NOTE Confidence: 0.77116615

 $00{:}27{:}40{.}384$  -->  $00{:}27{:}42{.}872$  drugs but less clad and a little bit NOTE Confidence: 0.77116615

00:27:42.872 --> 00:27:44.864 less fanatical acts with cycle three

NOTE Confidence: 0.77116615

 $00{:}27{:}44.864 \dashrightarrow 00{:}27{:}46.388$  switching the nucleoside backbone

NOTE Confidence: 0.77116615

 $00{:}27{:}46.388 \dashrightarrow 00{:}27{:}48.632$  for Asia on the standard schedule,

NOTE Confidence: 0.77116615

 $00{:}27{:}48.632 \dashrightarrow 00{:}27{:}50.956$  again with phonetic lacks for 14 days,

NOTE Confidence: 0.77116615

 $00{:}27{:}50{.}960 \dashrightarrow 00{:}27{:}52{.}488$  similar to cycle two.

NOTE Confidence: 0.77116615

 $00{:}27{:}52.488 \dashrightarrow 00{:}27{:}54.016$  So basically patients received.

NOTE Confidence: 0.77116615

00:27:54.020 --> 00:27:54.542 Part A,

NOTE Confidence: 0.77116615

 $00:27:54.542 \longrightarrow 00:27:57.030$  as you can see here and they can move.

NOTE Confidence: 0.77116615

 $00{:}27{:}57{.}030 \dashrightarrow 00{:}27{:}57{.}542$  I don't.

NOTE Confidence: 0.77116615

 $00{:}27{:}57{.}542 \dashrightarrow 00{:}27{:}59{.}334$  I don't know how to use a

- NOTE Confidence: 0.77116615
- $00:27:59.334 \rightarrow 00:28:00.319$  highlighter or whatever,

 $00{:}28{:}00{.}320 \dashrightarrow 00{:}28{:}02{.}318$  but patients received a \* 2 then

NOTE Confidence: 0.77116615

 $00{:}28{:}02{.}318 \dashrightarrow 00{:}28{:}05{.}304$  B \* 2 and then back and forth back

NOTE Confidence: 0.77116615

 $00:28:05.304 \rightarrow 00:28:07.978$  and forth for up to 18 cycles.

NOTE Confidence: 0.77116615

 $00{:}28{:}07{.}980 \dashrightarrow 00{:}28{:}10{.}225$  So here the patient characteristics

NOTE Confidence: 0.77116615

 $00{:}28{:}10{.}225 \dashrightarrow 00{:}28{:}13{.}440$  as of the first day to cut of

NOTE Confidence: 0.77116615

 $00:28:13.440 \longrightarrow 00:28:15.638$  note 40% of patients for older.

NOTE Confidence: 0.77116615

 $00:28:15.638 \longrightarrow 00:28:17.648$  Sorry older than 70 years,

NOTE Confidence: 0.77116615

 $00{:}28{:}17.650 \dashrightarrow 00{:}28{:}19.665$ 25% were had disease characterized

NOTE Confidence: 0.77116615

 $00:28:19.665 \longrightarrow 00:28:20.874$  by porous I,

NOTE Confidence: 0.77116615

00:28:20.880 --> 00:28:23.100 genetics ANAN would be would be

NOTE Confidence: 0.77116615

 $00:28:23.100 \longrightarrow 00:28:25.310$  generally expected given this population,

NOTE Confidence: 0.77116615

 $00:28:25.310 \rightarrow 00:28:27.675$  although nearly half were ellenor

NOTE Confidence: 0.77116615

00:28:27.675 --> 00:28:30.040 European leukemia net poor risk

NOTE Confidence: 0.77116615

 $00{:}28{:}30{.}121 \dashrightarrow 00{:}28{:}32{.}381$  after accounting for the relevant

 $00:28:32.381 \rightarrow 00:28:35.370$  molecular features on top of genetics.

NOTE Confidence: 0.77116615

 $00:28:35.370 \longrightarrow 00:28:37.510$  Amongst the 54 patients that

NOTE Confidence: 0.77116615

 $00{:}28{:}37{.}510 \dashrightarrow 00{:}28{:}40{.}105$  today have been accrued and are

NOTE Confidence: 0.77116615

 $00{:}28{:}40.105 \dashrightarrow 00{:}28{:}42.349$  in fact invaluable with a median

NOTE Confidence: 0.77116615

 $00:28:42.349 \longrightarrow 00:28:45.008$  one cycle or month to responses,

NOTE Confidence: 0.77116615

 $00{:}28{:}45.010 \dashrightarrow 00{:}28{:}47.908$  striking 78% achieved CR and basically all

NOTE Confidence: 0.77116615

 $00{:}28{:}47.908 \dashrightarrow 00{:}28{:}50.450$  except three achieved MFC MRD negativity.

NOTE Confidence: 0.77116615

00:28:50.450 --> 00:28:50.923 Basically,

NOTE Confidence: 0.77116615

 $00{:}28{:}50{.}923 \dashrightarrow 00{:}28{:}53{.}288$  MRD negativity negativity by flow

NOTE Confidence: 0.77116615

 $00{:}28{:}53{.}288 \dashrightarrow 00{:}28{:}55{.}180$  centric analysis including CRIA

NOTE Confidence: 0.77116615

 $00{:}28{:}55{.}245 \dashrightarrow 00{:}28{:}57{.}190$  composite CR rate of 93% was

NOTE Confidence: 0.77116615

 $00{:}28{:}57{.}190 \dashrightarrow 00{:}28{:}59{.}890$  rendered which is simply a mazing and

NOTE Confidence: 0.77116615

 $00{:}28{:}59{.}890 \dashrightarrow 00{:}29{:}02{.}536$  perhaps I really should have saved

NOTE Confidence: 0.77116615

 $00{:}29{:}02{.}536 \dashrightarrow 00{:}29{:}05{.}357$  this safest route for the end so.

NOTE Confidence: 0.77116615

 $00{:}29{:}05{.}360 \dashrightarrow 00{:}29{:}07{.}810$  One of the more striking updates from

NOTE Confidence: 0.77116615

 $00:29:07.810 \longrightarrow 00:29:10.359$  ASH with regards to the response rates.

- NOTE Confidence: 0.77116615
- 00:29:10.360 --> 00:29:10.716 However,
- NOTE Confidence: 0.77116615
- $00:29:10.716 \longrightarrow 00:29:12.852$  it's not all about response rates
- NOTE Confidence: 0.77116615
- $00:29:12.852 \rightarrow 00:29:14.678$  for the patient not proceeding
- NOTE Confidence: 0.77116615
- $00:29:14.678 \longrightarrow 00:29:16.070$  to cure to therapy,
- NOTE Confidence: 0.77116615
- $00{:}29{:}16.070 \dashrightarrow 00{:}29{:}18.350$  really care bout event based outcomes
- NOTE Confidence: 0.77116615
- $00:29:18.350 \longrightarrow 00:29:20.249$  like survival in evaluating survival
- NOTE Confidence: 0.77116615
- $00:29:20.249 \longrightarrow 00:29:22.496$  and a medium median of 14.2 months.
- NOTE Confidence: 0.77116615
- $00{:}29{:}22.500 \dashrightarrow 00{:}29{:}24.636$  The OS and RFS curves were
- NOTE Confidence: 0.77116615
- $00:29:24.636 \longrightarrow 00:29:25.704$  essentially the same,
- NOTE Confidence: 0.77116615
- $00{:}29{:}25.710 \dashrightarrow 00{:}29{:}28.209$  meaning OS was reached was not reached.
- NOTE Confidence: 0.77116615
- 00:29:28.210 --> 00:29:28.521 Sorry,
- NOTE Confidence: 0.77116615
- $00{:}29{:}28{.}521 \dashrightarrow 00{:}29{:}31{.}009$  and 60% of patients were still alive at
- NOTE Confidence: 0.77116615
- $00{:}29{:}31.009 \dashrightarrow 00{:}29{:}33.558$  two years after starting the rapy again.
- NOTE Confidence: 0.77116615
- $00{:}29{:}33{.}560 \dashrightarrow 00{:}29{:}35{.}052$  Quite a mazing considering the
- NOTE Confidence: 0.77116615
- $00:29:35.052 \rightarrow 00:29:37.290$  fact that half of patients were.
- NOTE Confidence: 0.64456517

- 00:29:37.290 --> 00:29:38.994 Yellen adverse risk. Sorry
- NOTE Confidence: 0.64456517
- $00{:}29{:}38{.}994 \dashrightarrow 00{:}29{:}40{.}698$  hadelin adverse risk disease.
- NOTE Confidence: 0.8340789
- $00:29:42.750 \longrightarrow 00:29:44.610$  However, this is just some.
- NOTE Confidence: 0.8340789
- $00:29:44.610 \longrightarrow 00:29:46.460$  You know, some smaller kind
- NOTE Confidence: 0.8340789
- $00:29:46.460 \longrightarrow 00:29:47.570$  of subpopulation analysis.
- NOTE Confidence: 0.8340789
- $00{:}29{:}47{.}570 \dashrightarrow 00{:}29{:}50{.}146$  You can see that when accounting for
- NOTE Confidence: 0.8340789
- 00:29:50.146 --> 00:29:52.770 set of genetic risk and Dylan risk,
- NOTE Confidence: 0.8340789
- 00:29:52.770 --> 00:29:53.880 not surprising differences
- NOTE Confidence: 0.8340789
- $00{:}29{:}53.880 \dashrightarrow 00{:}29{:}55.360$  are in fact observed.
- NOTE Confidence: 0.8340789
- $00:29:55.360 \longrightarrow 00:29:57.586$  I would note that 11 patients
- NOTE Confidence: 0.8340789
- $00:29:57.586 \longrightarrow 00:29:59.862$  or 2524% of the 45 responding.
- NOTE Confidence: 0.8340789
- 00:29:59.862 --> 00:30:01.011 Patients proceeding to
- NOTE Confidence: 0.8340789
- $00:30:01.011 \rightarrow 00:30:02.740$  transplant with these patients,
- NOTE Confidence: 0.8340789
- $00{:}30{:}02{.}740 \dashrightarrow 00{:}30{:}04{.}112$  patients really enjoying more
- NOTE Confidence: 0.8340789
- $00:30:04.112 \longrightarrow 00:30:06.168$  than 90% survival at one year,
- NOTE Confidence: 0.8340789
- $00:30:06.168 \longrightarrow 00:30:07.878$  which when compared with the

- NOTE Confidence: 0.8340789
- $00:30:07.878 \dashrightarrow 00:30:09.634$  folks not getting to transform

 $00:30:09.634 \rightarrow 00:30:11.339$  with 69% but a difference,

NOTE Confidence: 0.8340789

 $00:30:11.339 \longrightarrow 00:30:13.054$  did not reach statistical significance.

NOTE Confidence: 0.8340789

 $00:30:13.060 \rightarrow 00:30:15.118$  Likely in the setting of just,

NOTE Confidence: 0.8340789

 $00:30:15.120 \longrightarrow 00:30:15.806$  you know,

NOTE Confidence: 0.8340789

 $00{:}30{:}15.806 \dashrightarrow 00{:}30{:}17.864$  obviously a small early phase study.

NOTE Confidence: 0.7932578

00:30:20.240 --> 00:30:21.825 So just going to switch

NOTE Confidence: 0.7932578

 $00{:}30{:}21.825 \dashrightarrow 00{:}30{:}23.750$  gears a little bit with AML,

NOTE Confidence: 0.7932578

00:30:23.750 --> 00:30:25.750 one of the first decision we have to

NOTE Confidence: 0.7932578

 $00{:}30{:}25{.}750 \dashrightarrow 00{:}30{:}28{.}218$  make is whether patient is quote unquote

NOTE Confidence: 0.7932578

 $00:30:28.218 \rightarrow 00:30:30.123$  intensive therapy eligible or not.

NOTE Confidence: 0.7932578

00:30:30.130 --> 00:30:32.062 The first 2 trials I mentioned were

NOTE Confidence: 0.7932578

 $00{:}30{:}32{.}062 \dashrightarrow 00{:}30{:}33{.}707$  really geared towards patients that

NOTE Confidence: 0.7932578

 $00{:}30{:}33{.}707 \dashrightarrow 00{:}30{:}35{.}227$  are intensive the rapy ineligible.

NOTE Confidence: 0.7932578

 $00{:}30{:}35{.}230 \dashrightarrow 00{:}30{:}36{.}980$  But what about patients receiving

 $00:30:36.980 \rightarrow 00:30:39.034$  intensive therapy generally felt to be

NOTE Confidence: 0.7932578

 $00{:}30{:}39{.}034 \dashrightarrow 00{:}30{:}41{.}058$  the standard of care for those who are

NOTE Confidence: 0.7932578

00:30:41.058 --> 00:30:42.888 eligible with some specific exceptions? NOTE Confidence: 0.7932578

00:30:42.890 --> 00:30:44.480 Of course if prompted debate,

NOTE Confidence: 0.7932578

 $00{:}30{:}44{.}480 \dashrightarrow 00{:}30{:}46{.}400$  but that's a discussion for another.

NOTE Confidence: 0.7932578

 $00{:}30{:}46{.}400 \dashrightarrow 00{:}30{:}47{.}052$  Another presentation.

NOTE Confidence: 0.7932578

 $00{:}30{:}47.052 \dashrightarrow 00{:}30{:}49.660$  Here is the schema for a trial also

NOTE Confidence: 0.7932578

 $00{:}30{:}49.718 \dashrightarrow 00{:}30{:}51.674$  out of MD Anderson and evaluating

NOTE Confidence: 0.7932578

 $00{:}30{:}51{.}674 \dashrightarrow 00{:}30{:}53{.}380$  the addition of genetic lacks.

NOTE Confidence: 0.7932578

 $00:30:53.380 \dashrightarrow 00:30:56.084$  To CPX, 3/5 one or the brand name NOTE Confidence: 0.7932578

 $00{:}30{:}56.084 \dashrightarrow 00{:}30{:}58.851$  being fix EOS which is standard of

NOTE Confidence: 0.7932578

 $00{:}30{:}58{.}851 \dashrightarrow 00{:}31{:}01{.}886$  care for patients with AML MRC and

NOTE Confidence: 0.7932578

 $00{:}31{:}01{.}886$  -->  $00{:}31{:}04{.}246$  therapy quote unquote related AML.

NOTE Confidence: 0.7932578

 $00{:}31{:}04.250 \dashrightarrow 00{:}31{:}06.924$  The design included cohort for a dults with

NOTE Confidence: 0.7932578

 $00:31:06.924 \rightarrow 00:31:09.188$  newly diagnosed AML as well as looks.

NOTE Confidence: 0.7932578

 $00:31:09.190 \longrightarrow 00:31:10.955$  Factory disease, with the latter

- NOTE Confidence: 0.7932578
- $00:31:10.955 \rightarrow 00:31:12.367$  allowing prior phonetics exposure.

00:31:12.370 --> 00:31:13.375 Quite important criterion.

NOTE Confidence: 0.7932578

00:31:13.375 --> 00:31:15.385 A dose escalation phase or safety

NOTE Confidence: 0.7932578

 $00:31:15.385 \longrightarrow 00:31:16.250$  run included.

NOTE Confidence: 0.7932578

00:31:16.250 --> 00:31:18.020 Of course, all the patients,

NOTE Confidence: 0.7932578

 $00:31:18.020 \longrightarrow 00:31:19.428$  irrespective of whether they

NOTE Confidence: 0.7932578

00:31:19.428 --> 00:31:20.484 were Dinovo slash,

NOTE Confidence: 0.7932578

00:31:20.490 --> 00:31:23.850 newly diagnosed or realtor factory.

NOTE Confidence: 0.7932578

 $00:31:23.850 \longrightarrow 00:31:26.013$  Of note CPX 3/5 one was given

NOTE Confidence: 0.7932578

 $00:31:26.013 \longrightarrow 00:31:27.969$  at the standard dose on label.

NOTE Confidence: 0.7932578

00:31:27.970 --> 00:31:29.402 Essentially event began fairly

NOTE Confidence: 0.7932578

 $00{:}31{:}29{.}402 \dashrightarrow 00{:}31{:}32{.}158$  quickly on day two with a three day

NOTE Confidence: 0.7932578

 $00:31:32.158 \rightarrow 00:31:34.310$  ramp up to a target dose of 400,

NOTE Confidence: 0.7932578

00:31:34.310 --> 00:31:35.775 again with the standard dose

NOTE Confidence: 0.7932578

 $00{:}31{:}35{.}775 \dashrightarrow 00{:}31{:}37{.}620$  reductions you would expect or should

 $00:31:37.620 \rightarrow 00:31:39.235$  be considering with concurrency 3A

NOTE Confidence: 0.7932578

 $00{:}31{:}39{.}235 \dashrightarrow 00{:}31{:}41{.}230$  four inhibition as well as toxicities

NOTE Confidence: 0.7932578

 $00:31:41.230 \dashrightarrow 00:31:42.522$  prompted prompting dropping to

NOTE Confidence: 0.7932578

 $00:31:42.522 \rightarrow 00:31:44.741$  lower dose levels as they came up.

NOTE Confidence: 0.7932578

 $00{:}31{:}44{.}741 \dashrightarrow 00{:}31{:}46{.}890$  Essentially this was then was given for

NOTE Confidence: 0.7932578

 $00:31:46.957 \longrightarrow 00:31:48.769$  three weeks during induction as well

NOTE Confidence: 0.7932578

 $00:31:48.769 \dashrightarrow 00:31:51.428$  As for 20 three weeks during each cycle.

NOTE Confidence: 0.7932578

 $00:31:51.430 \longrightarrow 00:31:51.808$  Consolidation.

NOTE Confidence: 0.7932578

 $00:31:51.808 \rightarrow 00:31:55.210$  In this case they allowed up to four cycles.

NOTE Confidence: 0.7932578

 $00:31:55.210 \longrightarrow 00:31:56.202$  Of consolidation,

NOTE Confidence: 0.7932578

 $00:31:56.202 \dashrightarrow 00:32:00.600$  in contrast to the standard on label CPX 351.

NOTE Confidence: 0.7932578

 $00:32:00.600 \longrightarrow 00:32:02.950$  Monotherapy consolidation.

NOTE Confidence: 0.7932578

 $00{:}32{:}02{.}950 \dashrightarrow 00{:}32{:}04{.}570$  Here the characteristics of the

NOTE Confidence: 0.7932578

 $00{:}32{:}04{.}570 \dashrightarrow 00{:}32{:}06{.}554$  patients who had a broad range

NOTE Confidence: 0.7932578

 $00{:}32{:}06{.}554 \dashrightarrow 00{:}32{:}08{.}384$  of age instead of genetic risk,

NOTE Confidence: 0.7932578

00:32:08.390 --> 00:32:10.707 I'll call your attention to the right

- NOTE Confidence: 0.7932578
- 00:32:10.707 -> 00:32:13.202 where you can see that 30% of patients

 $00:32:13.202 \dashrightarrow 00:32:14.832$  had disease characterized by the

NOTE Confidence: 0.7932578

00:32:14.832 --> 00:32:17.308 presence of a TP 53 mutation and after

NOTE Confidence: 0.7932578

 $00:32:17.308 \rightarrow 00:32:19.590$  including ASL one and runx one mutations,

NOTE Confidence: 0.7932578

 $00:32:19.590 \longrightarrow 00:32:21.753$  the majority of patients did in fact

NOTE Confidence: 0.7932578

00:32:21.753 --> 00:32:23.429 have guillain adverse risk disease.

NOTE Confidence: 0.79286337

00:32:25.610 --> 00:32:27.956 Only 6% of patients achieved CR,

NOTE Confidence: 0.79286337

 $00:32:27.960 \dashrightarrow 00:32:31.080$  but CR CRA was the rate of CRC.

NOTE Confidence: 0.79286337

 $00:32:31.080 \longrightarrow 00:32:33.912$  I was 39% still fairly low with a

NOTE Confidence: 0.79286337

 $00:32:33.912 \dashrightarrow 00:32:36.558$  median one cycle time to response.

NOTE Confidence: 0.79286337

 $00:32:36.560 \longrightarrow 00:32:39.128$  The most common reason for coming off of

NOTE Confidence: 0.79286337

 $00{:}32{:}39{.}128 \dashrightarrow 00{:}32{:}42{.}030$  study was actually proceeding to transplant.

NOTE Confidence: 0.79286337

 $00:32:42.030 \dashrightarrow 00:32:44.599$  This occurred in 31 patients were but

NOTE Confidence: 0.79286337

 $00{:}32{:}44{.}599 \dashrightarrow 00{:}32{:}47{.}508$  generally 50 half of the patient population.

NOTE Confidence: 0.79286337

 $00{:}32{:}47{.}510 \dashrightarrow 00{:}32{:}49{.}814$  The most common grade 3 plus

 $00:32:49.814 \rightarrow 00:32:52.199$  ease were human logic in nature,

NOTE Confidence: 0.79286337

 $00:32:52.200 \rightarrow 00:32:55.160$  pneumonia amongst other infections didn't.

NOTE Confidence: 0.79286337

00:32:55.160 --> 00:32:58.086 Did also occur 30 and 60 day

NOTE Confidence: 0.79286337

00:32:58.086 --> 00:32:59.878 mortality were weren't nominal

NOTE Confidence: 0.79286337

 $00:32:59.878 \longrightarrow 00:33:03.678 \ 10\%$  at 30 days and 20% at 60 days,

NOTE Confidence: 0.79286337

 $00{:}33{:}03.678 \dashrightarrow 00{:}33{:}06.450$  so a fairly toxic regimen with again

NOTE Confidence: 0.79286337

 $00:33:06.540 \longrightarrow 00:33:09.185$  relatively limited efficacy in comparison

NOTE Confidence: 0.79286337

 $00:33:09.185 \rightarrow 00:33:12.740$  to the other guys I've presented.

NOTE Confidence: 0.79286337

 $00{:}33{:}12.740$  -->  $00{:}33{:}15.323$  The median overall survival was six months

NOTE Confidence: 0.79286337

 $00:33:15.323 \longrightarrow 00:33:18.468$  with a 6 month OS rate of about 53%.

NOTE Confidence: 0.79286337

 $00{:}33{:}18{.}470 \dashrightarrow 00{:}33{:}21{.}691$  Just to be specific and 46% at one year.

NOTE Confidence: 0.79286337

00:33:21.691 -> 00:33:23.119 So not terribly different.

NOTE Confidence: 0.79286337

 $00:33:23.120 \longrightarrow 00:33:25.268$  6 versus 12 months among responders,

NOTE Confidence: 0.79286337

 $00:33:25.270 \rightarrow 00:33:28.126$  the median OS and RFS were not reached,

NOTE Confidence: 0.79286337

 $00{:}33{:}28{.}130 \dashrightarrow 00{:}33{:}30{.}552$  and the six month OS and RFS

NOTE Confidence: 0.79286337

 $00:33:30.552 \rightarrow 00:33:32.070$  were essentially about 8590%.

 $00:33:32.070 \rightarrow 00:33:34.152$  You can see that patients without

NOTE Confidence: 0.79286337

 $00:33:34.152 \rightarrow 00:33:36.010$  prior medical exposure did better.

NOTE Confidence: 0.79286337

00:33:36.010 --> 00:33:38.158 However, again, given the small numbers,

NOTE Confidence: 0.79286337

 $00:33:38.160 \longrightarrow 00:33:42.240$  this did not reach statistical significance.

NOTE Confidence: 0.79286337

 $00:33:42.240 \longrightarrow 00:33:44.478$  Sticking with this is another trial.

NOTE Confidence: 0.79286337

 $00{:}33{:}44{.}480 \dashrightarrow 00{:}33{:}45{.}972$  Sticking with intensive the rapy

NOTE Confidence: 0.79286337

 $00:33:45.972 \longrightarrow 00:33:46.718$  eligible patients.

NOTE Confidence: 0.79286337

 $00:33:46.720 \dashrightarrow 00:33:48.994$  What about adding then to other

NOTE Confidence: 0.79286337

00:33:48.994 --> 00:33:50.820 intensive backbones beyond CPX 351,

NOTE Confidence: 0.79286337

 $00{:}33{:}50{.}820 \dashrightarrow 00{:}33{:}52{.}878$  here's a schema which demonstrates that

NOTE Confidence: 0.79286337

 $00{:}33{:}52.878 \dashrightarrow 00{:}33{:}54.708$  patients with both newly diagnosed

NOTE Confidence: 0.79286337

 $00{:}33{:}54.708 \dashrightarrow 00{:}33{:}56.718$  disease and relapse refractory disease

NOTE Confidence: 0.79286337

 $00{:}33{:}56{.}718$  -->  $00{:}33{:}58{.}650$  received a fairly standard flag.

NOTE Confidence: 0.79286337

 $00{:}33{:}58.650 \dashrightarrow 00{:}34{:}01.634$  Ida regimen and dosing with Medical X added,

NOTE Confidence: 0.79286337

 $00{:}34{:}01{.}640 \dashrightarrow 00{:}34{:}03{.}228$  especially specifically during days

 $00:34:03.228 \rightarrow 00:34:06.004$  one through 14 at a target dose

NOTE Confidence: 0.79286337

00:34:06.004 --> 00:34:07.978 of 400 in standard target dose,

NOTE Confidence: 0.79286337

 $00{:}34{:}07{.}980 \dashrightarrow 00{:}34{:}10{.}761$  but not without a ramp up and then high

NOTE Confidence: 0.79286337

 $00:34:10.761 \longrightarrow 00:34:13.679$  debt consolidation had been incorporated.

NOTE Confidence: 0.79286337

 $00{:}34{:}13.680 \dashrightarrow 00{:}34{:}15.988$  Days one through 14.

NOTE Confidence: 0.79286337

 $00{:}34{:}15{.}990 \dashrightarrow 00{:}34{:}17{.}534$  So a complex slide,

NOTE Confidence: 0.79286337

 $00:34:17.534 \rightarrow 00:34:20.359$  but hopefully that kind of summed it up.

NOTE Confidence: 0.79286337

 $00{:}34{:}20{.}360 \dashrightarrow 00{:}34{:}22{.}908$  Here are the patient demographics or sorry

NOTE Confidence: 0.79286337

 $00{:}34{:}22.908 \dashrightarrow 00{:}34{:}24.000$  patient characteristics specifically,

NOTE Confidence: 0.79286337

 $00:34:24.000 \rightarrow 00:34:25.700$  noting that the relapse refractory

NOTE Confidence: 0.79286337

 $00{:}34{:}25.700 \dashrightarrow 00{:}34{:}27.863$  cohorts were a bit more enriched

NOTE Confidence: 0.79286337

 $00{:}34{:}27.863 \dashrightarrow 00{:}34{:}29.459$  for adverse risk disease.

NOTE Confidence: 0.79286337

 $00:34:29.460 \longrightarrow 00:34:32.001$  And as you would otherwise expect and

NOTE Confidence: 0.79286337

 $00:34:32.001 \dashrightarrow 00:34:33.826$  38% had received prior allogeneic

NOTE Confidence: 0.79286337

 $00{:}34{:}33.826$  -->  $00{:}34{:}35.646$  Amanda poetic stem cell transplant.

NOTE Confidence: 0.79211825

 $00:34:37.970 \longrightarrow 00:34:40.328$  The toxicity was what you would

 $00:34:40.328 \rightarrow 00:34:42.303$  expect with intensive therapy and

NOTE Confidence: 0.79211825

 $00{:}34{:}42{.}303 \dashrightarrow 00{:}34{:}44{.}313$  addition of class including based on

NOTE Confidence: 0.79211825

00:34:44.313 --> 00:34:48.838 what I just presented. For C PX351.

NOTE Confidence: 0.79211825

 $00{:}34{:}48{.}840 \dashrightarrow 00{:}34{:}52{.}701$  CRC is 90% and in the newly diagnosed cohort

NOTE Confidence: 0.79211825

 $00:34:52.701 \longrightarrow 00:34:55.830$  60 to 75% in the roaster factory cohorts.

NOTE Confidence: 0.79211825

 $00:34:55.830 \dashrightarrow 00:35:00.998$  So and fairly good rates of MRD negativity.

NOTE Confidence: 0.79211825

 $00:35:01.000 \rightarrow 00:35:04.664$  And this is essentially just looking at at.

NOTE Confidence: 0.79211825

00:35:04.670 - 00:35:06.390 Based on their their disease,

NOTE Confidence: 0.79211825

 $00:35:06.390 \rightarrow 00:35:07.834$  the disease cohort specifically.

NOTE Confidence: 0.79211825

00:35:07.834 --> 00:35:10.689 So I'll just kind of wrap it up

NOTE Confidence: 0.79211825

 $00{:}35{:}10.689 \dashrightarrow 00{:}35{:}12.555$  with just promise two more slides.

NOTE Confidence: 0.79211825

 $00{:}35{:}12.560 \dashrightarrow 00{:}35{:}14.270$  So those updates for the rapies

NOTE Confidence: 0.79211825

 $00:35:14.270 \longrightarrow 00:35:15.296$  we already had.

NOTE Confidence: 0.79211825

 $00{:}35{:}15{.}300 \dashrightarrow 00{:}35{:}17{.}190$  But what about just one update

NOTE Confidence: 0.79211825

 $00:35:17.190 \longrightarrow 00:35:19.080$  on an agent or regimen?

 $00:35:19.080 \rightarrow 00:35:21.126$  We do not yet really have.

NOTE Confidence: 0.79211825

 $00:35:21.130 \longrightarrow 00:35:23.545$  This is Google Map or the this

NOTE Confidence: 0.79211825

00:35:23.545 --> 00:35:25.249 is the humanized anti CD.

NOTE Confidence: 0.79211825

00:35:25.250 --> 00:35:26.965 47 IgG, four monoclonal antibody

NOTE Confidence: 0.79211825

00:35:26.965 --> 00:35:28.680 product from from Gilead Sciences,

NOTE Confidence: 0.79211825

 $00{:}35{:}28.680 \dashrightarrow 00{:}35{:}29.988$  relevant as tumor expression

NOTE Confidence: 0.79211825

 $00:35:29.988 \longrightarrow 00:35:31.950$  of CD 47 prompts evasion from

NOTE Confidence: 0.79211825

 $00:35:32.012 \longrightarrow 00:35:33.480$  an 80 minute survaillance.

NOTE Confidence: 0.79211825

 $00:35:33.480 \dashrightarrow 00:35:34.509$  Specifically macrophage mediated.

NOTE Confidence: 0.79211825

00:35:34.509 - 00:35:36.224 Microcytosis and in fact pre

NOTE Confidence: 0.79211825

 $00:35:36.224 \longrightarrow 00:35:37.729$  clinical data support that AML,

NOTE Confidence: 0.79211825

00:35:37.730 --> 00:35:38.878 leukemic blast doing factor,

NOTE Confidence: 0.79211825

00:35:38.878 --> 00:35:41.200 or enriched for CD 47 Express expression.

NOTE Confidence: 0.79211825

 $00{:}35{:}41.200 \dashrightarrow 00{:}35{:}43.054$  So this was studied in combination

NOTE Confidence: 0.79211825

 $00{:}35{:}43.054 \dashrightarrow 00{:}35{:}44.980$  with Asia and a phase one.

NOTE Confidence: 0.79211825

 $00:35:44.980 \longrightarrow 00:35:48.102$  B2 trial that armored actually touched on

- NOTE Confidence: 0.79211825
- $00{:}35{:}48.102 \dashrightarrow 00{:}35{:}51.199$  earlier most in the context of high risk

 $00:35:51.199 \dashrightarrow 00:35:54.837$  MD S but I'll just focus on the AML cohort.

NOTE Confidence: 0.79211825

 $00:35:54.840 \longrightarrow 00:35:55.230$  Specifically,

NOTE Confidence: 0.79211825

 $00:35:55.230 \rightarrow 00:35:56.400$  90 except sorry,

NOTE Confidence: 0.79211825

00:35:56.400 --> 00:35:58.550 70% porous surgeon attics 70% P

NOTE Confidence: 0.79211825

 $00:35:58.550 \longrightarrow 00:36:00.310$  three mutations with a robust

NOTE Confidence: 0.79211825

 $00:36:00.371 \longrightarrow 00:36:02.466$  median vaf which would otherwise

NOTE Confidence: 0.79211825

 $00:36:02.466 \rightarrow 00:36:04.561$  predict biallelic loss of function.

NOTE Confidence: 0.79211825

 $00:36:04.570 \longrightarrow 00:36:06.122$  So essentially a very,

NOTE Confidence: 0.79211825

 $00:36:06.122 \rightarrow 00:36:06.510$  very,

NOTE Confidence: 0.79211825

 $00{:}36{:}06{.}510$  -->  $00{:}36{:}09{.}210$  very poorest population and not the

NOTE Confidence: 0.79211825

 $00{:}36{:}09{.}210 \dashrightarrow 00{:}36{:}11{.}450$  toxicity profile was generally what

NOTE Confidence: 0.79211825

 $00{:}36{:}11{.}450 \dashrightarrow 00{:}36{:}14{.}026$  you would expect with as a monotherapy

NOTE Confidence: 0.79211825

 $00:36{:}14.026 \dashrightarrow 00{:}36{:}16.506$  other than I'd say a mild transient

NOTE Confidence: 0.79211825

 $00:36:16.506 \rightarrow 00:36:18.595$  on targeting me that was reversible.

 $00:36:18.595 \rightarrow 00:36:21.085$  Know whether grade 3/4 plus 80s

NOTE Confidence: 0.79211825

 $00{:}36{:}21.085 \dashrightarrow 00{:}36{:}23.844$  and no immune related AE's given

NOTE Confidence: 0.79211825

 $00:36:23.844 \longrightarrow 00:36:25.760$  macros mechanism of action.

NOTE Confidence: 0.79211825

 $00{:}36{:}25.760 \dashrightarrow 00{:}36{:}27.884$  This is a slide hammer showed

NOTE Confidence: 0.79211825

 $00{:}36{:}27.884 \dashrightarrow 00{:}36{:}30.250$  you this is the AML cohort,

NOTE Confidence: 0.79211825

00:36:30.250 --> 00:36:32.770 essentially a 20% rate of see better

NOTE Confidence: 0.79211825

 $00:36:32.770 \longrightarrow 00:36:34.740$  in comparison to generate 20%

NOTE Confidence: 0.79211825

 $00{:}36{:}34.740 \dashrightarrow 00{:}36{:}36.978$  rate of expected as a monotherapy.

NOTE Confidence: 0.79211825

 $00:36:36.980 \longrightarrow 00:36:38.102$  60 ish percent,

NOTE Confidence: 0.79211825

 $00:36:38.102 \rightarrow 00:36:39.224$  essentially with essentially

NOTE Confidence: 0.79211825

 $00{:}36{:}39{.}224 \dashrightarrow 00{:}36{:}40{.}720$  in the waterfall plot.

NOTE Confidence: 0.79211825

00:36:40.720 --> 00:36:42.590 Here nearly all patients experiencing

NOTE Confidence: 0.79211825

 $00:36:42.590 \dashrightarrow 00:36:44.086$  Meryl Blast percentage reduction

NOTE Confidence: 0.79211825

 $00:36:44.086 \dashrightarrow 00:36:45.957$  with many being robust reductions.

NOTE Confidence: 0.79211825

 $00{:}36{:}45{.}960 \dashrightarrow 00{:}36{:}48{.}352$  The median OS at last day to cut

NOTE Confidence: 0.79211825

 $00{:}36{:}48{.}352 \dashrightarrow 00{:}36{:}51{.}025$  off of patients in the trial was

00:36:51.025 - 00:36:53.557 18.9 months and even after isolating

NOTE Confidence: 0.79211825

 $00:36:53.557 \dashrightarrow 00:36:56.317$  patients that had a P3 mutation.

NOTE Confidence: 0.79211825

 $00:36:56.320 \longrightarrow 00:36:57.940$  And we still 12.9 months,

NOTE Confidence: 0.79211825

 $00{:}36{:}57{.}940 \dashrightarrow 00{:}36{:}59{.}781$  which to be honest is the longest

NOTE Confidence: 0.79211825

00:36:59.781 --> 00:37:01.867 median OS I believe ever reported

NOTE Confidence: 0.79211825

00:37:01.867 - 00:37:03.097 for this population,

NOTE Confidence: 0.79211825

 $00:37:03.100 \rightarrow 00:37:05.354$  so quite striking as you can see,

NOTE Confidence: 0.79211825

 $00:37:05.360 \longrightarrow 00:37:07.274$  four or five patients are still

NOTE Confidence: 0.79211825

 $00:37:07.274 \rightarrow 00:37:09.240$  alive more than two years out,

NOTE Confidence: 0.79211825

 $00:37:09.240 \longrightarrow 00:37:10.143$  so quite impressive.

NOTE Confidence: 0.79211825

 $00{:}37{:}10.143 \dashrightarrow 00{:}37{:}12.674$  So I am a little bit over and

NOTE Confidence: 0.79211825

00:37:12.674 --> 00:37:14.090 I apologize to Nikolai.

NOTE Confidence: 0.79211825

 $00:37:14.090 \longrightarrow 00:37:15.410$  Mostly this is raw,

NOTE Confidence: 0.79211825

 $00{:}37{:}15{.}410 \dashrightarrow 00{:}37{:}17{.}060$  conclude my section and look

NOTE Confidence: 0.79211825

 $00{:}37{:}17.060 \dashrightarrow 00{:}37{:}18.929$  forward any questions at the end.

 $00:37:18.930 \longrightarrow 00:37:20.850$  So next I'd like to introduce

NOTE Confidence: 0.79211825

00:37:20.850 --> 00:37:22.130 Doctor Nikolai Pedulla civilly

NOTE Confidence: 0.79211825

 $00{:}37{:}22.187$  -->  $00{:}37{:}23.787$  discussing the ash 2020 updates NOTE Confidence: 0.79211825

 $00:37:23.787 \rightarrow 00:37:25.387$  in there almost perfect NPS.

NOTE Confidence: 0.8451901

00:37:29.040 --> 00:37:31.374 Alright, thank you Oriel let

NOTE Confidence: 0.8451901

 $00:37:31.374 \longrightarrow 00:37:34.260$  me share my slides with you.

NOTE Confidence: 0.89198864

 $00:37:34.260 \longrightarrow 00:37:35.228$  How does it look?

NOTE Confidence: 0.89198864

 $00:37:35.228 \rightarrow 00:37:36.680$  Does it look like one screen?

NOTE Confidence: 0.72244483

 $00{:}37{:}40{.}950 \dashrightarrow 00{:}37{:}42{.}830$  We don't see slides head.

NOTE Confidence: 0.72244483

00:37:42.830 --> 00:37:45.080 Sadly you don't see slides OK,

NOTE Confidence: 0.72244483

 $00:37:45.080 \rightarrow 00:37:48.244$  just a second. We just see you.

NOTE Confidence: 0.72244483

00:37:48.244 --> 00:37:49.905 Oh interesting. Alright,

NOTE Confidence: 0.72244483

 $00{:}37{:}49{.}905 \dashrightarrow 00{:}37{:}52{.}825$  so hold on let me escape from here.

NOTE Confidence: 0.72244483

 $00:37:52.830 \longrightarrow 00:37:57.949$  And so I'll do this. How about now?

NOTE Confidence: 0.72244483

00:37:57.950 --> 00:38:01.950 Do you see two right and I need to swap?

NOTE Confidence: 0.72244483

 $00:38:01.950 \longrightarrow 00:38:03.558$  No, we still don't see them.

- NOTE Confidence: 0.72244483
- $00:38:03.558 \longrightarrow 00:38:04.630$  You don't see them.

00:38:14.660 --> 00:38:18.670 Did you share a video girl OK?

NOTE Confidence: 0.71176875

00:38:18.670 -> 00:38:20.916 Yep, now we see alright.

NOTE Confidence: 0.71176875

 $00:38:20.916 \rightarrow 00:38:23.604$  You see this one slide right?

NOTE Confidence: 0.71176875

00:38:23.610 --> 00:38:24.766 Alright, OK,

NOTE Confidence: 0.71176875

 $00:38:24.766 \longrightarrow 00:38:28.234$  alright so I'll be talking about.

NOTE Confidence: 0.71176875

 $00{:}38{:}28{.}240 \dashrightarrow 00{:}38{:}30{.}844$  Milo proliferative neoplasms and I had to

NOTE Confidence: 0.71176875

 $00:38:30.844 \rightarrow 00:38:33.108$  be selective because of the time frame,

NOTE Confidence: 0.71176875

 $00{:}38{:}33{.}110 \dashrightarrow 00{:}38{:}35{.}510$  so this are my disclosures.

NOTE Confidence: 0.71176875

 $00:38:35.510 \longrightarrow 00:38:37.830$  I'll go over 4 studies and the first

NOTE Confidence: 0.71176875

 $00{:}38{:}37{.}830 \dashrightarrow 00{:}38{:}40{.}552$  one was presented as a late breaking

NOTE Confidence: 0.71176875

 $00{:}38{:}40{.}552 \dashrightarrow 00{:}38{:}43{.}076$  abstract is not the interventional study

NOTE Confidence: 0.71176875

 $00:38:43.076 \rightarrow 00:38:45.729$  I thought would be important to mention.

NOTE Confidence: 0.71176875

 $00{:}38{:}45{.}730 \dashrightarrow 00{:}38{:}48{.}285$  I just have one slide about it.

NOTE Confidence: 0.71176875

 $00:38:48.290 \longrightarrow 00:38:50.110$  This is about driver mutation,

00:38:50.110 --> 00:38:51.940 acquisition in pH, negative MPs,

NOTE Confidence: 0.71176875

 $00:38:51.940 \rightarrow 00:38:54.716$  and this study managed to show that this

NOTE Confidence: 0.71176875

 $00{:}38{:}54{.}716 \dashrightarrow 00{:}38{:}57{.}676$  mutations are quite as early as in utero

NOTE Confidence: 0.71176875

00:38:57.676 --> 00:38:59.600 until disease develops decades later.

NOTE Confidence: 0.71176875

 $00:38:59.600 \longrightarrow 00:39:02.155$  So the goal of the study was

NOTE Confidence: 0.71176875

00:39:02.155 --> 00:39:03.705 timing of driver, mutation,

NOTE Confidence: 0.71176875

00:39:03.705 --> 00:39:04.160 acquisition,

NOTE Confidence: 0.71176875

 $00:39:04.160 \rightarrow 00:39:05.980$  and clonal expansion evolution

NOTE Confidence: 0.71176875

 $00{:}39{:}05{.}980 \dashrightarrow 00{:}39{:}07{.}800$  dynamics of the clones.

NOTE Confidence: 0.71176875

 $00:39:07.800 \longrightarrow 00:39:10.494$  The methods used by UK investigators

NOTE Confidence: 0.71176875

 $00:39:10.494 \rightarrow 00:39:13.039$  included studying 10 patients with Jack.

NOTE Confidence: 0.71176875

 $00:39:13.040 \longrightarrow 00:39:15.662$  Two mutations of this is Jack

NOTE Confidence: 0.71176875

 $00:39:15.662 \longrightarrow 00:39:17.410$  two mutation for Stevens.

NOTE Confidence: 0.71176875

 $00:39:17.410 \longrightarrow 00:39:20.469$  This patients were between H20 and 76.

NOTE Confidence: 0.71176875

 $00{:}39{:}20{.}470 \dashrightarrow 00{:}39{:}22{.}142$  The single cell derived

NOTE Confidence: 0.71176875

 $00:39:22.142 \rightarrow 00:39:23.814$  hematopoietic colonies were studied

 $00:39:23.814 \dashrightarrow 00:39:25.719$  using whole exome sequencing.

NOTE Confidence: 0.71176875

00:39:25.720 --> 00:39:28.210 There was targeted resequencing of

NOTE Confidence: 0.71176875

00:39:28.210 --> 00:39:30.700 longitudinal blood samples from the NOTE Confidence: 0.71176875

00:39:30.781 --> 00:39:32.811 stem patients and something which

NOTE Confidence: 0.71176875

 $00{:}39{:}32{.}811 \dashrightarrow 00{:}39{:}35{.}770$  is still not clear very clear to me,

NOTE Confidence: 0.71176875

 $00{:}39{:}35{.}770 \dashrightarrow 00{:}39{:}39{.}046$  but they were able to create those.

NOTE Confidence: 0.71176875

 $00:39:39.050 \rightarrow 00:39:41.400$  Polygenetic trees or of hematopoiesis,

NOTE Confidence: 0.71176875

 $00:39:41.400 \rightarrow 00:39:43.980$  allowing them to understand when

NOTE Confidence: 0.71176875

00:39:43.980 --> 00:39:46.044 initial driver mutation occurred

NOTE Confidence: 0.71176875

 $00{:}39{:}46.044 \dashrightarrow 00{:}39{:}49.229$  as the result it was found that

NOTE Confidence: 0.71176875

 $00:39:49.229 \longrightarrow 00:39:50.957$  mpanza originate from driver

NOTE Confidence: 0.71176875

 $00:39{:}51.039 \dashrightarrow 00:39{:}53.619$  mutation quite very early in life,

NOTE Confidence: 0.71176875

 $00:39:53.620 \longrightarrow 00:39:55.000$  including before birth,

NOTE Confidence: 0.71176875

 $00{:}39{:}55{.}000 \dashrightarrow 00{:}39{:}57{.}300$  and then there is life long

NOTE Confidence: 0.71176875

 $00{:}39{:}57{.}300 \dashrightarrow 00{:}39{:}59{.}259$  clonal expansion and evolution.

- $00:39:59.260 \longrightarrow 00:40:00.064$  So this.
- NOTE Confidence: 0.71176875
- $00:40:00.064 \rightarrow 00:40:02.476$  Results are quite amazing because they
- NOTE Confidence: 0.71176875
- $00:40:02.476 \longrightarrow 00:40:05.410$  tell us that this Jack two mutation,
- NOTE Confidence: 0.71176875
- $00:40:05.410 \longrightarrow 00:40:06.974$  which eventually leads to
- NOTE Confidence: 0.71176875
- $00:40:06.974 \longrightarrow 00:40:09.320$  development of MPN late at life,
- NOTE Confidence: 0.71176875
- $00{:}40{:}09{.}320$  -->  $00{:}40{:}12{.}704$  is present in utero and perhaps if we can NOTE Confidence: 0.71176875
- $00:40:12.704 \rightarrow 00:40:15.186$  understand how it develops and evolves,
- NOTE Confidence: 0.71176875
- $00:40:15.190 \rightarrow 00:40:17.746$  we may use some preventative strategies
- NOTE Confidence: 0.71176875
- 00:40:17.746 --> 00:40:20.462 in the future to prevent expansion
- NOTE Confidence: 0.71176875
- $00:40:20.462 \longrightarrow 00:40:23.258$  of this clone or its evolution.
- NOTE Confidence: 0.71176875
- 00:40:23.260 --> 00:40:25.300 Moving onto interventional studies,
- NOTE Confidence: 0.71176875
- $00:40:25.300 \longrightarrow 00:40:26.830$  first of all,
- NOTE Confidence: 0.71176875
- $00{:}40{:}26.830 \dashrightarrow 00{:}40{:}30.071$  I will talk about CML and again
- NOTE Confidence: 0.71176875
- $00:40:30.071 \longrightarrow 00:40:32.949$  another late breaking abstract second.
- NOTE Confidence: 0.71176875
- $00:40:32.950 \longrightarrow 00:40:35.995$  I will talk about one study using
- NOTE Confidence: 0.71176875
- 00:40:35.995 --> 00:40:39.580 new drug for Milo fibrosis patients,

 $00:40:39.580 \longrightarrow 00:40:42.130$  and finally I'll finish with

NOTE Confidence: 0.71176875

 $00:40:42.130 \longrightarrow 00:40:44.680$  the study for PVR patients.

NOTE Confidence: 0.71176875

 $00:40:44.680 \longrightarrow 00:40:47.746$  So the second study I would

NOTE Confidence: 0.71176875

 $00{:}40{:}47.746 \dashrightarrow 00{:}40{:}51.500$  like to talk about looked at a

NOTE Confidence: 0.71176875

 $00:40:51.500 \longrightarrow 00:40:54.686$  synonym also known as able 001.

NOTE Confidence: 0.71176875

 $00{:}40{:}54.690 \dashrightarrow 00{:}40{:}58.078$  This is the first class stamp inhibitor.

NOTE Confidence: 0.71176875

 $00{:}40{:}58.080 \dashrightarrow 00{:}41{:}01.014$  An stamp is specifically targeting the

NOTE Confidence: 0.71176875

00:41:01.014 --> 00:41:04.848 Belmira stole pork it so its allosteric BSL,

NOTE Confidence: 0.71176875

00:41:04.850 --> 00:41:07.466 one BSL BCR ABL one inhibitor

NOTE Confidence: 0.71176875

 $00:41:07.466 \longrightarrow 00:41:09.882$  which is different to advertising

NOTE Confidence: 0.71176875

 $00{:}41{:}09{.}882 \dashrightarrow 00{:}41{:}12{.}210$  kinese inhibitors which targeting

NOTE Confidence: 0.71176875

 $00{:}41{:}12{.}210 \dashrightarrow 00{:}41{:}15{.}120$  ATP pocket on April 1.

NOTE Confidence: 0.71176875

00:41:15.120 --> 00:41:17.624 So as you can see on the cartoon

NOTE Confidence: 0.71176875

00:41:17.624 --> 00:41:19.961 from New England Journal Medicine

NOTE Confidence: 0.71176875

00:41:19.961 --> 00:41:22.133 article discussing Phase One

 $00{:}41{:}22.133 \dashrightarrow 00{:}41{:}24.680$  results with this medication.

NOTE Confidence: 0.71176875

 $00{:}41{:}24.680 \dashrightarrow 00{:}41{:}27.344$  There is Mr Lated and terminal

NOTE Confidence: 0.71176875

 $00:41:27.344 \longrightarrow 00:41:29.668$  which auto inhibits able one

NOTE Confidence: 0.71176875

 $00{:}41{:}29.668 \dashrightarrow 00{:}41{:}31.958$  an with BCR ABL translocation.

NOTE Confidence: 0.71176875

 $00{:}41{:}31{.}960 \dashrightarrow 00{:}41{:}35{.}920$  This N terminal piece of.

NOTE Confidence: 0.71176875

 $00:41:35.920 \longrightarrow 00:41:37.066$  Peace is gone,

NOTE Confidence: 0.71176875

00:41:37.066 --> 00:41:40.362 so you have PCR and now there is

NOTE Confidence: 0.71176875

 $00:41:40.362 \longrightarrow 00:41:43.542$  no auto inhibition and there is

NOTE Confidence: 0.71176875

00:41:43.542 --> 00:41:46.091 constitutive activation of ABL kinase

NOTE Confidence: 0.71176875

00:41:46.091 --> 00:41:49.129 A<br/>ciman app targets that fork it and

NOTE Confidence: 0.71176875

 $00:41:49.129 \dashrightarrow 00:41:51.706$  can allost erically inhibit PCR able?

NOTE Confidence: 0.71176875

00:41:51.706 --> 00:41:54.376 So as you can see,

NOTE Confidence: 0.71176875

 $00:41:54.380 \longrightarrow 00:41:57.418$  the other tiki eyes we have currently

NOTE Confidence: 0.71176875

00:41:57.418 --> 00:41:59.941 in practice and use in practice

NOTE Confidence: 0.71176875

 $00{:}41{:}59{.}941 \dashrightarrow 00{:}42{:}02{.}580$  go to ATP binding site and the

NOTE Confidence: 0.78682363

00:42:02.666 --> 00:42:05.166 Aciman app actually affects able

- NOTE Confidence: 0.78682363
- 00:42:05.166 --> 00:42:08.111 one kinase inhibits able one kinase

 $00{:}42{:}08{.}111 \dashrightarrow 00{:}42{:}10{.}316$  using this mirror style pocket,

NOTE Confidence: 0.78682363

 $00:42:10.320 \longrightarrow 00:42:12.092$  hence the name specifically

NOTE Confidence: 0.78682363

 $00:42:12.092 \rightarrow 00:42:14.750$  targeting the able Morris to pocket.

NOTE Confidence: 0.78682363

 $00{:}42{:}14.750 \dashrightarrow 00{:}42{:}17.750$  So it works even when mutations

NOTE Confidence: 0.78682363

 $00:42:17.750 \longrightarrow 00:42:20.635$  like T315Y inhibit ability of the

NOTE Confidence: 0.78682363

 $00:42:20.635 \longrightarrow 00:42:23.023$  tiki eyes to inhibit able one.

NOTE Confidence: 0.78682363

 $00:42:23.030 \longrightarrow 00:42:24.840$  Like in this particular situation,

NOTE Confidence: 0.78682363

 $00{:}42{:}24{.}840 \dashrightarrow 00{:}42{:}27{.}094$  in the cartoon you can see that

NOTE Confidence: 0.78682363

 $00:42:27.094 \rightarrow 00:42:28.480$  the teising kinase inhibitor

NOTE Confidence: 0.78682363

00:42:28.480 --> 00:42:30.568 cannot attach to the pocket due

NOTE Confidence: 0.78682363

 $00{:}42{:}30.568 \dashrightarrow 00{:}42{:}32.779$  to change of its confirmation,

NOTE Confidence: 0.78682363

 $00:42:32.780 \longrightarrow 00:42:35.404$  but a synonym still able to attach to

NOTE Confidence: 0.78682363

00:42:35.404 --> 00:42:37.830 Bristol Pocket inhibiting able one kinase.

NOTE Confidence: 0.78682363

 $00:42:37.830 \longrightarrow 00:42:40.486$  So this is a phase three study was

00:42:40.486 --> 00:42:42.861 Simonette versus Design IP in patients

NOTE Confidence: 0.78682363

00:42:42.861 --> 00:42:44.911 with chronic phase CML previously

NOTE Confidence: 0.78682363

 $00{:}42{:}44{.}911 \dashrightarrow 00{:}42{:}47{.}218$  treated with at least two tiki eyes,

NOTE Confidence: 0.78682363

 $00:42:47.220 \longrightarrow 00:42:49.422$  two different guys and this is

NOTE Confidence: 0.78682363

 $00:42:49.422 \longrightarrow 00:42:51.308$  an important study because the

NOTE Confidence: 0.78682363

00:42:51.308 --> 00:42:53.048 drug is now undergoing review

NOTE Confidence: 0.78682363

 $00{:}42{:}53.048 \dashrightarrow 00{:}42{:}55.280$  for approval and I'm hoping that.

NOTE Confidence: 0.78682363

 $00:42:55.280 \longrightarrow 00:42:57.782$  It will be available as yet

NOTE Confidence: 0.78682363

 $00{:}42{:}57.782 \dashrightarrow 00{:}43{:}00.047$  another medication to treat chronic

NOTE Confidence: 0.78682363

 $00{:}43{:}00{.}047 \dashrightarrow 00{:}43{:}02{.}637$  myeloid leukemia later this year.

NOTE Confidence: 0.78682363

 $00:43:02.640 \rightarrow 00:43:05.502$  So the selection criteria listed and NOTE Confidence: 0.78682363

 $00:43:05.502 \rightarrow 00:43:07.902$  patients were included had chronic

NOTE Confidence: 0.78682363

00:43:07.902 --> 00:43:10.765 phase two or more GIS used before

NOTE Confidence: 0.78682363

 $00{:}43{:}10.765 \dashrightarrow 00{:}43{:}13.571$  and patients have to change treatment

NOTE Confidence: 0.78682363

 $00{:}43{:}13{.}571 \dashrightarrow 00{:}43{:}15{.}956$  either because they were intolerant

NOTE Confidence: 0.78682363

 $00{:}43{:}15{.}956 \dashrightarrow 00{:}43{:}18{.}530$  or resistant to treatment and so

 $00:43:18.530 \longrightarrow 00:43:21.212$  the patients was 2315 I mutation

NOTE Confidence: 0.78682363

 $00{:}43{:}21{.}212 \dashrightarrow 00{:}43{:}23{.}737$  or V299L mutations were excluded

NOTE Confidence: 0.78682363

00:43:23.737 --> 00:43:26.160 because pursuit Nip is not.

NOTE Confidence: 0.78682363

 $00:43:26.160 \rightarrow 00:43:27.900$  Active against this mutation.

NOTE Confidence: 0.78682363

00:43:27.900 --> 00:43:31.094 So this is specifically the study which

NOTE Confidence: 0.78682363

00:43:31.094 --> 00:43:33.629 didn't include T315I mutated patients.

NOTE Confidence: 0.78682363

 $00{:}43{:}33{.}630 \dashrightarrow 00{:}43{:}36{.}546$  This particular group of patients was

NOTE Confidence: 0.78682363

 $00{:}43{:}36{.}546 \dashrightarrow 00{:}43{:}39{.}745$  addressed by the Phase One study and

NOTE Confidence: 0.78682363

 $00{:}43{:}39{.}745 \dashrightarrow 00{:}43{:}42{.}468$  the drug is active against the BCR

NOTE Confidence: 0.78682363

 $00:43:42.552 \rightarrow 00:43:45.307$  ABL with this particular mutation,

NOTE Confidence: 0.78682363

 $00{:}43{:}45{.}310 \dashrightarrow 00{:}43{:}47{.}146$  so patients were randomized.

NOTE Confidence: 0.78682363

00:43:47.146 --> 00:43:51.380 As you can see in two to one fashion,

NOTE Confidence: 0.78682363

 $00{:}43{:}51{.}380 \dashrightarrow 00{:}43{:}53{.}530$  and the demographics were slightly

NOTE Confidence: 0.78682363

 $00{:}43{:}53{.}530 \dashrightarrow 00{:}43{:}56{.}620$  different in two groups I highlighted.

NOTE Confidence: 0.78682363

 $00{:}43{:}56{.}620 \dashrightarrow 00{:}43{:}59{.}350$  In yellow here that a similar patients NOTE Confidence: 0.78682363

 $00:43:59.350 \longrightarrow 00:44:01.679$  there were more men than women.

NOTE Confidence: 0.78682363

 $00{:}44{:}01{.}680 \dashrightarrow 00{:}44{:}03{.}620$  Also in a similar patients,

NOTE Confidence: 0.78682363

 $00{:}44{:}03.620 \dashrightarrow 00{:}44{:}06.077$  the switch of the rapy was less likely

NOTE Confidence: 0.78682363

 $00{:}44{:}06{.}077 \dashrightarrow 00{:}44{:}09{.}227$  to be due to lack of efficacy and more

NOTE Confidence: 0.78682363

 $00{:}44{:}09{.}227 \dashrightarrow 00{:}44{:}12{.}041$  likely due to be taller ability and

NOTE Confidence: 0.78682363

 $00{:}44{:}12.041 \dashrightarrow 00{:}44{:}14.356$  that basically is characteristic of

NOTE Confidence: 0.78682363

00:44:14.356 --> 00:44:17.510 a group of patients which may be more

NOTE Confidence: 0.78682363

 $00:44:17.510 \rightarrow 00:44:20.348$  responsive to the next line of treatment.

NOTE Confidence: 0.78682363

00:44:20.350 --> 00:44:23.010 And finally also in a similar barm

NOTE Confidence: 0.78682363

 $00{:}44{:}23.010 \dashrightarrow 00{:}44{:}25.020$  less patience than in pursuit.

NOTE Confidence: 0.78682363

 $00{:}44{:}25{.}020 \dashrightarrow 00{:}44{:}27{.}768$  Newbomb received three or more tikis.

NOTE Confidence: 0.78682363

 $00{:}44{:}27.770 \dashrightarrow 00{:}44{:}30.087$  So this is the primary endpoint of

NOTE Confidence: 0.78682363

 $00:44:30.087 \longrightarrow 00:44:31.934$  this study which showed improved

NOTE Confidence: 0.78682363

 $00:44:31.934 \rightarrow 00:44:33.884$  major molecular response rate at

NOTE Confidence: 0.78682363

 $00:44:33.884 \rightarrow 00:44:35.840$  24 weeks at six months,

NOTE Confidence: 0.78682363

 $00{:}44{:}35{.}840 \dashrightarrow 00{:}44{:}38{.}505$  and the difference between two

 $00:44:38.505 \rightarrow 00:44:41.170$  groups was twelve point 2%.

NOTE Confidence: 0.78682363

00:44:41.170 --> 00:44:42.965 So taking into consideration the

NOTE Confidence: 0.78682363

00:44:42.965 --> 00:44:44.760 differences between two groups I

NOTE Confidence: 0.78682363

 $00:44:44.819 \longrightarrow 00:44:47.003$  showed on previous slide that the

NOTE Confidence: 0.78682363

00:44:47.003 --> 00:44:48.843 logistic regression analysis was done

NOTE Confidence: 0.78682363

00:44:48.843  $-\!>$  00:44:50.763 and showed that odds ratios adjusted

NOTE Confidence: 0.78682363

 $00{:}44{:}50{.}763 \dashrightarrow 00{:}44{:}52{.}681$  for those things which were different

NOTE Confidence: 0.78682363

00:44:52.681 -> 00:44:54.583 in two groups were quite similar

NOTE Confidence: 0.78682363

 $00{:}44{:}54{.}583 \dashrightarrow 00{:}44{:}56{.}310$  towards ratios without adjustment,

NOTE Confidence: 0.78682363

 $00{:}44{:}56{.}310 \dashrightarrow 00{:}44{:}58{.}690$  which gives us hope that the improved

NOTE Confidence: 0.78682363

 $00{:}44{:}58.690 \dashrightarrow 00{:}45{:}01.008$  outcome in a similar treated patients

NOTE Confidence: 0.78682363

 $00{:}45{:}01.008 \dashrightarrow 00{:}45{:}03.456$  is not related to the difference

NOTE Confidence: 0.78682363

 $00{:}45{:}03{.}456 \dashrightarrow 00{:}45{:}04{.}960$  in the population.

NOTE Confidence: 0.78682363

 $00{:}45{:}04{.}960 \dashrightarrow 00{:}45{:}07{.}584$  So the side effect profiles a lot of

NOTE Confidence: 0.78682363

 $00{:}45{:}07{.}584 \dashrightarrow 00{:}45{:}09{.}858$  patients get different side effects,

 $00{:}45{:}09{.}860 \dashrightarrow 00{:}45{:}12{.}198$  but overall a similar patients have less

NOTE Confidence: 0.78682363

 $00:45:12.198 \rightarrow 00:45:14.758$  side effects than positive treated patients.

NOTE Confidence: 0.78682363

 $00:45:14.760 \rightarrow 00:45:16.944$  One thing I would like to highlight

NOTE Confidence: 0.78682363

 $00:45:16.944 \longrightarrow 00:45:19.229$  here that a similar group there

NOTE Confidence: 0.78682363

 $00{:}45{:}19{.}229 \dashrightarrow 00{:}45{:}21{.}779$  were two deaths related to arterial

NOTE Confidence: 0.78682363

 $00{:}45{:}21.779 \dashrightarrow 00{:}45{:}23.807$  embolism won an ischemic stroke.

NOTE Confidence: 0.78682363

 $00{:}45{:}23.810 \dashrightarrow 00{:}45{:}25.298$  Another Iman positive patients.

NOTE Confidence: 0.78682363

00:45:25.298 --> 00:45:27.530 One patient died due to septic

NOTE Confidence: 0.800081

 $00{:}45{:}27{.}599 \dashrightarrow 00{:}45{:}30{.}222$  shock, so the side effect profile was

NOTE Confidence: 0.800081

 $00{:}45{:}30{.}222 \dashrightarrow 00{:}45{:}33{.}140$  different, so anemia and throm bo cytopenia.

NOTE Confidence: 0.800081

00:45:33.140 --> 00:45:35.450 Sorry, Trump said opinion neutropenia were NOTE Confidence: 0.800081

 $00:45:35.450 \rightarrow 00:45:38.352$  similar in both groups and then GI side

NOTE Confidence: 0.800081

 $00{:}45{:}38{.}352 \dashrightarrow 00{:}45{:}40{.}302$  effects in the left abnormalities were

NOTE Confidence: 0.800081

 $00:45:40.371 \rightarrow 00:45:42.855$  more common in bosutinib treated patients.

NOTE Confidence: 0.800081

 $00:45:42.860 \longrightarrow 00:45:45.120$  So in conclusion, this assemble

NOTE Confidence: 0.800081

 $00:45:45.120 \rightarrow 00:45:48.012$  study was the first control study

- NOTE Confidence: 0.800081
- $00:45:48.012 \rightarrow 00:45:50.220$  comparing tikis for treatment.

00:45:50.220 --> 00:45:51.753 Assistant Intolerant CML

NOTE Confidence: 0.800081

00:45:51.753 --> 00:45:53.286 population and assimilate,

NOTE Confidence: 0.800081

 $00:45:53.290 \rightarrow 00:45:56.356$  which is first class stamp inhibitor,

NOTE Confidence: 0.800081

 $00:45:56.360 \rightarrow 00:45:58.875$  showed superior efficacy compared with

NOTE Confidence: 0.800081

 $00{:}45{:}58.875 \dashrightarrow 00{:}46{:}02.000$  bosutinib with favorable side effect profile,

NOTE Confidence: 0.800081

 $00:46:02.000 \rightarrow 00:46:06.130$  so this is upcoming hopefully.

NOTE Confidence: 0.800081

 $00:46:06.130 \longrightarrow 00:46:08.040$  Approved in the near future

NOTE Confidence: 0.800081

 $00{:}46{:}08.040 \dashrightarrow 00{:}46{:}09.950$  treatment option for CML patients,

NOTE Confidence: 0.800081

 $00:46:09.950 \rightarrow 00:46:11.474$  particularly with resistant and

NOTE Confidence: 0.800081

00:46:11.474 --> 00:46:12.236 intolerant disease.

NOTE Confidence: 0.800081

 $00{:}46{:}12.240 \dashrightarrow 00{:}46{:}14.526$  After treatment with two different guys.

NOTE Confidence: 0.800081

 $00:46:14.530 \longrightarrow 00:46:16.690$  Also, the drug is effective in

NOTE Confidence: 0.800081

 $00{:}46{:}16.690 \dashrightarrow 00{:}46{:}18.740$  treating patients with T315I mutation,

NOTE Confidence: 0.800081

 $00{:}46{:}18.740 \dashrightarrow 00{:}46{:}21.407$  so moving on to the next study.

NOTE Confidence: 0.800081  $00{:}46{:}27.520 \dashrightarrow 00{:}46{:}29.912$  There are a number of drugs where there NOTE Confidence: 0.800081 00:46:29.912 --> 00:46:32.914 are a number of drugs being developed NOTE Confidence: 0.800081  $00:46:32.914 \longrightarrow 00:46:34.778$  in patients with myelofibrosis. NOTE Confidence: 0.800081  $00:46:34.780 \longrightarrow 00:46:37.558$  I think they're up to 10. NOTE Confidence: 0.800081  $00{:}46{:}37.560 \dashrightarrow 00{:}46{:}40.110$  A phase three randomized phase NOTE Confidence: 0.800081  $00:46:40.110 \longrightarrow 00:46:42.660$  three studies in this field. NOTE Confidence: 0.800081  $00{:}46{:}42.660 \dashrightarrow 00{:}46{:}45.255$  So this particular study presented NOTE Confidence: 0.800081 00:46:45.255 --> 00:46:48.270 by John Mascarenhas is about CPI, NOTE Confidence: 0.800081  $00:46:48.270 \longrightarrow 00:46:48.763 \ 0610.$ NOTE Confidence: 0.800081 00:46:48.763 --> 00:46:50.735 Bromodomain angusta terminal domain NOTE Confidence: 0.800081  $00:46:50.735 \rightarrow 00:46:53.813$  protein or BET inhibitor in combination NOTE Confidence: 0.800081  $00:46:53.813 \rightarrow 00:46:57.029$  with reflective for Jack inhibitor naive NOTE Confidence: 0.800081  $00:46:57.029 \rightarrow 00:47:00.000$  Milo fibrosis patients or manifest study.

 $00:46:21.410 \rightarrow 00:46:24.466$  I wanted to present today you will understand

 $00{:}46{:}24{.}466 \dashrightarrow 00{:}46{:}27{.}518$  towards the end why pick this particular one?

NOTE Confidence: 0.800081

NOTE Confidence: 0.800081

 $00:47:00.000 \rightarrow 00:47:04.216$  So one word about bet so bromodomain and

- NOTE Confidence: 0.800081
- $00:47:04.216 \rightarrow 00:47:07.568$  extra terminal domain protein promote.

00:47:07.570 --> 00:47:09.755 Symptoms of Milo fibrosis by

NOTE Confidence: 0.800081

 $00:47:09.755 \rightarrow 00:47:11.940$  activating bet targeted genes leading

NOTE Confidence: 0.800081

 $00:47:12.011 \rightarrow 00:47:14.701$  to increase production of cytokines

NOTE Confidence: 0.800081

00:47:14.701 --> 00:47:16.315 responsible for inflammation,

NOTE Confidence: 0.800081

 $00:47:16.320 \longrightarrow 00:47:17.290$  extramental hematopoiesis,

NOTE Confidence: 0.800081

 $00:47:17.290 \longrightarrow 00:47:19.230$  and bone marrow fibrosis.

NOTE Confidence: 0.800081

 $00:47:19.230 \longrightarrow 00:47:21.980$  All manifestations of patients with

NOTE Confidence: 0.800081

 $00{:}47{:}21.980 \dashrightarrow 00{:}47{:}24.730$  primary myelofibrosis as well as

NOTE Confidence: 0.800081

00:47:24.819 --> 00:47:28.251 modify process after PD and 80 so the

NOTE Confidence: 0.800081

 $00:47:28.251 \longrightarrow 00:47:31.037$  other influence of bat is activations

NOTE Confidence: 0.800081

00:47:31.037 --> 00:47:33.803 of target genes leading to aberrant

NOTE Confidence: 0.800081

 $00{:}47{:}33{.}810 \dashrightarrow 00{:}47{:}36{.}465$  erythroid differentiation as well as

NOTE Confidence: 0.800081

00:47:36.465 --> 00:47:38.058 aberrant megakaryocytic differentiation.

NOTE Confidence: 0.800081

 $00{:}47{:}38.060 \dashrightarrow 00{:}47{:}40.440$  And this patients may have an email.

- 00:47:40.440 --> 00:47:40.762 Thrombocytopenia,
- NOTE Confidence: 0.800081
- $00{:}47{:}40.762 \dashrightarrow 00{:}47{:}41.728$  as you know.
- NOTE Confidence: 0.800081
- $00{:}47{:}41.728 \dashrightarrow 00{:}47{:}44.578$  So CPI 610 inhibits bat and may suppress
- NOTE Confidence: 0.800081
- $00:47:44.578 \rightarrow 00:47:47.146$  cytokine production as well as promote
- NOTE Confidence: 0.800081
- $00:47:47.146 \longrightarrow 00:47:49.535$  erythroid differentiation as well as
- NOTE Confidence: 0.800081
- $00{:}47{:}49{.}535 \dashrightarrow 00{:}47{:}51{.}008$  normalized megakaryocytic differentiation.
- NOTE Confidence: 0.800081
- $00:47:51.010 \longrightarrow 00:47:53.176$  So let's see how this drug
- NOTE Confidence: 0.800081
- $00:47:53.176 \longrightarrow 00:47:55.689$  did in this phase two studies.
- NOTE Confidence: 0.800081
- $00{:}47{:}55{.}690 \dashrightarrow 00{:}47{:}57{.}250$  So first of all,
- NOTE Confidence: 0.800081
- $00:47:57.250 \longrightarrow 00:47:59.200$  the study had three arms,
- NOTE Confidence: 0.800081
- $00:47:59.200 \longrightarrow 00:48:01.540$  so they are mine going present.
- NOTE Confidence: 0.800081
- $00{:}48{:}01{.}540 \dashrightarrow 00{:}48{:}04{.}480$  Today's I'm three which looked at Jack
- NOTE Confidence: 0.800081
- $00:48:04.480 \longrightarrow 00:48:06.856$  inhibitor naive patients and use the
- NOTE Confidence: 0.800081
- 00:48:06.856 --> 00:48:08.944 combination of CPI 610 and Rosslyn.
- NOTE Confidence: 0.800081
- 00:48:08.950 00:48:12.460 If the other two arms were add on CPI,
- NOTE Confidence: 0.800081
- $00:48:12.460 \longrightarrow 00:48:14.064$  six dental clinic patients

- NOTE Confidence: 0.800081
- $00:48:14.064 \rightarrow 00:48:16.069$  who didn't have full benefit.

00:48:16.070 --> 00:48:17.810 From Brooklyn balloon treatment

NOTE Confidence: 0.800081

 $00:48:17.810 \rightarrow 00:48:19.550$  and monotherapy with CPI,

NOTE Confidence: 0.800081

 $00:48:19.550 \longrightarrow 00:48:19.972$  0610,

NOTE Confidence: 0.800081

 $00{:}48{:}19{.}972 \dashrightarrow 00{:}48{:}22{.}926$  this study was also presented as an

NOTE Confidence: 0.800081

 $00{:}48{:}22.926 \dashrightarrow 00{:}48{:}26.080$  abstract as a poster during ash meeting,

NOTE Confidence: 0.800081

 $00:48:26.080 \longrightarrow 00:48:27.385$  so I'm three,

NOTE Confidence: 0.800081

 $00{:}48{:}27{.}385 \dashrightarrow 00{:}48{:}29{.}560$  basically Jack inhibitor naive Milo

NOTE Confidence: 0.800081

 $00{:}48{:}29{.}560 \dashrightarrow 00{:}48{:}31{.}729$  fibrosis patients who need treatment.

NOTE Confidence: 0.800081

 $00:48:31.730 \longrightarrow 00:48:33.418$  They received two drugs,

NOTE Confidence: 0.800081

00:48:33.418 --> 00:48:36.476 rock Solid Nap standard of care but

NOTE Confidence: 0.800081

00:48:36.476 --> 00:48:39.128 in additional CPI 0610 better hitter.

NOTE Confidence: 0.800081

 $00:48:39.130 \longrightarrow 00:48:41.746$  So this drug better hitter was

NOTE Confidence: 0.800081

 $00{:}48{:}41.746 \dashrightarrow 00{:}48{:}44.349$  administered two weeks on two weeks,

NOTE Confidence: 0.800081

 $00:48:44.350 \rightarrow 00:48:46.546$  one week off and.

 $00:48:46.546 \rightarrow 00:48:50.690$  The endpoints which we were looked at was.

NOTE Confidence: 0.800081

00:48:50.690 --> 00:48:52.825 Spleen volume response 35% spleen

NOTE Confidence: 0.800081

 $00{:}48{:}52{.}825 \dashrightarrow 00{:}48{:}55{.}811$  world in response at 24 weeks as

NOTE Confidence: 0.800081

 $00:48:55.811 \rightarrow 00:48:58.115$  well as total symptom score 50%.

NOTE Confidence: 0.800081

00:48:58.120 --> 00:49:00.598 Reduction of symptoms by 24 weeks.

NOTE Confidence: 0.800081

00:49:00.600 --> 00:49:03.258 So this is primary endpoint which

NOTE Confidence: 0.800081

 $00{:}49{:}03{.}258 \dashrightarrow 00{:}49{:}05{.}559$  basically it was achieved by 67%

NOTE Confidence: 0.800081

 $00:49:05.560 \rightarrow 00:49:08.062$  of patients so again the drug

NOTE Confidence: 0.800081

 $00{:}49{:}08.062 \dashrightarrow 00{:}49{:}09.730$  probably worked a little

NOTE Confidence: 0.8362344

 $00:49:09.808 \rightarrow 00:49:13.075$  bit better for patients who are low risk but

NOTE Confidence: 0.8362344

 $00:49:13.075 \rightarrow 00:49:16.296$  it was compatible 7273% for intermediate 160.

NOTE Confidence: 0.8362344

00:49:16.296 --> 00:49:19.275 Four 66% for intermediate to high risk

NOTE Confidence: 0.8362344

 $00{:}49{:}19{.}275 \dashrightarrow 00{:}49{:}22{.}869$  based on the IP SS and IP address.

NOTE Confidence: 0.8362344

 $00{:}49{:}22.870 \dashrightarrow 00{:}49{:}25.016$  Most of the patients cadres, reduction

NOTE Confidence: 0.8362344

 $00:49:25.016 \rightarrow 00:49:27.508$  of spleen volume only one had increased.

NOTE Confidence: 0.8362344

00:49:27.510 --> 00:49:30.009 This is out of 70 patients studied,

- NOTE Confidence: 0.8362344
- $00:49:30.010 \longrightarrow 00:49:32.152$  so the second endpoint at the

 $00:49:32.152 \longrightarrow 00:49:33.580$  symptoms decreased by 50%.

NOTE Confidence: 0.8362344

 $00:49:33.580 \longrightarrow 00:49:36.522$  Again, this was seen in 57% of patients.

NOTE Confidence: 0.8362344

 $00{:}49{:}36{.}522 \dashrightarrow 00{:}49{:}39{.}329$  Most of the patients get this clinical

NOTE Confidence: 0.8362344

 $00:49:39.329 \rightarrow 00:49:41.425$  benefit in the study at week 24,

NOTE Confidence: 0.8362344

 $00{:}49{:}41{.}430 \dashrightarrow 00{:}49{:}43.789$  so one of the interesting finding when

NOTE Confidence: 0.8362344

00:49:43.789 --> 00:49:46.213 you start looks lit up in patients

NOTE Confidence: 0.8362344

 $00{:}49{:}46{.}213 \dashrightarrow 00{:}49{:}48{.}235$  with myelofibrosis you expect a dip

NOTE Confidence: 0.8362344

 $00{:}49{:}48.299 \dashrightarrow 00{:}49{:}50.359$  in hemoglobin about three points,

NOTE Confidence: 0.8362344

 $00:49:50.360 \longrightarrow 00:49:53.400$  so here the dip was not as deep.

NOTE Confidence: 0.8362344

 $00{:}49{:}53{.}400 \dashrightarrow 00{:}49{:}55{.}278$  And then, as you can see,

NOTE Confidence: 0.8362344

 $00{:}49{:}55{.}280$  -->  $00{:}49{:}56{.}222$  hemoglobin improved overtime.

NOTE Confidence: 0.8362344

 $00{:}49{:}56{.}222 \dashrightarrow 00{:}49{:}58{.}106$  In fact, baseline increased a little

NOTE Confidence: 0.8362344

 $00{:}49{:}58.106 \dashrightarrow 00{:}50{:}00{.}430$  bit higher than the baseline, so this.

NOTE Confidence: 0.8362344

 $00{:}50{:}00{.}430 \dashrightarrow 00{:}50{:}03{.}055$  Awful actually looks at patients who had

 $00:50:03.055 \rightarrow 00:50:05.370$  hemoglobin more than 10 and less than 10,

NOTE Confidence: 0.8362344

 $00{:}50{:}05{.}370 \dashrightarrow 00{:}50{:}06{.}698$  but didn't require transfusions.

NOTE Confidence: 0.8362344

00:50:06.698 --> 00:50:08.358 And as you can see,

NOTE Confidence: 0.8362344

 $00:50:08.360 \rightarrow 00:50:10.565$  after initial small dip there is improvement

NOTE Confidence: 0.8362344

 $00:50:10.565 \rightarrow 00:50:13.007$  in anemia in this subgroup of patients,

NOTE Confidence: 0.8362344

 $00:50:13.010 \longrightarrow 00:50:14.334$  which is quite impressive.

NOTE Confidence: 0.8362344

 $00:50:14.334 \longrightarrow 00:50:15.658$  So one other thing,

NOTE Confidence: 0.8362344

 $00:50:15.660 \longrightarrow 00:50:16.904$  at the bone marrow's,

NOTE Confidence: 0.8362344

 $00{:}50{:}16{.}904 \dashrightarrow 00{:}50{:}18{.}770$  their biopsies were done at the

NOTE Confidence: 0.8362344

 $00:50:18.834 \rightarrow 00:50:20.927$  beginning as well as during the study

NOTE Confidence: 0.8362344

 $00{:}50{:}20{.}927 \dashrightarrow 00{:}50{:}23{.}300$  and there was improvement in fibrosis.

NOTE Confidence: 0.8362344

 $00:50:23.300 \longrightarrow 00:50:25.844$  Great in 1/3 of patients and most of

NOTE Confidence: 0.8362344

 $00{:}50{:}25{.}844 \dashrightarrow 00{:}50{:}27{.}704$  the improvements observed were observed

NOTE Confidence: 0.8362344

 $00:50:27.704 \rightarrow 00:50:30.399$  during the first six months of treatment.

NOTE Confidence: 0.8362344

 $00{:}50{:}30{.}400 \dashrightarrow 00{:}50{:}32{.}764$  Only two patients get worsening of

NOTE Confidence: 0.8362344

 $00:50:32.764 \rightarrow 00:50:35.338$  fibrosis and you can see that there

- NOTE Confidence: 0.8362344
- $00:50:35.338 \rightarrow 00:50:38.292$  is also a sign that there is improved
- NOTE Confidence: 0.8362344
- $00{:}50{:}38{.}292 \dashrightarrow 00{:}50{:}41{.}188$  air throughout differentiation and
- NOTE Confidence: 0.8362344
- $00:50:41.188 \rightarrow 00:50:43.360$  normalization of megakaryocytic
- NOTE Confidence: 0.8362344
- $00:50:43.360 \longrightarrow 00:50:44.084$  histopathology.
- NOTE Confidence: 0.8362344
- $00{:}50{:}44.090 \dashrightarrow 00{:}50{:}47.418$  So the side effects the CPI 16 in
- NOTE Confidence: 0.8362344
- $00:50:47.418 \rightarrow 00:50:50.036$  combination with Link was generally
- NOTE Confidence: 0.8362344
- $00:50:50.036 \longrightarrow 00:50:51.168$  well tolerated.
- NOTE Confidence: 0.8362344
- $00:50:51.170 \longrightarrow 00:50:54.002$  So 87% reported at least one
- NOTE Confidence: 0.8362344
- $00:50:54.002 \longrightarrow 00:50:55.890$  treatment emergent adverse event.
- NOTE Confidence: 0.8362344
- $00:50:55.890 \longrightarrow 00:50:57.934$  44% reported, one grade,
- NOTE Confidence: 0.8362344
- $00:50:57.934 \rightarrow 00:51:00.489$  three treatment emergent adverse event.
- NOTE Confidence: 0.8362344
- $00{:}51{:}00{.}490 \dashrightarrow 00{:}51{:}02{.}386$  So the most common ones were
- NOTE Confidence: 0.8362344
- $00:51:02.386 \rightarrow 00:51:04.025$  haematological and now this was
- NOTE Confidence: 0.8362344
- $00{:}51{:}04{.}025 \dashrightarrow 00{:}51{:}05{.}580$  an email from both cytopenia.
- NOTE Confidence: 0.8362344
- $00:51:05.580 \rightarrow 00:51:07.488$  Of course this may be manifestations
- NOTE Confidence: 0.8362344

- $00:51:07.488 \rightarrow 00:51:08.760$  of the disease itself,
- NOTE Confidence: 0.8362344
- $00{:}51{:}08.760 \dashrightarrow 00{:}51{:}11.658$  the most common and non human to
- NOTE Confidence: 0.8362344
- 00:51:11.658 --> 00:51:14.115 logic was diarrhea or which was
- NOTE Confidence: 0.8362344
- $00:51:14.115 \longrightarrow 00:51:16.383$  mild moderate Grade 1 two so.
- NOTE Confidence: 0.8362344
- $00:51:16.390 \dashrightarrow 00:51:18.250$  Great five were two events.
- NOTE Confidence: 0.8362344
- $00{:}51{:}18.250 \dashrightarrow 00{:}51{:}20.110$  Multiorgan failure with due to
- NOTE Confidence: 0.8362344
- $00:51:20.110 \longrightarrow 00:51:21.226$  sepsis times two.
- NOTE Confidence: 0.8362344
- $00:51:21.230 \longrightarrow 00:51:23.456$  So overall the drug was pretty
- NOTE Confidence: 0.8362344
- $00{:}51{:}23.456 \dashrightarrow 00{:}51{:}24.569$  reasonably well tolerated.
- NOTE Confidence: 0.8362344
- $00:51:24.570 \longrightarrow 00:51:26.550$  The combination of drugs I have
- NOTE Confidence: 0.8362344
- $00{:}51{:}26{.}550 \dashrightarrow 00{:}51{:}28{.}702$  to say because we're looking at
- NOTE Confidence: 0.8362344
- $00:51:28.702 \longrightarrow 00:51:30.988$  the side effect profile of two
- NOTE Confidence: 0.8362344
- 00:51:30.988 --> 00:51:32.390 drugs administered together.
- NOTE Confidence: 0.8362344
- 00:51:32.390 --> 00:51:34.562 So finally conclusions 67% of patients
- NOTE Confidence: 0.8362344
- 00:51:34.562 --> 00:51:37.219 achieve CVR 35 comparing to historical phase,
- NOTE Confidence: 0.8362344
- $00:51:37.220 \rightarrow 00:51:39.080$  three studies simplifying comfort studies.

- NOTE Confidence: 0.8362344
- $00:51:39.080 \rightarrow 00:51:41.530$  This is looks better even though we

 $00:51:41.530 \longrightarrow 00:51:43.818$  cannot compare apples to oranges in

NOTE Confidence: 0.8362344

 $00:51:43.818 \rightarrow 00:51:45.773$  those studies with ruxolitinib alone,

NOTE Confidence: 0.8362344

 $00:51:45.780 \longrightarrow 00:51:48.318$  the response was 28 to 42%.

NOTE Confidence: 0.8362344

 $00{:}51{:}48{.}320 \dashrightarrow 00{:}51{:}50{.}630$ 57% in the study achieved improvement

NOTE Confidence: 0.8362344

 $00:51:50.630 \rightarrow 00:51:51.400$  and symptoms.

NOTE Confidence: 0.8362344

 $00:51:51.400 \longrightarrow 00:51:53.332 50\%$  reduction of symptoms and there

NOTE Confidence: 0.8362344

 $00:51:53.332 \rightarrow 00:51:55.609$  were improvement in bone marrow findings

NOTE Confidence: 0.8362344

 $00{:}51{:}55{.}609 \dashrightarrow 00{:}51{:}57{.}944$  suggestive of potential disease modification.

NOTE Confidence: 0.8362344

 $00{:}51{:}57{.}950 \dashrightarrow 00{:}52{:}00{.}631$  So it was well tolerated combination an

NOTE Confidence: 0.8362344

 $00:52:00.631 \rightarrow 00:52:03.227$  phase three study is planned and this

NOTE Confidence: 0.8362344

 $00:52:03.227 \rightarrow 00:52:06.030$  would be a randomized study for treatment.

NOTE Confidence: 0.8362344

00:52:06.030 --> 00:52:07.955 Naive patients looks lit up

NOTE Confidence: 0.8362344

00:52:07.955 --> 00:52:09.110 against ruxolitinib Sir,

NOTE Confidence: 0.8362344

00:52:09.110 --> 00:52:11.420 plus CPI six 110 versus wrestling

- $00:52:11.420 \rightarrow 00:52:12.190$  plus placebo,
- NOTE Confidence: 0.8362344
- $00{:}52{:}12.190 \dashrightarrow 00{:}52{:}14.500$  which allows crossover down the road.
- NOTE Confidence: 0.8362344
- $00{:}52{:}14.500 \dashrightarrow 00{:}52{:}18.770$  We are planning to open it at Yale this year.
- NOTE Confidence: 0.8362344
- 00:52:18.770 --> 00:52:22.220 So the final study I want to present is PG
- NOTE Confidence: 0.7385071
- $00{:}52{:}22{.}310 \dashrightarrow 00{:}52{:}25{.}516$  300 study hepcidin mimetic as you know,
- NOTE Confidence: 0.7385071
- $00{:}52{:}25{.}520$  -->  $00{:}52{:}28{.}299$  hepcidin was discovered about 20 years ago, NOTE Confidence: 0.7385071
- $00:52:28.300 \rightarrow 00:52:30.495$  master regulator why and metabolism
- NOTE Confidence: 0.7385071
- $00{:}52{:}30{.}495 \dashrightarrow 00{:}52{:}33{.}096$  with high hepcidin level shutting down
- NOTE Confidence: 0.7385071
- $00{:}52{:}33.096 \dashrightarrow 00{:}52{:}35.434$  for a port and transport of ferritin.
- NOTE Confidence: 0.7385071
- $00{:}52{:}35{.}440 \dashrightarrow 00{:}52{:}38{.}563$  And so the reason to use it in polycythemia NOTE Confidence: 0.7385071
- $00{:}52{:}38{.}563 \dashrightarrow 00{:}52{:}41{.}378$  Vera is of course this patient need
- NOTE Confidence: 0.7385071
- $00{:}52{:}41{.}378 \dashrightarrow 00{:}52{:}44{.}350$  phlebotomies as the main part of their
- NOTE Confidence: 0.7385071
- $00{:}52{:}44{.}350 \dashrightarrow 00{:}52{:}46{.}954$  treatment which lead to iron deficiency.
- NOTE Confidence: 0.7385071
- 00:52:46.960 --> 00:52:49.396 Perhaps keep citing analog PG 300?
- NOTE Confidence: 0.7385071
- $00{:}52{:}49{.}400 \dashrightarrow 00{:}52{:}51{.}892$  Can do this instead by shutting down
- NOTE Confidence: 0.7385071
- $00:52:51.892 \rightarrow 00:52:55.084$  availability of iron to every throw pesis so

 $00{:}52{:}55{.}084 \dashrightarrow 00{:}52{:}57{.}144$  eligibility requirement PV diagnosed based

NOTE Confidence: 0.7385071

 $00{:}52{:}57{.}211 \dashrightarrow 00{:}52{:}59{.}710$  on most recent to double check criteria,

NOTE Confidence: 0.7385071

 $00{:}52{:}59{.}710 \dashrightarrow 00{:}53{:}01{.}672$  three phlebotomies in the last six

NOTE Confidence: 0.7385071

00:53:01.672 --> 00:53:03.888 months or more necessary primary endpoint

NOTE Confidence: 0.7385071

 $00{:}53{:}03.888 \dashrightarrow 00{:}53{:}06.018$  is proportion of patients randomized

NOTE Confidence: 0.7385071

00:53:06.018 --> 00:53:08.504 with drawal period whose cymatic Rick is

NOTE Confidence: 0.7385071

 $00:53:08.504 \rightarrow 00:53:10.409$  maintained without need for phlebotomy.

NOTE Confidence: 0.7385071

00:53:10.410 --> 00:53:12.395 Secondary endpoint response at Week

NOTE Confidence: 0.7385071

 $00{:}53{:}12{.}395 \dashrightarrow 00{:}53{:}15{.}123$ 29 as well as improvement in symptoms

NOTE Confidence: 0.7385071

 $00{:}53{:}15{.}123 \dashrightarrow 00{:}53{:}17{.}328$  using MP NTSS. So complicated schema.

NOTE Confidence: 0.7385071

 $00{:}53{:}17{.}328 \dashrightarrow 00{:}53{:}19{.}704$  What we're looking at is just

NOTE Confidence: 0.7385071

 $00{:}53{:}19.704 \dashrightarrow 00{:}53{:}21.489$  initial phase of this study.

NOTE Confidence: 0.7385071

00:53:21.490 --> 00:53:22.190 First 18.

NOTE Confidence: 0.7385071

 $00{:}53{:}22.190 \dashrightarrow 00{:}53{:}23.940$  Patients enrolled who went through

NOTE Confidence: 0.7385071

 $00:53:23.940 \longrightarrow 00:53:25.828$  the first part of the study.

 $00:53:25.830 \longrightarrow 00:53:27.400$  Those finding at 28 weeks.

NOTE Confidence: 0.7385071

 $00{:}53{:}27{.}400 \dashrightarrow 00{:}53{:}28{.}450$  There's those escalation,

NOTE Confidence: 0.7385071

 $00:53:28.450 \longrightarrow 00:53:30.200$  trying to identify how much

NOTE Confidence: 0.7385071

 $00:53:30.200 \rightarrow 00:53:31.499$  subcutaneous injections once a week.

NOTE Confidence: 0.7385071

 $00{:}53{:}31{.}500 \dashrightarrow 00{:}53{:}33{.}010$  You need to control phlebotomy

NOTE Confidence: 0.7385071

 $00:53:33.010 \rightarrow 00:53:35.280$  and you know when you identify it.

NOTE Confidence: 0.7385071

 $00{:}53{:}35{.}280 \dashrightarrow 00{:}53{:}37{.}478$  You kind of continue with that dose.

NOTE Confidence: 0.7385071

 $00{:}53{:}37{.}480 \dashrightarrow 00{:}53{:}39{.}440$  Then you reach the second part of

NOTE Confidence: 0.7385071

 $00{:}53{:}39{.}440 \dashrightarrow 00{:}53{:}40{.}950$  the study blinded with drawal.

NOTE Confidence: 0.7385071

 $00{:}53{:}40{.}950 \dashrightarrow 00{:}53{:}42{.}870$  Some patients continue real thing others

NOTE Confidence: 0.7385071

 $00{:}53{:}42.870 \dashrightarrow 00{:}53{:}45.419$  and switch to place bo to see how it's

NOTE Confidence: 0.7385071

 $00:53:45.419 \rightarrow 00:53:47.243$  going to affect the phlebotomy requirement.

NOTE Confidence: 0.7385071

 $00:53:47.250 \longrightarrow 00:53:47.940$  And finally,

NOTE Confidence: 0.7385071

 $00:53:47.940 \longrightarrow 00:53:50.010$  there is open label extension so

NOTE Confidence: 0.7385071

 $00{:}53{:}50{.}010 \dashrightarrow 00{:}53{:}52{.}041$  that the report only dealt with

NOTE Confidence: 0.7385071

 $00:53:52.041 \rightarrow 00:53:53.955$  this red part of the study.

- NOTE Confidence: 0.7385071
- $00:53:53.960 \longrightarrow 00:53:55.976$  And as you can see in the red

 $00:53:55.976 \longrightarrow 00:53:58.150$  dots are phlebotomy requirements.

NOTE Confidence: 0.7385071

 $00:53:58.150 \longrightarrow 00:53:59.890$  Before initiation of the study,

NOTE Confidence: 0.7385071

 $00{:}53{:}59{.}890 \dashrightarrow 00{:}54{:}01{.}920$  before the 1st dose and then after

NOTE Confidence: 0.7385071

 $00{:}54{:}01{.}920 \dashrightarrow 00{:}54{:}04{.}132$  the first was only three patients

NOTE Confidence: 0.7385071

00:54:04.132 --> 00:54:05.828 required one phlebotomy Chen,

NOTE Confidence: 0.7385071

 $00:54:05.830 \longrightarrow 00:54:08.382$  those were getting the low level of the

NOTE Confidence: 0.7385071

 $00:54:08.382 \rightarrow 00:54:10.707$  medication with which was further escalated.

NOTE Confidence: 0.7385071

 $00{:}54{:}10.710 \dashrightarrow 00{:}54{:}12.102$  So pretty impressive effectiveness.

NOTE Confidence: 0.7385071

00:54:12.102 --> 00:54:13.494 As you can see,

NOTE Confidence: 0.7385071

 $00:54:13.500 \rightarrow 00:54:14.550$  ferritin increasing significantly,

NOTE Confidence: 0.7385071

 $00{:}54{:}14{.}550 \dashrightarrow 00{:}54{:}16{.}650$  showing that iron deficiency is gone.

NOTE Confidence: 0.7385071

 $00:54:16.650 \rightarrow 00:54:18.738$  Total symptom score improving with time.

NOTE Confidence: 0.7385071

 $00:54:18.740 \longrightarrow 00:54:20.784$  And this is subset you know you

NOTE Confidence: 0.7385071

 $00:54:20.784 \dashrightarrow 00:54:22.580$  can see improved concentration,

00:54:22.580 --> 00:54:24.188 fatigue, itching for writers,

NOTE Confidence: 0.7385071

 $00{:}54{:}24{.}188 \dashrightarrow 00{:}54{:}25{.}796$  and though this is.

NOTE Confidence: 0.7385071

 $00:54:25.800 \rightarrow 00:54:27.912$  The scoring system used to assess

NOTE Confidence: 0.7385071

 $00{:}54{:}27.912 \dashrightarrow 00{:}54{:}29.320$  MPN scores MPN symptoms.

NOTE Confidence: 0.7385071

 $00{:}54{:}29{.}320 \dashrightarrow 00{:}54{:}31{.}848$  We can say that perhaps some of it

NOTE Confidence: 0.7385071

 $00{:}54{:}31{.}848 \dashrightarrow 00{:}54{:}34{.}318$  is related to the fact that iron

NOTE Confidence: 0.7385071

00:54:34.318 --> 00:54:36.522 deficiency is gone because I am

NOTE Confidence: 0.7385071

 $00:54:36.522 \rightarrow 00:54:38.387$  deficiency can cause the symptoms

NOTE Confidence: 0.7385071

 $00{:}54{:}38{.}387 \dashrightarrow 00{:}54{:}40{.}232$  as well was well tolerated.

NOTE Confidence: 0.7385071

 $00{:}54{:}40{.}232 \dashrightarrow 00{:}54{:}42.696$  More than 90% had drug related adverse

NOTE Confidence: 0.7385071

 $00:54:42.696 \longrightarrow 00:54:45.156$  events, but all of them were sorry,

NOTE Confidence: 0.7385071

 $00:54:45.160 \longrightarrow 00:54:47.920$  not more than 90% of those who had

NOTE Confidence: 0.7385071

 $00:54:47.920 \longrightarrow 00:54:49.739$  adverse events were great one,

NOTE Confidence: 0.7385071

 $00:54:49.740 \longrightarrow 00:54:52.204$  so I would like to conclude by

NOTE Confidence: 0.7385071

 $00:54:52.204 \rightarrow 00:54:53.260$  summarizing this study.

NOTE Confidence: 0.7385071

00:54:53.260 --> 00:54:55.015 It was PG 300 subcutaneously

- NOTE Confidence: 0.7385071
- 00:54:55.015 -> 00:54:56.419 administered once a week,

 $00:54:56.420 \rightarrow 00:54:59.509$  was safe and well tolerated, no Grade 3/4.

NOTE Confidence: 0.7385071

 $00{:}54{:}59{.}509 \dashrightarrow 00{:}55{:}01{.}724$  Adverse events related to treatment.

NOTE Confidence: 0.7385071

 $00:55:01.730 \longrightarrow 00:55:04.145$  It was effective in eliminating

NOTE Confidence: 0.7385071

 $00:55:04.145 \dashrightarrow 00:55:06.077$  the the rapeutic phlebotomy's and

NOTE Confidence: 0.7385071

 $00{:}55{:}06.077 \dashrightarrow 00{:}55{:}08.405$  reversing iron deficiency impact on

NOTE Confidence: 0.7385071

 $00:55:08.405 \rightarrow 00:55:10.620$  previous symptoms is being studied,

NOTE Confidence: 0.7385071

 $00:55:10.620 \dashrightarrow 00:55:13.380$  and this study is also planned

NOTE Confidence: 0.7385071

 $00{:}55{:}13.380 \dashrightarrow 00{:}55{:}16.239$  for opening at Yell this year.

NOTE Confidence: 0.7385071

 $00:55:16.240 \longrightarrow 00:55:17.170$  Thank you.

NOTE Confidence: 0.8375762

00:55:19.670 --> 00:55:21.806 Thank you Nikolaj and Rory great

NOTE Confidence: 0.8375762

 $00{:}55{:}21.806 \dashrightarrow 00{:}55{:}24.299$  talks and I think very important

NOTE Confidence: 0.8375762

 $00{:}55{:}24{.}300 \dashrightarrow 00{:}55{:}26{.}232$  updates from from the meeting

NOTE Confidence: 0.8375762

 $00{:}55{:}26{.}232 \dashrightarrow 00{:}55{:}28{.}548$  since we're a little bit overtime,

NOTE Confidence: 0.8375762

 $00:55:28.550 \rightarrow 00:55:30.300$  will actually take 10 minutes

00:55:30.300 --> 00:55:32.790 beyond 1:00 PM for any questions,

NOTE Confidence: 0.8375762

 $00{:}55{:}32.790 \dashrightarrow 00{:}55{:}36.264$  but I will start with a question for Doctor.

NOTE Confidence: 0.8375762

 $00{:}55{:}36{.}270 \dashrightarrow 00{:}55{:}38{.}918$  But also as he needs to go out

NOTE Confidence: 0.8375762

 $00:55:38.918 \rightarrow 00:55:41.667$  at 1:00 PM for another meeting.

NOTE Confidence: 0.8375762

 $00:55:41.670 \longrightarrow 00:55:42.828$  Actually two questions.

NOTE Confidence: 0.8375762

 $00{:}55{:}42.828 \dashrightarrow 00{:}55{:}44.758$  So one of them is.

NOTE Confidence: 0.8375762

 $00:55:44.760 \rightarrow 00:55:47.460$  Are there any immediately practice changing

NOTE Confidence: 0.8375762

 $00:55:47.460 \rightarrow 00:55:50.790$  updates you take from from the ash meeting?

NOTE Confidence: 0.8375762

 $00{:}55{:}50{.}790 \dashrightarrow 00{:}55{:}54{.}040$  In terms of what we do day today and the

NOTE Confidence: 0.8375762

 $00:55:54.128 \rightarrow 00:55:57.140$  second question is from Doctor Isufi,

NOTE Confidence: 0.8375762

 $00{:}55{:}57{.}140 \dashrightarrow 00{:}55{:}59{.}185$  she's asking whether the ampion

NOTE Confidence: 0.8375762

 $00{:}55{:}59{.}185 \dashrightarrow 00{:}56{:}00{.}821$  driver mutations were acquired

NOTE Confidence: 0.8375762

 $00:56:00.821 \longrightarrow 00:56:02.699$  that were acquired in nutri,

NOTE Confidence: 0.8375762

 $00:56:02.700 \longrightarrow 00:56:04.460$  worthy, germline or somatic.

NOTE Confidence: 0.8375762

 $00{:}56{:}04{.}460 \dashrightarrow 00{:}56{:}07{.}100$  Also please free to type your

NOTE Confidence: 0.8375762

 $00:56:07.179 \rightarrow 00:56:09.183$  questions and if you want to

- NOTE Confidence: 0.8375762
- $00:56:09.183 \longrightarrow 00:56:11.429$  ask live or any can unmute,

00:56:11.430 --> 00:56:13.018 you just just indicating

NOTE Confidence: 0.7818602

 $00:56:13.020 \longrightarrow 00:56:15.402$  the chat Nikolai so no immediate

NOTE Confidence: 0.7818602

 $00:56:15.402 \rightarrow 00:56:16.593$  practice changing presentations.

NOTE Confidence: 0.7818602

 $00{:}56{:}16.600 \dashrightarrow 00{:}56{:}19.060$  I think a similar but the

NOTE Confidence: 0.7818602

 $00:56:19.060 \longrightarrow 00:56:21.090$  drug for CML will be.

NOTE Confidence: 0.7818602

 $00:56:21.090 \rightarrow 00:56:22.835$  Changing our practice when the

NOTE Confidence: 0.7818602

 $00{:}56{:}22.835 \dashrightarrow 00{:}56{:}25.479$  drug and if the drug is approved,

NOTE Confidence: 0.7818602

 $00{:}56{:}25{.}480 \dashrightarrow 00{:}56{:}27{.}694$  which I think should be you

NOTE Confidence: 0.7818602

 $00:56:27.694 \rightarrow 00:56:29.870$  know towards the end of 2021,

NOTE Confidence: 0.7818602

 $00{:}56{:}29{.}870 \dashrightarrow 00{:}56{:}32{.}250$  so you know I presented two studies

NOTE Confidence: 0.7818602

00:56:32.250 --> 00:56:34.506 where the drugs are very interesting

NOTE Confidence: 0.7818602

 $00{:}56{:}34{.}506 \dashrightarrow 00{:}56{:}37{.}215$  and for that reason this studies will

NOTE Confidence: 0.7818602

 $00{:}56{:}37.288 \dashrightarrow 00{:}56{:}39.759$  be available to our patients at Yale.

NOTE Confidence: 0.7818602

 $00:56:39.760 \rightarrow 00:56:43.046$  So in regards to the mutations in utero, no.

 $00{:}56{:}43.046 \dashrightarrow 00{:}56{:}44.510$  Those are somatic mutations.

NOTE Confidence: 0.7818602

 $00:56:44.510 \rightarrow 00:56:46.340$  Those are not germline mutations.

NOTE Confidence: 0.7818602

 $00{:}56{:}46{.}340 \dashrightarrow 00{:}56{:}48{.}536$  This is somatic mutations which acquired.

NOTE Confidence: 0.8318645

00:56:49.530 --> 00:56:51.666 So Doctor God actually follows up on on

NOTE Confidence: 0.8318645

 $00{:}56{:}51{.}666$  -->  $00{:}56{:}53{.}695$  the CML presentation and he's asking

NOTE Confidence: 0.8318645

 $00{:}56{:}53.695 \dashrightarrow 00{:}56{:}55.843$  if this drug is actually approved.

NOTE Confidence: 0.8318645

 $00{:}56{:}55{.}850 \dashrightarrow 00{:}56{:}58{.}124$  Does that change your calculation and

NOTE Confidence: 0.8318645

 $00:56:58.124 \rightarrow 00:56:59.993$  whether you transplant patients would

NOTE Confidence: 0.8318645

 $00{:}56{:}59{.}993 \dashrightarrow 00{:}57{:}02{.}030$  would CML as they go through multiple NOTE Confidence: 0.8318645

 $00:57:02.030 \rightarrow 00:57:04.375$  tiki eyes and maybe to follow up on that? NOTE Confidence: 0.8318645

 $00:57:04.380 \rightarrow 00:57:06.876$  Like would you put this drug ahead of NOTE Confidence: 0.8318645

 $00:57:06.876 \rightarrow 00:57:09.438$  assertive in your kind of lines of therapy?

NOTE Confidence: 0.8318645

 $00:57:09.440 \longrightarrow 00:57:11.020$  If the drug is approved?

NOTE Confidence: 0.8318645

00:57:11.020 --> 00:57:12.910 Or how would you approach it?

NOTE Confidence: 0.8318645

00:57:12.910 --> 00:57:14.178 Yeah, so you know,

NOTE Confidence: 0.8318645

 $00:57:14.180 \longrightarrow 00:57:16.452$  I, I think it's too early to say

- NOTE Confidence: 0.8318645
- $00:57:16.452 \longrightarrow 00:57:18.735$  if this is going to eliminate

 $00{:}57{:}18.735 \dashrightarrow 00{:}57{:}21.201$  transplant for some of our patients.

NOTE Confidence: 0.8318645

00:57:21.210 --> 00:57:23.020 So, but yes, you know,

NOTE Confidence: 0.8318645

 $00:57:23.020 \rightarrow 00:57:25.916$  based on the study which I presented today,

NOTE Confidence: 0.8318645

 $00:57:25.920 \longrightarrow 00:57:28.020$  it may be before positive for

NOTE Confidence: 0.8318645

 $00{:}57{:}28{.}020 \dashrightarrow 00{:}57{:}30{.}620$  patients who had two tiki eyes prior.

NOTE Confidence: 0.8318645

 $00:57:30.620 \rightarrow 00:57:33.154$  You know, looking at the results here.

NOTE Confidence: 0.7883626

 $00{:}57{:}35{.}170 \dashrightarrow 00{:}57{:}37{.}290$  So unless there are other

NOTE Confidence: 0.7883626

 $00:57:37.290 \longrightarrow 00:57:38.990$  questions for doctor adults,

NOTE Confidence: 0.7883626

00:57:38.990 --> 00:57:41.944 if I will go to Doctor Challace.

NOTE Confidence: 0.7883626

 $00{:}57{:}41{.}950 \dashrightarrow 00{:}57{:}44{.}674$  So Rory, any immediate practice changing

NOTE Confidence: 0.7883626

 $00{:}57{:}44.674 \dashrightarrow 00{:}57{:}47.318$  abstracts for what people do to

NOTE Confidence: 0.7883626

 $00{:}57{:}47.318 \dashrightarrow 00{:}57{:}49.586$  leukemia in their practices right now,

NOTE Confidence: 0.7883626

 $00{:}57{:}49{.}590 \dashrightarrow 00{:}57{:}52{.}248$  whether in the community or in

NOTE Confidence: 0.7883626

 $00{:}57{:}52{.}248 \dashrightarrow 00{:}57{:}54{.}484$  the academic centers that you

 $00:57:54.484 \rightarrow 00:57:56.788$  take out from the ash meeting.

NOTE Confidence: 0.7030181

 $00{:}57{:}58{.}250 \dashrightarrow 00{:}57{:}59{.}228$  Great question. Thanks

NOTE Confidence: 0.7030181

00:57:59.230 --> 00:58:01.528 amarum. I guess I'll kind of piggyback,

NOTE Confidence: 0.7030181

00:58:01.530 --> 00:58:03.532 but Nikolai said I mean at the

NOTE Confidence: 0.7030181

 $00{:}58{:}03{.}532 \dashrightarrow 00{:}58{:}05{.}790$  moment I would say nothing imminent.

NOTE Confidence: 0.7030181

 $00:58:05.790 \rightarrow 00:58:07.434$  Clearly some interesting interim data,

NOTE Confidence: 0.7030181

 $00:58:07.434 \rightarrow 00:58:09.069$  although not yet practice changing.

NOTE Confidence: 0.7030181

 $00{:}58{:}09{.}070 \dashrightarrow 00{:}58{:}11.697$  I'm most interested in the data for Kinetic

NOTE Confidence: 0.7030181

 $00{:}58{:}11.697 \dashrightarrow 00{:}58{:}13.988$  lacks added to the dual nucleoside the rapy.

NOTE Confidence: 0.7030181

00:58:13.990 --> 00:58:14.980 Cladribine motive sutera

NOTE Confidence: 0.7030181

 $00{:}58{:}14.980 \dashrightarrow 00{:}58{:}16.700$  been alternating with visa.

NOTE Confidence: 0.7030181

 $00{:}58{:}16{.}700 \dashrightarrow 00{:}58{:}18{.}874$  You know, it's hard to argue with 93%

NOTE Confidence: 0.7030181

 $00{:}58{:}18.874 \dashrightarrow 00{:}58{:}21.256$  CRC or I rate with you know meeting one

NOTE Confidence: 0.7030181

 $00:58:21.256 \rightarrow 00:58:23.630$  cycle response and meeting OS not reached.

NOTE Confidence: 0.7030181

 $00:58:23.630 \rightarrow 00:58:25.370$  This compares very favorably with you.

NOTE Confidence: 0.7030181

 $00:58:25.370 \rightarrow 00:58:27.980$  Know that the data phrase event you know 15

- NOTE Confidence: 0.7030181
- $00:58:27.980 \longrightarrow 00:58:31.480$  months OS on the median OS on Bailey a trial.

00:58:31.480 --> 00:58:31.805 However,

NOTE Confidence: 0.7030181

 $00:58:31.805 \rightarrow 00:58:34.410$  we've learned this year a few times over.

NOTE Confidence: 0.7030181

 $00:58:34.410 \longrightarrow 00:58:34.740$  Unfortunately,

NOTE Confidence: 0.7030181

 $00:58:34.740 \longrightarrow 00:58:36.695$  that single arm studies of agents,

NOTE Confidence: 0.7030181

00:58:36.695 --> 00:58:37.670 despite great clinical

NOTE Confidence: 0.7212018

00:58:37.670 --> 00:58:38.978 preclinical rationale, a priority.

NOTE Confidence: 0.733859

00:58:40.400 --> 00:58:41.946 Or excellent similar data can

NOTE Confidence: 0.733859

 $00:58:41.946 \longrightarrow 00:58:43.800$  fall short, so this needs to

NOTE Confidence: 0.733859

 $00{:}58{:}43.800 \dashrightarrow 00{:}58{:}45.650$  be confirmed in a randomized study.

NOTE Confidence: 0.733859

 $00{:}58{:}45.650 \dashrightarrow 00{:}58{:}47.506$  The same goes for Magnolia Map,

NOTE Confidence: 0.733859

 $00{:}58{:}47{.}506 \dashrightarrow 00{:}58{:}49{.}046$  which is currently being evaluated

NOTE Confidence: 0.733859

00:58:49.046 --> 00:58:50.907 in phase three in comparison days,

NOTE Confidence: 0.733859

00:58:50.907 --> 00:58:52.760 amount of the<br/>rapy, but the double

NOTE Confidence: 0.733859

 $00{:}58{:}52{.}760 \dashrightarrow 00{:}58{:}55{.}538$  edged sword you know, pretty

 $00:58:54.310 \longrightarrow 00:58:55.540$  exciting preclinical data is

NOTE Confidence: 0.733859

 $00:58:55.540 \rightarrow 00:58:56.156$  very exciting.

NOTE Confidence: 0.733859

00:58:56.156 --> 00:58:57.696 Single arm data begets more.

NOTE Confidence: 0.733859

 $00:58:57.700 \rightarrow 00:58:59.560$  Add on therapy notes with Phase

NOTE Confidence: 0.733859

 $00{:}58{:}59{.}560 \dashrightarrow 00{:}59{:}01{.}408$  one trial of triplet with days

NOTE Confidence: 0.733859

 $00{:}59{:}01{.}410 \dashrightarrow 00{:}59{:}02{.}956$  of medical acts makrolon map.

NOTE Confidence: 0.733859

00:59:02.956 --> 00:59:03.880 Now Aizen Gilteritinib

NOTE Confidence: 0.733859

 $00:59:03.880 \longrightarrow 00:59:05.430$  phonetic lacks, so I mean

NOTE Confidence: 0.733859

 $00{:}59{:}05{.}430 \dashrightarrow 00{:}59{:}06{.}970$  there's kind of divergent goals

NOTE Confidence: 0.733859

 $00{:}59{:}06{.}970 \dashrightarrow 00{:}59{:}07{.}900$  here. But to

NOTE Confidence: 0.733859

00:59:07.900 --> 00:59:09.140 answer your question directly,

NOTE Confidence: 0.733859

 $00:59:09.140 \rightarrow 00:59:10.740$  I'd say nothing that's immediately

NOTE Confidence: 0.733859

 $00:59:10.740 \longrightarrow 00:59:11.850$  practice changing, but.

NOTE Confidence: 0.733859

 $00{:}59{:}11{.}850 \dashrightarrow 00{:}59{:}13{.}960$  Excited for this to be a

NOTE Confidence: 0.733859

 $00:59:13.960 \longrightarrow 00:59:14.640$  different conversation,

NOTE Confidence: 0.8116402

 $00:59:14.640 \longrightarrow 00:59:17.027$  maybe a few months to a year.

- NOTE Confidence: 0.8116402
- 00:59:17.030 --> 00:59:19.070 Yeah, look a lot of exciting

 $00{:}59{:}19{.}070 \dashrightarrow 00{:}59{:}20{.}090$  agents in development.

NOTE Confidence: 0.8116402

 $00:59:20.090 \rightarrow 00:59:22.136$  This is a question from Doctor

NOTE Confidence: 0.8116402

00:59:22.136 --> 00:59:23.500 Isufi about Sabbato Lima.

NOTE Confidence: 0.8116402

 $00:59:23.500 \rightarrow 00:59:25.470$  Basically, she's asking whether this

NOTE Confidence: 0.8116402

 $00{:}59{:}25{.}470 \dashrightarrow 00{:}59{:}28{.}052$  targets the leukemia stem cell or does

NOTE Confidence: 0.8116402

 $00{:}59{:}28.052 \dashrightarrow 00{:}59{:}29.984$  it work as an immune activator and

NOTE Confidence: 0.8116402

 $00:59:29.984 \longrightarrow 00:59:32.029$  this is a great question arrested.

NOTE Confidence: 0.8116402

 $00{:}59{:}32{.}030 \dashrightarrow 00{:}59{:}33{.}735$  There's there's a lot of

NOTE Confidence: 0.8116402

00:59:33.735 -> 00:59:35.440 ongoing research on this issue,

NOTE Confidence: 0.8116402

 $00:59:35.440 \longrightarrow 00:59:37.130$  but currently the thinking is

NOTE Confidence: 0.8116402

 $00{:}59{:}37{.}130 \dashrightarrow 00{:}59{:}39{.}190$  that it's a dual targeting drug,

NOTE Confidence: 0.8116402

 $00:59:39.190 \longrightarrow 00:59:41.122$  meaning that there is direct evidence

NOTE Confidence: 0.8116402

 $00{:}59{:}41{.}122 \dashrightarrow 00{:}59{:}42{.}852$  that it affects the leukemia

NOTE Confidence: 0.8116402

 $00{:}59{:}42.852 \dashrightarrow 00{:}59{:}44.737$  stem cells by interfering with.

 $00{:}59{:}44{.}740 \dashrightarrow 00{:}59{:}47{.}314$  One of the leg and that is important for

NOTE Confidence: 0.8116402

 $00:59:47.314 \rightarrow 00:59:49.885$  self renewal of the leukemic stem cells,

NOTE Confidence: 0.8116402

 $00{:}59{:}49{.}890 \dashrightarrow 00{:}59{:}51{.}843$  and I think this is an interesting

NOTE Confidence: 0.8116402

 $00{:}59{:}51{.}843 \dashrightarrow 00{:}59{:}52{.}680$  differentiator from other

NOTE Confidence: 0.8116402

 $00{:}59{:}52{.}730 \dashrightarrow 00{:}59{:}54{.}080$  immune checkpoint activators,

NOTE Confidence: 0.8116402

 $00{:}59{:}54.080 \dashrightarrow 00{:}59{:}56.593$  but there is also clearly data that

NOTE Confidence: 0.8116402

 $00{:}59{:}56{.}593 \dashrightarrow 00{:}59{:}58{.}391$  also activates the immune response

NOTE Confidence: 0.8116402

 $00{:}59{:}58{.}391 \dashrightarrow 01{:}00{:}00{.}666$  at the level of the T cells.

NOTE Confidence: 0.8116402

 $01{:}00{:}00{.}670 \dashrightarrow 01{:}00{:}02{.}854$  How do we dissect the clinical

NOTE Confidence: 0.8116402

 $01{:}00{:}02.854 \dashrightarrow 01{:}00{:}05.083$  efficacy in terms of being related

NOTE Confidence: 0.8116402

 $01:00:05.083 \rightarrow 01:00:06.818$  to one or the other?

NOTE Confidence: 0.8116402

 $01{:}00{:}06.820 \dashrightarrow 01{:}00{:}08.812$  I think it's a question that

NOTE Confidence: 0.8116402

 $01:00:08.812 \rightarrow 01:00:10.622$  we are currently exploring and

NOTE Confidence: 0.8116402

 $01:00:10.622 \longrightarrow 01:00:11.888$  ongoing clinical trials,

NOTE Confidence: 0.8116402

01:00:11.890 --> 01:00:14.062 but I think this would be

NOTE Confidence: 0.8116402

 $01:00:14.062 \rightarrow 01:00:15.510$  very important to explore.

- NOTE Confidence: 0.8176035
- 01:00:17.930 $\operatorname{-->}$ 01:00:20.410 I think there's a question here

 $01:00:20.410 \longrightarrow 01:00:22.888$  from Doctor Gowda about CD 447.

NOTE Confidence: 0.8176035

 $01:00:22.890 \rightarrow 01:00:25.711$  Inhibition is asking whether CD 47 inhibition

NOTE Confidence: 0.8176035

 $01:00:25.711 \rightarrow 01:00:28.670$  does not cause many immune side effects.

NOTE Confidence: 0.8176035

 $01:00:28.670 \rightarrow 01:00:31.554$  Thoughts, this is actually a good question.

NOTE Confidence: 0.8176035

 $01{:}00{:}31{.}560 \dashrightarrow 01{:}00{:}35{.}277$  I will let also really give his his insight.

NOTE Confidence: 0.8176035

 $01{:}00{:}35{.}280 \dashrightarrow 01{:}00{:}38{.}815$  I think this is one of the

NOTE Confidence: 0.8176035

 $01{:}00{:}38.815 \dashrightarrow 01{:}00{:}41.978$  important things in terms of like.

NOTE Confidence: 0.8176035

 $01{:}00{:}41.980 \dashrightarrow 01{:}00{:}44.746$  Issue related to like single arm

NOTE Confidence: 0.8176035

 $01{:}00{:}44.746 \dashrightarrow 01{:}00{:}47.883$  studies and needing to know more data

NOTE Confidence: 0.8176035

 $01{:}00{:}47.883 \dashrightarrow 01{:}00{:}51.178$  so CD 47 is actually expressed in most

NOTE Confidence: 0.8176035

 $01{:}00{:}51{.}178$  -->  $01{:}00{:}54{.}306$  of their cells in the normal body.

NOTE Confidence: 0.8176035

 $01{:}00{:}54{.}310$  -->  $01{:}00{:}56{.}872$  However, they seem to be overexpressed NOTE Confidence: 0.8176035

 $01{:}00{:}56.872 \dashrightarrow 01{:}01{:}00.247$  by the leukemia cells and the idea here NOTE Confidence: 0.8176035

 $01:01:00.247 \longrightarrow 01:01:02.635$  is that you're exploring a therapeutic

 $01:01:02.715 \longrightarrow 01:01:06.187$  window where using the CD 47 you are

NOTE Confidence: 0.8176035

 $01{:}01{:}06.187 \dashrightarrow 01{:}01{:}08.449$  preferentially targeting the leukemia cells.

NOTE Confidence: 0.8176035

01:01:08.449 --> 01:01:11.227 However, because City 47 is also

NOTE Confidence: 0.8176035

 $01:01:11.227 \rightarrow 01:01:13.040$  expressed on. Red blood cells.

NOTE Confidence: 0.8176035

01:01:13.040 --> 01:01:14.790 We do see hemolytic anemia,

NOTE Confidence: 0.8176035

 $01{:}01{:}14.790 \dashrightarrow 01{:}01{:}16.878$  and some of those patients which

NOTE Confidence: 0.8176035

01:01:16.878 --> 01:01:19.373 can be actually quite severe and it

NOTE Confidence: 0.8176035

 $01{:}01{:}19{.}373 \dashrightarrow 01{:}01{:}21{.}437$  has to be managed quite carefully,

NOTE Confidence: 0.8176035

01:01:21.440 --> 01:01:23.190 especially during the initial phases.

NOTE Confidence: 0.8176035

 $01{:}01{:}23.190 \dashrightarrow 01{:}01{:}25.654$  And This is why they prime this drug NOTE Confidence: 0.8176035

 $01{:}01{:}25.654 \dashrightarrow 01{:}01{:}28.002$  and carefully monitor patients, it, etc. NOTE Confidence: 0.8176035

 $01{:}01{:}28{.}002 \dashrightarrow 01{:}01{:}30{.}450$  But I think it's a very good question NOTE Confidence: 0.8176035

 $01:01:30.517 \rightarrow 01:01:32.827$  about why no activity against other

NOTE Confidence: 0.8176035

01:01:32.827 --> 01:01:35.438 CD 47 expressing cells are being seen.

NOTE Confidence: 0.8176035

01:01:35.440 --> 01:01:37.890 I think what's gonna tell us really?

NOTE Confidence: 0.8176035

 $01{:}01{:}37.890 \dashrightarrow 01{:}01{:}40.634$  The answer is once we see randomized

- NOTE Confidence: 0.8176035
- $01:01:40.634 \rightarrow 01:01:42.130$  data and try to.

01:01:42.130 --> 01:01:42.706 You know,

NOTE Confidence: 0.8176035

 $01:01:42.706 \rightarrow 01:01:44.434$  explore whether some of the things

NOTE Confidence: 0.8176035

 $01:01:44.434 \rightarrow 01:01:46.478$  that get attributed to the disease,

NOTE Confidence: 0.8176035

 $01{:}01{:}46.480 \dashrightarrow 01{:}01{:}47.032$  for example,

NOTE Confidence: 0.8176035

 $01:01:47.032 \rightarrow 01:01:48.964$  are really disease related or some kind

NOTE Confidence: 0.8176035

 $01:01:48.964 \rightarrow 01:01:51.147$  of subtle immune related adverse events.

NOTE Confidence: 0.8176035

 $01:01:51.150 \longrightarrow 01:01:53.658$  But I think what is clear.

NOTE Confidence: 0.8176035

 $01{:}01{:}53.660 \dashrightarrow 01{:}01{:}55.879$  Is we are not seeing the typical

NOTE Confidence: 0.8176035

 $01{:}01{:}55.879 \dashrightarrow 01{:}01{:}57.569$  immune adverse effects that are seen

NOTE Confidence: 0.8176035

01:01:57.569 --> 01:01:59.896 with the PD one or CTL A4 type of

NOTE Confidence: 0.8176035

01:01:59.896 --> 01:02:01.626 drugs such as pneumonitis colitis.

NOTE Confidence: 0.8176035

 $01:02:01.630 \rightarrow 01:02:03.590$  It doesn't seem that this is commonly

NOTE Confidence: 0.8176035

01:02:03.590 --> 01:02:06.006 seen or or do you have any additional

NOTE Confidence: 0.8176035

 $01:02:06.006 \rightarrow 01:02:08.410$  insights on this that was very well said? NOTE Confidence: 0.8176035

- 01:02:08.410 --> 01:02:09.000 I mean,
- NOTE Confidence: 0.8176035
- $01:02:09.000 \longrightarrow 01:02:10.180$  I think the key
- NOTE Confidence: 0.80842
- $01:02:10.180 \rightarrow 01:02:11.360$  points are the transient,
- NOTE Confidence: 0.80842
- 01:02:11.360 --> 01:02:12.835 presumed immune mediated hemolytic anemia,
- NOTE Confidence: 0.80842
- $01:02:12.840 \longrightarrow 01:02:15.200$  which really is why do you know the
- NOTE Confidence: 0.80842
- $01:02:15.200 \rightarrow 01:02:16.968$  priming dose is sort of incorporated,
- NOTE Confidence: 0.80842
- 01:02:16.968 --> 01:02:18.438 but I think you're right.
- NOTE Confidence: 0.80842
- $01:02:18.440 \longrightarrow 01:02:20.210$  I mean, there's some element of
- NOTE Confidence: 0.80842
- $01{:}02{:}20{.}210 \dashrightarrow 01{:}02{:}21{.}853$  specificity for those cells on
- NOTE Confidence: 0.80842
- $01:02:21.853 \rightarrow 01:02:23.959$  which CD 47 is just enriched.
- NOTE Confidence: 0.80842
- $01{:}02{:}23.960 \dashrightarrow 01{:}02{:}25.716$  Which happens to be within cells,
- NOTE Confidence: 0.80842
- $01{:}02{:}25{.}716 \dashrightarrow 01{:}02{:}28{.}060$  and I mean outside of like you said,
- NOTE Confidence: 0.80842
- $01:02:28.060 \longrightarrow 01:02:29.524$  subtle or maybe even delayed
- NOTE Confidence: 0.80842
- $01{:}02{:}29{.}524 \dashrightarrow 01{:}02{:}31{.}868$  immune IR A ES that sort of thing.
- NOTE Confidence: 0.80842
- $01{:}02{:}31{.}870 \dashrightarrow 01{:}02{:}33{.}998$  And I think we have what median
- NOTE Confidence: 0.80842
- $01:02:33.998 \rightarrow 01:02:35.678$  fourteen 1516 months of follow up?

- NOTE Confidence: 0.80842
- 01:02:35.678 --> 01:02:37.439 I mean, maybe there are delayed

 $01{:}02{:}37{.}439 \dashrightarrow 01{:}02{:}39{.}197$  events that did not yet occurred,

NOTE Confidence: 0.80842

 $01:02:39.200 \longrightarrow 01:02:41.321$  but I think it comes down to

NOTE Confidence: 0.80842

 $01{:}02{:}41{.}321 \dashrightarrow 01{:}02{:}43{.}004$  specificity and more of a different

NOTE Confidence: 0.80842

 $01{:}02{:}43.004 \dashrightarrow 01{:}02{:}44.173$  mechanism of action comparison.

NOTE Confidence: 0.80842

01:02:44.173 --> 01:02:45.638 So you know more of

NOTE Confidence: 0.7841068

 $01:02:45.640 \longrightarrow 01:02:46.808$  a direct cell effect.

NOTE Confidence: 0.8520811

 $01:02:48.170 \longrightarrow 01:02:50.168$  Thank you so much for a

NOTE Confidence: 0.8520811

 $01:02:50.168 \longrightarrow 01:02:51.500$  few minutes past hour.

NOTE Confidence: 0.8520811

 $01:02:51.500 \rightarrow 01:02:53.498$  Be very cognizant of the time.

NOTE Confidence: 0.8520811

01:02:53.500 --> 01:02:54.792 On a Friday afternoon,

NOTE Confidence: 0.8520811

 $01:02:54.792 \longrightarrow 01:02:56.730$  I'd like to thank everybody who

NOTE Confidence: 0.8520811

01:02:56.791 --> 01:02:59.039 joined us for for this session and if

NOTE Confidence: 0.8520811

 $01{:}02{:}59{.}039 \dashrightarrow 01{:}03{:}01{.}158$  there are any additional questions,

NOTE Confidence: 0.8520811

 $01:03:01.160 \longrightarrow 01:03:03.158$  feel free how to free to

01:03:03.158 --> 01:03:04.490 email their speakers directly. NOTE Confidence: 0.8520811 01:03:04.490 --> 01:03:06.356 Thank you so much and looking NOTE Confidence: 0.8520811 01:03:06.356 --> 01:03:08.721 forward to seeing you next week with NOTE Confidence: 0.8520811 01:03:08.721 --> 01:03:10.476 their next session next Friday. NOTE Confidence: 0.8520811 01:03:10.480 --> 01:03:12.150 Have a great weekend everyone.

NOTE Confidence: 0.8520811

01:03:12.150 --> 01:03:12.810 Thank you.