## WEBVTT

NOTE duration:"00:57:11" NOTE recognizability:0.796

NOTE language:en-us

NOTE Confidence: 0.815167712857143

 $00:00:00.000 \longrightarrow 00:00:05.495$  Welcome to the Yale Ash 2021 highlights.

NOTE Confidence: 0.815167712857143

 $00{:}00{:}05.500 \dashrightarrow 00{:}00{:}06.690$  My name is Bob Bone.

NOTE Confidence: 0.815167712857143

00:00:06.690 --> 00:00:09.049 I'm one of the hematologist at Yale,

NOTE Confidence: 0.815167712857143

 $00{:}00{:}09.050 \dashrightarrow 00{:}00{:}11.175$  and I'm happy to facilitate

NOTE Confidence: 0.815167712857143

 $00:00:11.175 \longrightarrow 00:00:12.450$  this session today.

NOTE Confidence: 0.815167712857143

 $00:00:12.450 \longrightarrow 00:00:15.672$  As we are focusing on some of the important

NOTE Confidence: 0.815167712857143

 $00:00:15.672 \longrightarrow 00:00:18.541$  abstracts from the previous ash meeting

NOTE Confidence: 0.815167712857143

 $00:00:18.541 \longrightarrow 00:00:20.976$  relating relating to classical hematology.

NOTE Confidence: 0.815167712857143

00:00:20.980 --> 00:00:23.732 And today we have 3 presenters who will

NOTE Confidence: 0.815167712857143

 $00:00:23.732 \longrightarrow 00:00:26.538$  each present abstracts for about 15 minutes.

NOTE Confidence: 0.815167712857143

 $00{:}00{:}26.540 \dashrightarrow 00{:}00{:}28.640$  We'll take questions at the end of the

NOTE Confidence: 0.815167712857143

 $00{:}00{:}28.640 \dashrightarrow 00{:}00{:}30.203$  session and they should be entered

NOTE Confidence: 0.815167712857143

00:00:30.203 --> 00:00:32.145 into the chat room or to the Q&A.

 $00:00:32.145 \longrightarrow 00:00:34.700$  Before we start, let me take a

NOTE Confidence: 0.815167712857143

 $00{:}00{:}34.700 \dashrightarrow 00{:}00{:}37.549$  moment to introduce our presenters.

NOTE Confidence: 0.815167712857143

00:00:37.550 --> 00:00:38.738 First Kelsey Martin,

NOTE Confidence: 0.815167712857143

 $00:00:38.738 \longrightarrow 00:00:41.510$  who is an assistant professor in clinical

NOTE Confidence: 0.815167712857143

00:00:41.581 --> 00:00:44.136 medicine at the Yale School of Medicine,

NOTE Confidence: 0.815167712857143

 $00:00:44.140 \longrightarrow 00:00:46.095$  and she practices hematology oncology

NOTE Confidence: 0.815167712857143

 $00:00:46.095 \longrightarrow 00:00:49.299$  at the Orange Care Center and has a

NOTE Confidence: 0.815167712857143

 $00:00:49.299 \longrightarrow 00:00:51.274$  special interest in classical hematology,

NOTE Confidence: 0.815167712857143

 $00{:}00{:}51.280 \dashrightarrow 00{:}00{:}53.040$  and particularly the intersection

NOTE Confidence: 0.815167712857143

 $00:00:53.040 \longrightarrow 00:00:55.284$  of obstetrical care and hematology.

NOTE Confidence: 0.815167712857143

 $00{:}00{:}55.284 \dashrightarrow 00{:}00{:}58.056$  Doctor Sudhanshu Mulay who is the

NOTE Confidence: 0.815167712857143

 $00:00:58.056 \longrightarrow 00:01:00.467$  medical director of the anticoagulation

NOTE Confidence: 0.815167712857143

 $00{:}01{:}00.467 \dashrightarrow 00{:}01{:}02.812$ clinic at Saint Francis Hospital

NOTE Confidence: 0.815167712857143

 $00{:}01{:}02.812 \dashrightarrow 00{:}01{:}05.582$  and Medical Center and he also has

NOTE Confidence: 0.815167712857143

 $00:01:05.582 \longrightarrow 00:01:07.247$  a strong interest in classical

NOTE Confidence: 0.815167712857143

 $00:01:07.247 \longrightarrow 00:01:09.100$  hematology and transfusion medicine.

 $00{:}01{:}09.100 \dashrightarrow 00{:}01{:}11.056$  He's an assistant professor of medicine

NOTE Confidence: 0.815167712857143

 $00{:}01{:}11.056 \dashrightarrow 00{:}01{:}13.070$  at the University of Connecticut.

NOTE Confidence: 0.815167712857143

00:01:13.070 --> 00:01:15.608 And then finally Doctor Alex Pine,

NOTE Confidence: 0.815167712857143

 $00:01:15.610 \longrightarrow 00:01:18.185$  who's assistant professor of medicine

NOTE Confidence: 0.815167712857143

 $00:01:18.185 \longrightarrow 00:01:22.300$  and hematology at the VA Medical Center.

NOTE Confidence: 0.815167712857143

 $00:01:22.300 \longrightarrow 00:01:24.256$  He and his colleagues have done

NOTE Confidence: 0.815167712857143

00:01:24.256 --> 00:01:26.479 significant work over the past few years,

NOTE Confidence: 0.815167712857143

 $00:01:26.480 \longrightarrow 00:01:29.604$  detailing the mechanisms of

NOTE Confidence: 0.815167712857143

00:01:29.604 --> 00:01:31.166 COVID Coagulopathy.

NOTE Confidence: 0.815167712857143

 $00:01:31.170 \longrightarrow 00:01:32.630$  So without further ado,

NOTE Confidence: 0.815167712857143

00:01:32.630 --> 00:01:34.455 I'll introduce Doctor Martin and

NOTE Confidence: 0.815167712857143

00:01:34.455 --> 00:01:36.589 let her begin the presentations.

NOTE Confidence: 0.819575348

 $00{:}01{:}40.080 --> 00{:}01{:}41.190$  Great, thank you so much.

NOTE Confidence: 0.864340405714286

00:01:52.480 --> 00:01:53.902 Good afternoon everyone.

NOTE Confidence: 0.864340405714286

00:01:53.902 --> 00:01:56.696 Is my volume OK? Correct, alright,

 $00:01:56.696 \longrightarrow 00:01:59.832$  I'm going to be discussing A3 abstracts

NOTE Confidence: 0.864340405714286

 $00:01:59.832 \longrightarrow 00:02:01.848$  relating to bleeding disorders.

NOTE Confidence: 0.7091463225

00:02:04.190 --> 00:02:06.932 First, abstract is titled efficacy and

NOTE Confidence: 0.7091463225

 $00:02:06.932 \longrightarrow 00:02:10.309$  safety of the two Serin prophylaxis,

NOTE Confidence: 0.7091463225

 $00{:}02{:}10.310 \dashrightarrow 00{:}02{:}12.700$ a small molecule RNA interference

NOTE Confidence: 0.7091463225

 $00:02:12.700 \longrightarrow 00:02:15.090$  therapeutic in a multicenter phase.

NOTE Confidence: 0.7091463225

 $00{:}02{:}15.090 \dashrightarrow 00{:}02{:}18.600$  Three study called Atlas I NH in people

NOTE Confidence: 0.7091463225

 $00:02:18.600 \longrightarrow 00:02:21.645$  with hemophilia A or B with inhibitors.

NOTE Confidence: 0.7091463225

 $00{:}02{:}21.650 \dashrightarrow 00{:}02{:}24.188$  This was presented at the plenary

NOTE Confidence: 0.7091463225

00:02:24.188 --> 00:02:26.430 scientific session by Doctor Gayoung

NOTE Confidence: 0.7091463225

 $00:02:26.430 \longrightarrow 00:02:28.360$  from University of Southern California.

NOTE Confidence: 0.919775992

00:02:31.120 --> 00:02:32.880 1st, I'll provide some background.

NOTE Confidence: 0.919775992

 $00:02:32.880 \longrightarrow 00:02:35.040$  Hemophilia A&B are rare bleeding

NOTE Confidence: 0.919775992

 $00:02:35.040 \longrightarrow 00:02:36.768$  disorders that are characterized

NOTE Confidence: 0.919775992

 $00:02:36.768 \longrightarrow 00:02:38.980$  by ineffective clot formation,

NOTE Confidence: 0.919775992

 $00:02:38.980 \longrightarrow 00:02:41.038$  largely due to impaired thrombin generation.

 $00:02:41.040 \longrightarrow 00:02:43.405$  As a result of severe

NOTE Confidence: 0.919775992

 $00:02:43.405 \longrightarrow 00:02:46.070$  deficiency of factor 8 and 9.

NOTE Confidence: 0.919775992

00:02:46.070 --> 00:02:48.632 Currently our standard of care largely

NOTE Confidence: 0.919775992

 $00:02:48.632 \longrightarrow 00:02:51.449$  relies on replacing the missing factor.

NOTE Confidence: 0.919775992

 $00:02:51.450 \longrightarrow 00:02:53.704$  There is a high rate of development

NOTE Confidence: 0.919775992

 $00:02:53.704 \longrightarrow 00:02:55.379$  of anti factor inhibitors which

NOTE Confidence: 0.919775992

 $00:02:55.379 \longrightarrow 00:02:58.274$  is up to about 30% in some of our

NOTE Confidence: 0.919775992

 $00:02:58.274 \longrightarrow 00:03:00.200$  patients with hemophilia A and about

NOTE Confidence: 0.919775992

 $00:03:00.264 \longrightarrow 00:03:02.220$  5% of the patients with hemophilia B.

NOTE Confidence: 0.734905561428571

00:03:04.640 --> 00:03:06.146 Subcutaneous fat isran

NOTE Confidence: 0.734905561428571

 $00:03:06.146 \longrightarrow 00:03:08.154$  is a novel therapeutic.

NOTE Confidence: 0.734905561428571

00:03:08.160 --> 00:03:10.815 It's a small molecule RNA

NOTE Confidence: 0.734905561428571

 $00{:}03{:}10.815 \dashrightarrow 00{:}03{:}12.536$  interference the rapeutic that acts

NOTE Confidence: 0.734905561428571

 $00{:}03{:}12.536 \dashrightarrow 00{:}03{:}14.832$  by binding and degrading at the M

NOTE Confidence: 0.734905561428571

00:03:14.832 --> 00:03:17.398 RNA which encodes for antithrombin,

00:03:17.400 --> 00:03:19.413 thereby partially silencing

NOTE Confidence: 0.734905561428571

 $00{:}03{:}19.413 \dashrightarrow 00{:}03{:}22.097$  the expression of antithrombin.

NOTE Confidence: 0.734905561428571

 $00:03:22.100 \longrightarrow 00:03:24.220$  This rebalances hemostasis and

NOTE Confidence: 0.734905561428571

 $00:03:24.220 \longrightarrow 00:03:26.340$  restores thrombin generation in

NOTE Confidence: 0.734905561428571

00:03:26.340 --> 00:03:28.672 patients with hemophilia or A

NOTE Confidence: 0.734905561428571

 $00:03:28.672 \longrightarrow 00:03:31.060$  and has been demonstrated to be

NOTE Confidence: 0.734905561428571

 $00:03:31.060 \longrightarrow 00:03:33.233$  effective in patients with or

NOTE Confidence: 0.734905561428571

 $00:03:33.233 \longrightarrow 00:03:35.363$  without inhibitors as I'll discuss.

NOTE Confidence: 0.734905561428571

 $00{:}03{:}35.370 \mathrel{--}{>} 00{:}03{:}37.090$  This study demonstrated that

NOTE Confidence: 0.734905561428571

 $00:03:37.090 \longrightarrow 00:03:39.240$  prophylactic use of the two

NOTE Confidence: 0.734905561428571

 $00{:}03{:}39.240 \dashrightarrow 00{:}03{:}41.032$  strands significantly reduced

NOTE Confidence: 0.734905561428571

 $00:03:41.032 \longrightarrow 00:03:42.967$  annualized bleeding rates,

NOTE Confidence: 0.734905561428571

00:03:42.970 --> 00:03:44.446 which is essentially bleeding

NOTE Confidence: 0.734905561428571

 $00:03:44.446 \longrightarrow 00:03:46.660$  events on an annual basis in

NOTE Confidence: 0.734905561428571

00:03:46.731 --> 00:03:48.766 patients with hemophilia A or

NOTE Confidence: 0.734905561428571

 $00{:}03{:}48.766 \dashrightarrow 00{:}03{:}50.801$ hemophilia B that have inhibitors,

 $00:03:50.810 \longrightarrow 00:03:53.578$  and demonstrated both efficacy

NOTE Confidence: 0.734905561428571

00:03:53.578 --> 00:03:55.654 and safety data.

NOTE Confidence: 0.734905561428571

 $00:03:55.660 \longrightarrow 00:03:56.812$  In this study,

NOTE Confidence: 0.734905561428571

00:03:56.812 --> 00:03:58.348 57 patients were randomized,

NOTE Confidence: 0.734905561428571

 $00:03:58.350 \longrightarrow 00:04:00.030$  2 to one in an open label phase.

NOTE Confidence: 0.734905561428571

 $00:04:00.030 \longrightarrow 00:04:01.930$  Three trial patients were

NOTE Confidence: 0.734905561428571

 $00:04:01.930 \longrightarrow 00:04:04.780$  males over the age of 12,

NOTE Confidence: 0.734905561428571

 $00:04:04.780 \longrightarrow 00:04:06.796$  again with either hemophilia A or B,

NOTE Confidence: 0.734905561428571

 $00:04:06.800 \longrightarrow 00:04:07.868$  with with inhibitors,

NOTE Confidence: 0.734905561428571

 $00:04:07.868 \longrightarrow 00:04:09.648$  and these were patients that

NOTE Confidence: 0.734905561428571

00:04:09.648 --> 00:04:11.770 had been receiving on demand

NOTE Confidence: 0.734905561428571

 $00:04:11.770 \longrightarrow 00:04:13.558$  treatment with bypassing agents

NOTE Confidence: 0.734905561428571

 $00{:}04{:}13.558 \dashrightarrow 00{:}04{:}15.510$  for Blake breakthrough bleeding.

NOTE Confidence: 0.761360574285714

 $00:04:17.560 \longrightarrow 00:04:20.105$  There was 38 patients in the phase, two

NOTE Confidence: 0.761360574285714

00:04:20.105 --> 00:04:22.225 Syrian group and the dosing of this medic.

 $00:04:22.230 \longrightarrow 00:04:24.258$  This is a subcutaneous therapy that

NOTE Confidence: 0.761360574285714

 $00{:}04{:}24.258 \dashrightarrow 00{:}04{:}26.826$  was given at 80 milligrams once a

NOTE Confidence: 0.761360574285714

 $00:04:26.826 \longrightarrow 00:04:29.550$  month versus 19 patients in the

NOTE Confidence: 0.761360574285714

00:04:29.550 --> 00:04:31.890 on demand bypassing Agent Group.

NOTE Confidence: 0.761360574285714

 $00:04:31.890 \longrightarrow 00:04:32.766$  They were followed.

NOTE Confidence: 0.761360574285714

00:04:32.766 --> 00:04:34.810 The primary endpoint was looking at annual

NOTE Confidence: 0.761360574285714

 $00:04:34.864 \longrightarrow 00:04:36.610$  bleeding rate in the efficacy period,

NOTE Confidence: 0.761360574285714

 $00:04:36.610 \longrightarrow 00:04:39.718$  which was nine months.

NOTE Confidence: 0.761360574285714

 $00:04:39.720 \longrightarrow 00:04:41.936$  Secondary endpoints looked at

NOTE Confidence: 0.761360574285714

 $00:04:41.936 \longrightarrow 00:04:43.598$  spontaneous bleeding rates,

NOTE Confidence: 0.761360574285714

00:04:43.600 --> 00:04:44.616 joints, bleeds,

NOTE Confidence: 0.761360574285714

00:04:44.616 --> 00:04:46.648 quality of life metrics,

NOTE Confidence: 0.761360574285714

 $00:04:46.650 \longrightarrow 00:04:50.332$  which by a validated quality of life

NOTE Confidence: 0.761360574285714

 $00:04:50.332 \longrightarrow 00:04:52.780$  tool and also frequency of the bleeding

NOTE Confidence: 0.761360574285714

00:04:52.780 --> 00:04:55.019 episodes that happened in the onset period,

NOTE Confidence: 0.761360574285714

 $00:04:55.020 \longrightarrow 00:04:57.020$  which was the first month of the rapy as

 $00:04:57.020 \longrightarrow 00:04:59.120$  well as safety and tolerability data.

NOTE Confidence: 0.838069712142857

 $00{:}05{:}03.390 \dashrightarrow 00{:}05{:}04.925$  And and this was demonstrated

NOTE Confidence: 0.838069712142857

 $00:05:04.925 \longrightarrow 00:05:06.153$  to be extremely effective

NOTE Confidence: 0.838069712142857

 $00:05:06.153 \longrightarrow 00:05:07.790$  in the future and patients.

NOTE Confidence: 0.838069712142857

 $00:05:07.790 \longrightarrow 00:05:10.094$  So you can see here on this first

NOTE Confidence: 0.838069712142857

 $00:05:10.094 \longrightarrow 00:05:12.046$  line the median annual annualized

NOTE Confidence: 0.838069712142857

 $00:05:12.046 \longrightarrow 00:05:14.116$  bleeding rate was actually 0.

NOTE Confidence: 0.929359116

00:05:17.030 --> 00:05:21.046 The estimated rate was 1.7 versus

NOTE Confidence: 0.929359116

 $00{:}05{:}21.046 \dashrightarrow 00{:}05{:}23.476$  in the bypassing agent group.

NOTE Confidence: 0.929359116

 $00:05:23.480 \longrightarrow 00:05:28.260$  The median annualized bleeding rate was 16.8.

NOTE Confidence: 0.929359116

 $00:05:28.260 \longrightarrow 00:05:30.534$  And there was actually the median

NOTE Confidence: 0.929359116

 $00{:}05{:}30.534 \dashrightarrow 00{:}05{:}32.443$  for spontaneous bleeds with zero

NOTE Confidence: 0.929359116

 $00:05:32.443 \longrightarrow 00:05:34.098$  in the future and category.

NOTE Confidence: 0.929359116

 $00:05:34.100 \longrightarrow 00:05:35.908$  There was also demonstration

NOTE Confidence: 0.929359116

00:05:35.908 --> 00:05:38.168 of significant quality of life

 $00:05:38.168 \longrightarrow 00:05:40.054$  improvements based on the validated

NOTE Confidence: 0.929359116

 $00:05:40.054 \longrightarrow 00:05:41.870$  quality of life screening tool.

NOTE Confidence: 0.93286991

 $00:05:44.310 \longrightarrow 00:05:46.890$  And it was effective in both

NOTE Confidence: 0.93286991

 $00:05:46.890 \longrightarrow 00:05:49.140$  patients with hemophilia A and

NOTE Confidence: 0.93286991

00:05:49.140 --> 00:05:51.355 in patients with hemophilia B.

NOTE Confidence: 0.93286991

 $00:05:51.360 \longrightarrow 00:05:54.930$  And we can see that 29 patients.

NOTE Confidence: 0.93286991

 $00:05:54.930 \longrightarrow 00:05:56.898$  And we received for two strand

NOTE Confidence: 0.93286991

 $00:05:56.898 \longrightarrow 00:05:58.800$  in the hemophilia A category

NOTE Confidence: 0.93286991

 $00{:}05{:}58.800 \dashrightarrow 00{:}06{:}00.645$  and nine patients received it

NOTE Confidence: 0.93286991

 $00:06:00.645 \longrightarrow 00:06:02.490$  in the hemophilia B category.

NOTE Confidence: 0.93286991

 $00{:}06{:}02.490 \dashrightarrow 00{:}06{:}05.178$  And again this is compared with

NOTE Confidence: 0.93286991

 $00:06:05.178 \longrightarrow 00:06:07.138$  the second second line here.

NOTE Confidence: 0.93286991

 $00{:}06{:}07.138 \dashrightarrow 00{:}06{:}09.023$  But patient to receive that

NOTE Confidence: 0.93286991

 $00{:}06{:}09.023 \mathrel{--}{>} 00{:}06{:}10.652$  by passing agent only with a

NOTE Confidence: 0.93286991

00:06:10.652 --> 00:06:11.816 very significant P value.

NOTE Confidence: 0.836984533333333

00:06:15.280 --> 00:06:17.980 Overall, the agent was well tolerated,

 $00{:}06{:}17.980 \dashrightarrow 00{:}06{:}21.436$  although the main side effect of

NOTE Confidence: 0.836984533333333

 $00:06:21.436 \longrightarrow 00:06:24.460$  special interest was thrombotic events.

NOTE Confidence: 0.836984533333333

 $00:06:24.460 \longrightarrow 00:06:29.230$  Uhm? There was no deaths of any

NOTE Confidence: 0.836984533333333

 $00:06:29.230 \longrightarrow 00:06:31.779$  kind in either group of note.

NOTE Confidence: 0.836984533333333

00:06:31.780 --> 00:06:34.398 Of the patients that had thrombotic events,

NOTE Confidence: 0.836984533333333

 $00:06:34.400 \longrightarrow 00:06:35.990$  the authors reported that that

NOTE Confidence: 0.836984533333333

 $00:06:35.990 \longrightarrow 00:06:37.580$  occurred in some patients that

NOTE Confidence: 0.836984533333333

 $00{:}06{:}37.638 \dashrightarrow 00{:}06{:}39.073$  seemed to have the antithrombin

NOTE Confidence: 0.836984533333333

 $00:06:39.073 \longrightarrow 00:06:41.172$  levels at the lower end of the range

NOTE Confidence: 0.836984533333333

 $00:06:41.172 \longrightarrow 00:06:43.266$  and seen some as low as 10 to 20%,

NOTE Confidence: 0.8369845333333333

 $00:06:43.266 \longrightarrow 00:06:45.930$  and which is what they attributed to and

NOTE Confidence: 0.836984533333333

 $00:06:46.003 \longrightarrow 00:06:48.614$  only one patient who had a thrombotic

NOTE Confidence: 0.836984533333333

 $00{:}06{:}48.614 \dashrightarrow 00{:}06{:}50.290$  event ended up coming off study,

NOTE Confidence: 0.836984533333333

 $00:06:50.290 \longrightarrow 00:06:53.314$  and this was a patient who had

NOTE Confidence: 0.836984533333333

 $00:06:53.314 \longrightarrow 00:06:56.030$  a thrombosis in a spinal vein.

 $00:06:56.030 \longrightarrow 00:06:58.770$  Other side effects were increases

NOTE Confidence: 0.836984533333333

00:06:58.770 --> 00:06:59.866 in transaminases,

NOTE Confidence: 0.836984533333333

 $00:06:59.870 \longrightarrow 00:07:01.998$  but the authors reported that this did not

NOTE Confidence: 0.836984533333333

00:07:01.998 --> 00:07:03.987 impact any of the treatment scheduling,

NOTE Confidence: 0.836984533333333

 $00:07:03.990 \longrightarrow 00:07:06.312$  and no patients had to come off trial for

NOTE Confidence: 0.836984533333333

 $00:07:06.312 \longrightarrow 00:07:08.590$  any changes in hepatic enzyme changes.

NOTE Confidence: 0.970921658

 $00:07:13.540 \longrightarrow 00:07:16.640$  So the conclusions were that the two

NOTE Confidence: 0.970921658

 $00:07:16.640 \longrightarrow 00:07:18.840$  Serin had significant improvements

NOTE Confidence: 0.970921658

 $00{:}07{:}18.840 {\:{\circ}{\circ}{\circ}}>00{:}07{:}21.342$  in the treatment arm compared with

NOTE Confidence: 0.970921658

 $00:07:21.342 \longrightarrow 00:07:23.590$  the on demand bypassing agents.

NOTE Confidence: 0.970921658

 $00{:}07{:}23.590 \dashrightarrow 00{:}07{:}25.638$  And this is seen as somewhat of a

NOTE Confidence: 0.970921658

00:07:25.638 --> 00:07:27.870 game changer in the sense that it's

NOTE Confidence: 0.970921658

00:07:27.870 --> 00:07:29.202 given monthly and subcutaneous,

NOTE Confidence: 0.970921658

 $00{:}07{:}29.210 \dashrightarrow 00{:}07{:}31.172$  which is a tremendous change in

NOTE Confidence: 0.970921658

 $00:07:31.172 \longrightarrow 00:07:32.980$  compared to the current standard

NOTE Confidence: 0.970921658

 $00{:}07{:}32.980 \dashrightarrow 00{:}07{:}35.180$  of practice where patients are

 $00:07:35.180 \longrightarrow 00:07:36.940$  needing intravenous therapies and.

NOTE Confidence: 0.970921658

 $00{:}07{:}36.940 --> 00{:}07{:}40.050$  In a much higher frequency.

NOTE Confidence: 0.970921658

 $00:07:40.050 \longrightarrow 00:07:42.269$  Nearly 2/3 of the patients treated with

NOTE Confidence: 0.970921658

00:07:42.269 --> 00:07:44.390 fattoush Rand had zero treated bleeds,

NOTE Confidence: 0.970921658

 $00:07:44.390 \longrightarrow 00:07:46.355$  and the mean median annualized

NOTE Confidence: 0.970921658

 $00:07:46.355 \longrightarrow 00:07:47.927$  bleeding rate was zero.

NOTE Confidence: 0.970921658

00:07:47.930 --> 00:07:48.920 And of note,

NOTE Confidence: 0.970921658

 $00:07:48.920 \longrightarrow 00:07:50.900$  this is also efficacious in both

NOTE Confidence: 0.970921658

 $00:07:50.900 \longrightarrow 00:07:52.890$  patients with hemophilia and hemophilia

NOTE Confidence: 0.970921658

 $00{:}07{:}52.890 \to 00{:}07{:}55.278$  B and its patients with hemophilia

NOTE Confidence: 0.970921658

00:07:55.339 --> 00:07:57.326 B have really had not had similar

NOTE Confidence: 0.970921658

 $00:07:57.326 \longrightarrow 00:07:58.694$  prophylactic similar prophylactic

NOTE Confidence: 0.970921658

 $00{:}07{:}58.694 \dashrightarrow 00{:}08{:}01.430$  options as our hemophilia A patients.

NOTE Confidence: 0.970921658

 $00:08:01.430 \longrightarrow 00:08:05.382$  So creating a new sort of treatment

NOTE Confidence: 0.970921658

 $00:08:05.382 \longrightarrow 00:08:07.265$  approach 7 patients in the treatment

00:08:07.265 --> 00:08:09.629 arm had at least one adverse event,

NOTE Confidence: 0.970921658

 $00:08:09.630 \longrightarrow 00:08:09.911$  including.

NOTE Confidence: 0.970921658

 $00:08:09.911 \longrightarrow 00:08:11.316$  The four thrombotic events and

NOTE Confidence: 0.970921658

00:08:11.316 --> 00:08:13.068 one of those patients did require

NOTE Confidence: 0.970921658

 $00:08:13.068 \longrightarrow 00:08:14.228$  withdrawal from this study.

NOTE Confidence: 0.91085635625

 $00:08:17.910 \longrightarrow 00:08:19.070$  That concludes my discussion

NOTE Confidence: 0.91085635625

 $00:08:19.070 \longrightarrow 00:08:20.230$  in the first abstract,

NOTE Confidence: 0.91085635625

 $00:08:20.230 \longrightarrow 00:08:21.770$  and I'll move on to the second.

NOTE Confidence: 0.91085635625

 $00:08:21.770 \longrightarrow 00:08:23.760$  The second abstract was titled

NOTE Confidence: 0.91085635625

 $00:08:23.760 \longrightarrow 00:08:25.750$  rate of prolonged response after

NOTE Confidence: 0.91085635625

 $00:08:25.819 \longrightarrow 00:08:27.583$  stopping THROMBOPOIETIN receptor

NOTE Confidence: 0.91085635625

00:08:27.583 --> 00:08:29.935 agonist treatment in primary

NOTE Confidence: 0.91085635625

 $00:08:29.935 \longrightarrow 00:08:31.699$  immune thrombocytopenia results

NOTE Confidence: 0.91085635625

00:08:31.765 --> 00:08:34.041 from a nationwide prospective

NOTE Confidence: 0.91085635625

 $00:08:34.041 \longrightarrow 00:08:35.748$  multicenter interventional study.

NOTE Confidence: 0.91085635625

 $00:08:35.750 \longrightarrow 00:08:36.956$  And this was out of France.

00:08:43.470 --> 00:08:44.709 Some background information.

NOTE Confidence: 0.848894783

 $00:08:44.709 \longrightarrow 00:08:46.361$  There's been several retrospective

NOTE Confidence: 0.848894783

 $00:08:46.361 \longrightarrow 00:08:48.469$  studies and a recent prospective

NOTE Confidence: 0.848894783

 $00:08:48.469 \longrightarrow 00:08:50.504$  study that reported unexpected cases

NOTE Confidence: 0.848894783

 $00:08:50.504 \longrightarrow 00:08:52.504$  of durable remission after TPO

NOTE Confidence: 0.848894783

 $00:08:52.504 \longrightarrow 00:08:53.940$  receptor agonist were discontinued

NOTE Confidence: 0.848894783

 $00:08:53.940 \longrightarrow 00:08:55.631$  in adult patients with ITP.

NOTE Confidence: 0.848894783

00:08:55.631 --> 00:08:57.639 This has been seen in up to up

NOTE Confidence: 0.848894783

 $00:08:57.639 \longrightarrow 00:09:00.365$  to 30% of these patients.

NOTE Confidence: 0.848894783

 $00:09:00.365 \longrightarrow 00:09:02.834$  However, it felt that perhaps some of

NOTE Confidence: 0.848894783

00:09:02.834 --> 00:09:05.287 the newly diagnosed ITP cases in which

NOTE Confidence: 0.848894783

 $00:09:05.287 \longrightarrow 00:09:06.939$  such spontaneous remissions occurred,

NOTE Confidence: 0.848894783

00:09:06.940 --> 00:09:08.245 may may have been included

NOTE Confidence: 0.848894783

 $00:09:08.245 \longrightarrow 00:09:09.550$  in most of these studies.

NOTE Confidence: 0.90684127

 $00:09:11.990 \longrightarrow 00:09:14.838$  So the question this study has is what

00:09:14.838 --> 00:09:16.959 proportion of patients with either

NOTE Confidence: 0.90684127

 $00{:}09{:}16.959 \dashrightarrow 00{:}09{:}20.036$  persistent or chronic phase ITP and no

NOTE Confidence: 0.90684127

 $00:09:20.036 \longrightarrow 00:09:22.574$  recent exposure to any potentially curative

NOTE Confidence: 0.90684127

 $00{:}09{:}22.574 \dashrightarrow 00{:}09{:}25.369$  therapy such as splenectomy or rituximab,

NOTE Confidence: 0.90684127

 $00:09:25.370 \longrightarrow 00:09:28.172$  achieve a long term remission off

NOTE Confidence: 0.90684127

 $00:09:28.172 \longrightarrow 00:09:31.238$  treatment at 24 weeks and 52 weeks.

NOTE Confidence: 0.90684127

 $00{:}09{:}31.240 \dashrightarrow 00{:}09{:}33.347$  After having on at least three months

NOTE Confidence: 0.90684127

00:09:33.347 --> 00:09:35.879 of their TPO receptor agonist exposure,

NOTE Confidence: 0.90684127

 $00{:}09{:}35.880 \dashrightarrow 00{:}09{:}38.400$  who had a complete response

NOTE Confidence: 0.90684127

00:09:38.400 --> 00:09:39.441 and persistent phase,

NOTE Confidence: 0.90684127

 $00:09:39.441 \longrightarrow 00:09:41.870$  ITP is is defined as those with

NOTE Confidence: 0.90684127

00:09:41.943 --> 00:09:43.779 ITP between 3 and 12 months,

NOTE Confidence: 0.90684127

 $00:09:43.780 \longrightarrow 00:09:48.456$  whereas chronic phases lasting for beyond 12.

NOTE Confidence: 0.90684127

 $00:09:48.460 \longrightarrow 00:09:50.590$  Months, so the inclusion criteria.

NOTE Confidence: 0.90684127

 $00:09:50.590 \longrightarrow 00:09:53.355$  So again, this was a nationwide prospective

NOTE Confidence: 0.90684127

 $00{:}09{:}53.355 \dashrightarrow 00{:}09{:}54.540$  multicenter interventional study.

00:09:54.540 --> 00:09:56.120 The inclusion criteria included

NOTE Confidence: 0.90684127

 $00{:}09{:}56.120 \longrightarrow 00{:}09{:}59.439$  patients over the age of 18 with either

NOTE Confidence: 0.90684127

00:09:59.439 --> 00:10:01.639 persistent or chronic primary ITP.

NOTE Confidence: 0.90684127

 $00:10:01.640 \longrightarrow 00:10:03.632$  They needed to have a stable

NOTE Confidence: 0.90684127

00:10:03.632 --> 00:10:04.296 complete response,

NOTE Confidence: 0.90684127

 $00:10:04.300 \longrightarrow 00:10:05.704$  which was defined as a platelet

NOTE Confidence: 0.90684127

 $00:10:05.704 \longrightarrow 00:10:07.855$  count of more than 100,000 for more

NOTE Confidence: 0.90684127

 $00{:}10{:}07.855 \dashrightarrow 00{:}10{:}10.690$  than two months on their on their

NOTE Confidence: 0.90684127

00:10:10.775 --> 00:10:13.190 TPO RA therapy and they needed to

NOTE Confidence: 0.90684127

 $00{:}10{:}13.190 \dashrightarrow 00{:}10{:}15.110$  have been on treatment with their

NOTE Confidence: 0.90684127

00:10:15.176 --> 00:10:17.206 TPO RA for at least three months.

NOTE Confidence: 0.90684127

 $00{:}10{:}17.210 \dashrightarrow 00{:}10{:}18.938$  Exclusion criteria was patients

NOTE Confidence: 0.90684127

 $00{:}10{:}18.938 \dashrightarrow 00{:}10{:}21.098$  who are on either anticoagulation

NOTE Confidence: 0.90684127

00:10:21.098 --> 00:10:22.939 or antiplatelet therapy.

NOTE Confidence: 0.90684127

 $00:10:22.940 \longrightarrow 00:10:25.257$  A patient who had previously failed the

 $00:10:25.260 \longrightarrow 00:10:28.046$  TPRA agent and the patient could not

NOTE Confidence: 0.90684127

 $00{:}10{:}28.046 \dashrightarrow 00{:}10{:}30.219$  have been receiving any concomitant

NOTE Confidence: 0.90684127

00:10:30.219 --> 00:10:32.937 steroid or cortico steroid or IVIG,

NOTE Confidence: 0.90684127

00:10:32.940 --> 00:10:34.580 and they could not have had Rituxan mab,

NOTE Confidence: 0.90684127

00:10:34.580 --> 00:10:36.415 nor splenectomy within either the

NOTE Confidence: 0.90684127

 $00:10:36.415 \longrightarrow 00:10:38.250$  two months preceding or after

NOTE Confidence: 0.90684127

 $00:10:38.313 \longrightarrow 00:10:40.525$  initiation of their TPO or RA therapy.

NOTE Confidence: 0.932198718333333

 $00:10:43.320 \longrightarrow 00:10:45.936$  And the patients underwent a progressive

NOTE Confidence: 0.932198718333333

 $00:10:45.936 \longrightarrow 00:10:48.229$  dose reduction and they had to.

NOTE Confidence: 0.932198718333333

 $00:10:48.230 \longrightarrow 00:10:50.113$  There are TPO therapy or a therapy

NOTE Confidence: 0.932198718333333

 $00{:}10{:}50.113 \dashrightarrow 00{:}10{:}52.635$  had to be stopped by 10 weeks and

NOTE Confidence: 0.932198718333333

 $00:10:52.635 \longrightarrow 00:10:54.285$  they proposed a method whether

NOTE Confidence: 0.932198718333333

00:10:54.353 --> 00:10:55.908 it was a Rama, Plasty, Morrell,

NOTE Confidence: 0.932198718333333

00:10:55.908 --> 00:10:59.521 Trumbo bag of a protocol of how to how

NOTE Confidence: 0.932198718333333

00:10:59.521 --> 00:11:01.777 to taper off their doses accordingly.

NOTE Confidence: 0.932198718333333

 $00:11:01.780 \longrightarrow 00:11:04.060$  And if a patient relapsed during

 $00:11:04.060 \longrightarrow 00:11:05.200$  after this discontinuation,

NOTE Confidence: 0.932198718333333

 $00:11:05.200 \longrightarrow 00:11:07.160$  the decision to start a new therapy was

NOTE Confidence: 0.932198718333333

00:11:07.160 --> 00:11:09.320 left at every investigators discretion,

NOTE Confidence: 0.932198718333333

 $00:11:09.320 \longrightarrow 00:11:11.012$  and so the primary endpoint was

NOTE Confidence: 0.932198718333333

 $00:11:11.012 \longrightarrow 00:11:12.850$  what was the proportion of patients

NOTE Confidence: 0.932198718333333

00:11:12.850 --> 00:11:14.495 who achieved an overall response,

NOTE Confidence: 0.932198718333333

 $00:11:14.500 \longrightarrow 00:11:16.544$  which was defined as CR plus R

NOTE Confidence: 0.932198718333333

 $00:11:16.544 \longrightarrow 00:11:18.278$  at week 20 at week 24.

NOTE Confidence: 0.932198718333333

00:11:18.280 --> 00:11:19.760 So six months afterwards,

NOTE Confidence: 0.932198718333333

 $00:11:19.760 \longrightarrow 00:11:22.400$  and the secondary outcomes looked at those,

NOTE Confidence: 0.932198718333333

 $00{:}11{:}22.400 \dashrightarrow 00{:}11{:}23.885$  the overall response rate after

NOTE Confidence: 0.932198718333333

 $00:11:23.885 \longrightarrow 00:11:25.828$  a year or 52 weeks, they look.

NOTE Confidence: 0.932198718333333

00:11:25.828 --> 00:11:26.973 I didn't looked at patients

NOTE Confidence: 0.932198718333333

 $00:11:26.973 \longrightarrow 00:11:28.000$  who had bleeding events,

NOTE Confidence: 0.932198718333333

 $00:11:28.000 \longrightarrow 00:11:30.058$  and they aimed to try to identify

00:11:30.058 --> 00:11:31.859 any predictive factors to see which

NOTE Confidence: 0.932198718333333

 $00:11:31.859 \longrightarrow 00:11:33.575$  patients might be those who achieve.

NOTE Confidence: 0.932198718333333

 $00:11:33.580 \longrightarrow 00:11:35.460$  Such an overall prolonged response.

NOTE Confidence: 0.920319333333333

 $00:11:38.910 \longrightarrow 00:11:43.512$  So 49 patients which included a 30

NOTE Confidence: 0.920319333333333

 $00:11:43.512 \longrightarrow 00:11:45.244$  females with either persistent.

NOTE Confidence: 0.920319333333333

 $00:11:45.250 \longrightarrow 00:11:47.356$  There was an end of two

NOTE Confidence: 0.920319333333333

 $00:11:47.356 \longrightarrow 00:11:49.469$  or chronic and a 47 ITP.

NOTE Confidence: 0.920319333333333

 $00:11:49.470 \longrightarrow 00:11:52.838$  The median age of 58.5 years were evaluated

 $00:11:52.838 \longrightarrow 00:11:56.406$  in this two year period over 22 centers.

NOTE Confidence: 0.920319333333333

 $00:11:56.410 \longrightarrow 00:11:58.834$  40 of the patients had received

NOTE Confidence: 0.920319333333333

 $00:11:58.834 \longrightarrow 00:12:01.340$  eltrombopag and nine around the plastic.

 $00:12:01.340 \longrightarrow 00:12:04.310$  And intention to treat analysis

NOTE Confidence: 0.920319333333333

 $00:12:04.310 \longrightarrow 00:12:07.330$  56.2% so 27 of the 48 patients

NOTE Confidence: 0.9203193333333333

00:12:07.330 --> 00:12:09.210 achieving the primary endpoint

NOTE Confidence: 0.920319333333333

00:12:09.210 --> 00:12:11.528 achieved the primary endpoint and

NOTE Confidence: 0.920319333333333

 $00:12:11.528 \longrightarrow 00:12:13.724$  maintained an overall response at 24

 $00:12:13.724 \longrightarrow 00:12:16.130$  weeks after TPO RA discontinuation.

NOTE Confidence: 0.920319333333333

00:12:16.130 --> 00:12:17.936 And of those, half of those,

NOTE Confidence: 0.920319333333333

00:12:17.940 --> 00:12:20.430 essentially 55 percent, 15 of those,

NOTE Confidence: 0.920319333333333

00:12:20.430 --> 00:12:22.590 27 had a complete response,

NOTE Confidence: 0.920319333333333

 $00:12:22.590 \longrightarrow 00:12:25.164$  which again is defined as a

NOTE Confidence: 0.920319333333333

 $00:12:25.164 \longrightarrow 00:12:26.880$  platelet count over 100,000.

NOTE Confidence: 0.920319333333333

 $00:12:26.880 \longrightarrow 00:12:30.468$  Bleeding events did occur in 61.9% of

NOTE Confidence: 0.920319333333333

 $00:12:30.468 \longrightarrow 00:12:33.228$  the patients and 65.2% of the patients

NOTE Confidence: 0.920319333333333

 $00:12:33.228 \longrightarrow 00:12:36.229$  who did relapse at the 24 week and 50.

NOTE Confidence: 0.7839765325

 $00:12:38.810 \longrightarrow 00:12:41.402$  Should be weeks or 52 weeks with the median

NOTE Confidence: 0.7839765325

 $00:12:41.402 \longrightarrow 00:12:44.006$  platelet count of 31,000 at that time.

NOTE Confidence: 0.7839765325

 $00:12:44.006 \longrightarrow 00:12:46.276$  No severe bleeding episodes occurred.

NOTE Confidence: 0.93675410125

 $00{:}12{:}48.730 \dashrightarrow 00{:}12{:}51.562$  And they could not identify any

NOTE Confidence: 0.93675410125

 $00{:}12{:}51.562 \dashrightarrow 00{:}12{:}53.224$  predictive factors. Neither age.

NOTE Confidence: 0.93675410125

00:12:53.224 --> 00:12:55.009 Which agent the patient had,

 $00:12:55.010 \longrightarrow 00:12:56.138$  how long they'd had.

NOTE Confidence: 0.93675410125

00:12:56.138 --> 00:12:57.830 ITP none of these things were

NOTE Confidence: 0.93675410125

 $00:12:57.887 \longrightarrow 00:12:59.462$  able to predict which patients

NOTE Confidence: 0.93675410125

 $00:12:59.462 \longrightarrow 00:13:01.450$  were those who were going to

NOTE Confidence: 0.93675410125

 $00:13:01.450 \longrightarrow 00:13:03.185$  achieve such a sustained response.

NOTE Confidence: 0.93675410125

 $00:13:03.190 \longrightarrow 00:13:05.092$  So the conclusions of this was

NOTE Confidence: 0.93675410125

 $00:13:05.092 \longrightarrow 00:13:07.130$  that after 52 weeks and this is

NOTE Confidence: 0.93675410125

 $00:13:07.130 \longrightarrow 00:13:09.402$  you can seen by the diagram on the

NOTE Confidence: 0.93675410125

00:13:09.402 --> 00:13:11.369 right hand side after after TPR,

NOTE Confidence: 0.93675410125

 $00:13:11.370 \longrightarrow 00:13:13.580$  a discontinuation overall response was

NOTE Confidence: 0.93675410125

00:13:13.580 --> 00:13:16.969 seen in about half of these patients,

NOTE Confidence: 0.93675410125

 $00:13:16.970 \longrightarrow 00:13:20.130$  52.1% for those who did relapse.

NOTE Confidence: 0.93675410125

 $00:13:20.130 \longrightarrow 00:13:21.918$  The median time of relapsing after

NOTE Confidence: 0.93675410125

00:13:21.918 --> 00:13:23.590 tapering was at about 8 weeks,

NOTE Confidence: 0.93675410125

 $00:13:23.590 \longrightarrow 00:13:25.096$  but the majority of those actually

NOTE Confidence: 0.93675410125

 $00:13:25.096 \longrightarrow 00:13:26.570$  happened within the first two weeks,

 $00:13:26.570 \longrightarrow 00:13:28.556$  and none of those patients who

NOTE Confidence: 0.93675410125

 $00:13:28.556 \longrightarrow 00:13:29.880$  relapsed developed severe bleeding.

NOTE Confidence: 0.884706296666667

00:13:32.990 --> 00:13:35.558 In among 21 patients who did

NOTE Confidence: 0.884706296666667

 $00:13:35.558 \longrightarrow 00:13:37.141$  relapse before week 2413,

NOTE Confidence: 0.884706296666667

00:13:37.141 --> 00:13:39.469 of those were able to be re-challenged

NOTE Confidence: 0.884706296666667

00:13:39.469 --> 00:13:41.815 with their TPO RA and they were still

NOTE Confidence: 0.884706296666667

 $00:13:41.815 \longrightarrow 00:13:43.655$  able to achieve a complete response

NOTE Confidence: 0.884706296666667

 $00{:}13{:}43.655 \dashrightarrow 00{:}13{:}45.811$  with a medium time of two weeks.

NOTE Confidence: 0.871721324333333

 $00{:}13{:}47.870 \dashrightarrow 00{:}13{:}50.022$  So the conclusion is that there was a

NOTE Confidence: 0.871721324333333

 $00:13:50.022 \longrightarrow 00:13:52.187$  high rate of sustained off treatment

NOTE Confidence: 0.871721324333333

 $00:13:52.187 \longrightarrow 00:13:54.137$  remission after TPO RA discontinuation

NOTE Confidence: 0.871721324333333

 $00:13:54.137 \longrightarrow 00:13:56.725$  in patients with chronic ITP who had

NOTE Confidence: 0.871721324333333

 $00{:}13{:}56.725 \to 00{:}13{:}58.481$  initially achieved at stable CR.

NOTE Confidence: 0.871721324333333

 $00:13:58.481 \longrightarrow 00:14:01.129$  They were unable to die and identify a

NOTE Confidence: 0.871721324333333

00:14:01.129 --> 00:14:03.345 predictive factor of which patients were

 $00:14:03.345 \longrightarrow 00:14:05.850$  would achieve such a lasting remission.

NOTE Confidence: 0.871721324333333

 $00{:}14{:}05.850 \dashrightarrow 00{:}14{:}07.806$  But this study strongly supports use

NOTE Confidence: 0.871721324333333

 $00:14:07.806 \longrightarrow 00:14:09.849$  of a progressive tapering off of the

NOTE Confidence: 0.871721324333333

 $00{:}14{:}09.849 \dashrightarrow 00{:}14{:}11.431$  dose of TPRS and patients who do

NOTE Confidence: 0.871721324333333

 $00{:}14{:}11.490 \dashrightarrow 00{:}14{:}13.230$  achieve a stable CR on treatment.

NOTE Confidence: 0.871721324333333

00:14:13.230 --> 00:14:14.623 And there may be opportunity for us

NOTE Confidence: 0.871721324333333

 $00:14:14.623 \longrightarrow 00:14:16.131$  to be able to discontinue therapy

NOTE Confidence: 0.871721324333333

 $00:14:16.131 \longrightarrow 00:14:16.995$  in such patients.

NOTE Confidence: 0.820428353333333

00:14:20.790 --> 00:14:22.660 The last abstract I'll discuss

NOTE Confidence: 0.820428353333333

 $00:14:22.660 \longrightarrow 00:14:24.156$  was called obstetric obstetrical

NOTE Confidence: 0.820428353333333

00:14:24.156 --> 00:14:25.910 and perioperative management of

NOTE Confidence: 0.820428353333333

00:14:25.910 --> 00:14:28.110 patients with factor 11 deficiency.

NOTE Confidence: 0.820428353333333

 $00:14:28.110 \longrightarrow 00:14:30.258$  A retrospective observational study.

NOTE Confidence: 0.831983915625

 $00:14:32.860 \longrightarrow 00:14:34.772$  In the background information

NOTE Confidence: 0.831983915625

00:14:34.772 --> 00:14:36.684 data regarding obstetrical and

NOTE Confidence: 0.831983915625

00:14:36.684 --> 00:14:38.024 perioperative management of

 $00:14:38.024 \longrightarrow 00:14:39.619$  factor 11 deficiency is scarce.

NOTE Confidence: 0.888969126666667

 $00:14:41.930 \longrightarrow 00:14:43.088$  And the question at hand is,

NOTE Confidence: 0.888969126666667

 $00:14:43.090 \longrightarrow 00:14:45.538$  can we create a database of such patients

NOTE Confidence: 0.888969126666667

 $00:14:45.538 \longrightarrow 00:14:47.464$  and identify factors associated with

NOTE Confidence: 0.888969126666667

 $00:14:47.464 \longrightarrow 00:14:49.559$  increased increased bleeding risk in

NOTE Confidence: 0.888969126666667

00:14:49.559 --> 00:14:51.669 patients with factor 11 deficiency

NOTE Confidence: 0.888969126666667

00:14:51.669 --> 00:14:53.285 during childbirth or surgery?

NOTE Confidence: 0.888969126666667

 $00{:}14{:}53.290 \dashrightarrow 00{:}14{:}54.988$  And this was presented by Doctor

NOTE Confidence: 0.888969126666667

00:14:54.988 --> 00:14:56.483 Hanna from the Icahn School

NOTE Confidence: 0.888969126666667

00:14:56.483 --> 00:14:57.998 of Medicine at Mount Sinai.

NOTE Confidence: 0.893566743

 $00:15:00.600 \longrightarrow 00:15:02.394$  So they did a retrospective chart

NOTE Confidence: 0.893566743

00:15:02.394 --> 00:15:04.435 review of patients with factor 11

NOTE Confidence: 0.893566743

 $00{:}15{:}04.435 \dashrightarrow 00{:}15{:}06.011$  deficiency who underwent either

NOTE Confidence: 0.893566743

 $00:15:06.011 \longrightarrow 00:15:07.908$  child birth or surgical procedures over

NOTE Confidence: 0.893566743

00:15:07.908 --> 00:15:10.052 a 10 year period within the Mount Sinai

00:15:10.052 --> 00:15:12.156 health care system in New York City,

NOTE Confidence: 0.893566743

00:15:12.160 --> 00:15:14.640 and they collected data on age, sex,

NOTE Confidence: 0.893566743

00:15:14.640 --> 00:15:17.200 ethnicity, genotype, family history,

NOTE Confidence: 0.893566743

00:15:17.200 --> 00:15:18.696 personal history of bleeding.

NOTE Confidence: 0.893566743

 $00:15:18.696 \longrightarrow 00:15:20.940$  The type of anesthesia used the

NOTE Confidence: 0.893566743

00:15:21.008 --> 00:15:23.474 estimated blood loss and any evidence

NOTE Confidence: 0.893566743

 $00:15:23.474 \longrightarrow 00:15:25.118$  of of periprocedural bleeding

NOTE Confidence: 0.893566743

00:15:25.185 --> 00:15:27.455 which patients needed blood product

NOTE Confidence: 0.893566743

 $00{:}15{:}27.455 \dashrightarrow 00{:}15{:}29.271$  administration and which product

NOTE Confidence: 0.893566743

 $00:15:29.271 \longrightarrow 00:15:31.206$  which patients needed hemostatic

NOTE Confidence: 0.893566743

 $00{:}15{:}31.206 \dashrightarrow 00{:}15{:}33.666$  agents in the perioperative period,

NOTE Confidence: 0.893566743

 $00:15:33.670 \longrightarrow 00:15:36.596$  they defined a bleeding endpoint as acute

NOTE Confidence: 0.893566743

00:15:36.596 --> 00:15:39.389 postpartum or post operative hemorrhage,

NOTE Confidence: 0.893566743

 $00:15:39.390 \longrightarrow 00:15:41.480$  or any bleeding that warranted

NOTE Confidence: 0.893566743

00:15:41.480 --> 00:15:42.734 non prophylactic administration

NOTE Confidence: 0.893566743

 $00:15:42.734 \longrightarrow 00:15:44.588$  of pack red blood cells.

 $00:15:44.590 \longrightarrow 00:15:47.850$  FFP or transxamic acid.

NOTE Confidence: 0.893566743

 $00{:}15{:}47.850 \dashrightarrow 00{:}15{:}49.440$  They performed a logistic regression

NOTE Confidence: 0.893566743

 $00:15:49.440 \longrightarrow 00:15:51.030$  to test for the association

NOTE Confidence: 0.893566743

 $00:15:51.086 \longrightarrow 00:15:52.379$  between either historical,

NOTE Confidence: 0.893566743

 $00{:}15{:}52.380 \dashrightarrow 00{:}15{:}54.028$  laboratory and procedural variables

NOTE Confidence: 0.893566743

 $00:15:54.028 \longrightarrow 00:15:55.676$  with the bleeding endpoint.

NOTE Confidence: 0.892415406666667

00:15:58.350 --> 00:16:01.212 So overall, 198 patients were evaluated

NOTE Confidence: 0.892415406666667

 $00:16:01.212 \longrightarrow 00:16:04.714$  who had undergone 252 procedures in total.

NOTE Confidence: 0.892415406666667

 $00:16:04.714 \longrightarrow 00:16:06.626$  This included 143 vaginal

NOTE Confidence: 0.892415406666667

 $00:16:06.626 \longrightarrow 00:16:08.816$  deliveries in 64 city sections

NOTE Confidence: 0.892415406666667

 $00{:}16{:}08.816 \dashrightarrow 00{:}16{:}11.809$  and 45 other surgical procedures.

NOTE Confidence: 0.892415406666667

 $00:16:11.810 \longrightarrow 00:16:14.828$  38 of the 252 procedures did

NOTE Confidence: 0.892415406666667

 $00{:}16{:}14.828 \dashrightarrow 00{:}16{:}16.840$  result in bleeding complications,

NOTE Confidence: 0.892415406666667

 $00:16:16.840 \longrightarrow 00:16:19.024$  and they found that both a prior

NOTE Confidence: 0.892415406666667

 $00:16:19.024 \longrightarrow 00:16:21.162$  history of bleeding and a lower

00:16:21.162 --> 00:16:23.052 factor 11 levels were independently

NOTE Confidence: 0.892415406666667

 $00:16:23.052 \longrightarrow 00:16:25.200$  associated with the bleeding endpoint.

NOTE Confidence: 0.88016542

00:16:28.000 --> 00:16:31.396 Interestingly, 8 out of 21 patients,

NOTE Confidence: 0.88016542

 $00:16:31.400 \longrightarrow 00:16:34.238$  38% who suffered a bleeding complication.

NOTE Confidence: 0.88016542

 $00:16:34.240 \longrightarrow 00:16:38.280$  This happened despite prophylactic FFP.

NOTE Confidence: 0.88016542

 $00:16:38.280 \longrightarrow 00:16:40.434$  The mean factor level level for

NOTE Confidence: 0.88016542

 $00:16:40.434 \longrightarrow 00:16:42.367$  with patients who receive neuraxial

NOTE Confidence: 0.88016542

 $00{:}16{:}42.367 \dashrightarrow 00{:}16{:}44.959$ anesthesia was 50 units per deciliter.

NOTE Confidence: 0.88016542

 $00{:}16{:}44.960 \dashrightarrow 00{:}16{:}46.910$  In five patients with a

NOTE Confidence: 0.88016542

00:16:46.910 --> 00:16:48.080 negative bleeding history,

NOTE Confidence: 0.88016542

 $00{:}16{:}48.080 \dashrightarrow 00{:}16{:}49.499$  despite surgical challenges,

NOTE Confidence: 0.88016542

 $00:16:49.499 \longrightarrow 00:16:51.864$  we're actually able to receive

NOTE Confidence: 0.88016542

 $00{:}16{:}51.864 \to 00{:}16{:}53.226$ neuraxial anesthesia effector

NOTE Confidence: 0.88016542

 $00:16:53.226 \longrightarrow 00:16:55.320$  level levels less than 10 and

NOTE Confidence: 0.88016542

 $00:16:55.320 \longrightarrow 00:16:57.260$  without any bleeding complications,

NOTE Confidence: 0.88016542

 $00:16:57.260 \longrightarrow 00:16:59.342$  and only one of these had

00:16:59.342 --> 00:17:00.383 received prophylactic FFP.

NOTE Confidence: 0.891877578666667

 $00:17:05.260 \longrightarrow 00:17:07.458$  So their conclusions were that a personal

NOTE Confidence: 0.891877578666667

 $00{:}17{:}07.458 \dashrightarrow 00{:}17{:}09.571$  history of bleeding was the strongest

NOTE Confidence: 0.891877578666667

 $00:17:09.571 \longrightarrow 00:17:11.426$  predictor of perioperative or obstetrical

NOTE Confidence: 0.891877578666667

 $00:17:11.426 \longrightarrow 00:17:13.817$  bleeding and and that personal history of

NOTE Confidence: 0.891877578666667

 $00:17:13.817 \longrightarrow 00:17:15.974$  bleeding was was actually defined as just

NOTE Confidence: 0.891877578666667

00:17:15.974 --> 00:17:17.913 one one report of heavy menstrual period

NOTE Confidence: 0.891877578666667

 $00{:}17{:}17.913 \dashrightarrow 00{:}17{:}20.036$  or bleeding in the operative period.

NOTE Confidence: 0.891877578666667

 $00:17:20.040 \longrightarrow 00:17:23.068$  It just took sort of one one event in time to

NOTE Confidence: 0.891877578666667

 $00:17:23.068 \longrightarrow 00:17:25.504$  define a personal history of bleeding factor.

NOTE Confidence: 0.891877578666667

 $00:17:25.504 \longrightarrow 00:17:27.936$  11 levels were found to correlate with a

NOTE Confidence: 0.891877578666667

 $00:17:27.936 \longrightarrow 00:17:29.973$  slightly slightly lower but statistically

NOTE Confidence: 0.891877578666667

 $00:17:29.973 \longrightarrow 00:17:32.073$  significant odds of surgical bleeding,

NOTE Confidence: 0.891877578666667

 $00:17:32.080 \longrightarrow 00:17:33.538$  and they found that a factor

NOTE Confidence: 0.891877578666667

 $00:17:33.538 \longrightarrow 00:17:35.520$  11 level cutoff of 40 units per

 $00:17:35.520 \longrightarrow 00:17:37.105$  deciliter may predict bleeding risk.

NOTE Confidence: 0.891877578666667

 $00{:}17{:}37.110 \dashrightarrow 00{:}17{:}39.518$  With reasonable specificity at

NOTE Confidence: 0.891877578666667

 $00:17:39.518 \longrightarrow 00:17:41.296 83\%$  but lacked sensitivity,

NOTE Confidence: 0.891877578666667

 $00:17:41.296 \longrightarrow 00:17:43.648$  they also found that factor 11

NOTE Confidence: 0.891877578666667

00:17:43.648 --> 00:17:45.909 levels are stable during pregnancy,

NOTE Confidence: 0.891877578666667

 $00:17:45.910 \longrightarrow 00:17:48.020$  as demonstrated by the diagram

NOTE Confidence: 0.891877578666667

 $00:17:48.020 \longrightarrow 00:17:49.708$  on the bottom right,

NOTE Confidence: 0.891877578666667

 $00:17:49.710 \longrightarrow 00:17:50.990$  showing that repeat measurements

NOTE Confidence: 0.891877578666667

 $00:17:50.990 \longrightarrow 00:17:52.270$  may not be necessary,

NOTE Confidence: 0.891877578666667

 $00:17:52.270 \longrightarrow 00:17:56.064$  which is something commonly done in practice,

NOTE Confidence: 0.891877578666667

 $00:17:56.070 \longrightarrow 00:17:58.184$  and they also found that neuraxial anesthesia

NOTE Confidence: 0.891877578666667

00:17:58.184 --> 00:18:00.510 appeared to be safe to use in this cohort,

NOTE Confidence: 0.891877578666667

 $00:18:00.510 \longrightarrow 00:18:02.550$  which clinically is a question

NOTE Confidence: 0.891877578666667

 $00:18:02.550 \longrightarrow 00:18:04.182$  that comes up frequently.

NOTE Confidence: 0.891877578666667

00:18:04.190 --> 00:18:06.668 Hey, thank you for your time.

NOTE Confidence: 0.891877578666667

00:18:06.670 --> 00:18:08.560 Forward to hearing from our next speaker,

 $00:18:08.560 \longrightarrow 00:18:09.150$  Doctor Malik.

NOTE Confidence: 0.737128475

 $00:18:13.340 \longrightarrow 00:18:14.130$  Thanks, Kelsey.

NOTE Confidence: 0.928828021111111

00:18:25.970 --> 00:18:28.560 Right, thank you for the

NOTE Confidence: 0.928828021111111

 $00:18:28.560 \longrightarrow 00:18:30.632$  opportunity to talk today.

NOTE Confidence: 0.928828021111111

00:18:30.640 --> 00:18:33.778 I'm going to focus on thrombosis,

NOTE Confidence: 0.928828021111111

 $00:18:33.780 \longrightarrow 00:18:35.694$  so I'm hoping to present three

NOTE Confidence: 0.928828021111111

00:18:35.694 --> 00:18:37.790 studies that I found of interest.

NOTE Confidence: 0.816056465555556

 $00{:}18{:}40.020 \dashrightarrow 00{:}18{:}42.372$  Have one focus study and then as

NOTE Confidence: 0.81605646555556

00:18:42.372 --> 00:18:44.642 time permits and go through the

NOTE Confidence: 0.81605646555556

00:18:44.642 --> 00:18:46.617 other two studies with quickly.

NOTE Confidence: 0.816056465555556

00:18:46.620 --> 00:18:49.245 The focus state I would I would

NOTE Confidence: 0.81605646555556

 $00{:}18{:}49.245 \dashrightarrow 00{:}18{:}52.053$  like to present is 1 listed here

NOTE Confidence: 0.816056465555556

 $00{:}18{:}52.053 \dashrightarrow 00{:}18{:}55.225$  by Murs ET al from the Brigham

NOTE Confidence: 0.81605646555556

 $00{:}18{:}55.225 \dashrightarrow 00{:}18{:}57.778$  and Women's Hospital in Boston who

NOTE Confidence: 0.81605646555556

 $00{:}18{:}57.778 \dashrightarrow 00{:}19{:}00.168$  looked at anticoagulation use and

00:19:00.168 --> 00:19:02.850 outcomes among patients with atrial

NOTE Confidence: 0.81605646555556

 $00{:}19{:}02.850 \dashrightarrow 00{:}19{:}06.780$  fibrillation and vanilla brand disease.

NOTE Confidence: 0.81605646555556

 $00:19:06.780 \longrightarrow 00:19:09.130$  Oral presentation.

NOTE Confidence: 0.81605646555556

 $00:19:09.130 \longrightarrow 00:19:12.250$  The background is that estimated

NOTE Confidence: 0.81605646555556

 $00:19:12.250 \longrightarrow 00:19:15.370$  prevalence of symptomatic 1 willibrand

NOTE Confidence: 0.81605646555556

 $00:19:15.460 \longrightarrow 00:19:18.010$  disease is about one in 1000.

NOTE Confidence: 0.81605646555556

 $00:19:18.010 \longrightarrow 00:19:21.330$  It is estimated that.

NOTE Confidence: 0.81605646555556

 $00:19:21.330 \longrightarrow 00:19:22.974$  Patients with one milligram

NOTE Confidence: 0.81605646555556

 $00{:}19{:}22.974 \dashrightarrow 00{:}19{:}24.618$  disease have similar prevalence

NOTE Confidence: 0.81605646555556

00:19:24.618 --> 00:19:26.786 of atrial fibrillation as general

NOTE Confidence: 0.81605646555556

 $00:19:26.786 \longrightarrow 00:19:29.870$  population is about .84%.

NOTE Confidence: 0.81605646555556

00:19:29.870 --> 00:19:32.105 The American College of Cardiology

NOTE Confidence: 0.81605646555556

 $00:19:32.105 \longrightarrow 00:19:34.340$  recommends using anticoagulation for those

NOTE Confidence: 0.816056465555556

 $00:19:34.405 \longrightarrow 00:19:36.727$  with atrial fibrillation who have chads,

NOTE Confidence: 0.81605646555556

 $00:19:36.730 \longrightarrow 00:19:39.054$  vascor of two or greater in men

NOTE Confidence: 0.816056465555556

00:19:39.054 --> 00:19:41.438 or three or greater in women.

00:19:41.440 --> 00:19:48.234 The recent ash ISTHNHF&W SH guide-

lines

NOTE Confidence: 0.81605646555556

 $00:19:48.234 \longrightarrow 00:19:51.128$  recommend using anticoagulation or

NOTE Confidence: 0.81605646555556

00:19:51.128 --> 00:19:53.718 antiplatelet therapy as clinically indicated.

NOTE Confidence: 0.81605646555556

 $00:19:53.720 \longrightarrow 00:19:57.024$  It was a suggestion with low certainty

NOTE Confidence: 0.81605646555556

 $00:19:57.024 \longrightarrow 00:19:59.119$  of evidence and importantly when

NOTE Confidence: 0.81605646555556

 $00:19:59.119 \longrightarrow 00:20:01.417$  I looked into the actual.

NOTE Confidence: 0.901501476666667

 $00:20:03.790 \longrightarrow 00:20:05.830$  Basis of this recommendation,

NOTE Confidence: 0.901501476666667

00:20:05.830 --> 00:20:08.810 it was based on a case series of about

NOTE Confidence: 0.901501476666667

00:20:08.810 --> 00:20:11.180 60 patients or really low quality data.

NOTE Confidence: 0.855000820476191

 $00:20:13.730 \longrightarrow 00:20:16.106$  So this the study that was

NOTE Confidence: 0.855000820476191

 $00:20:16.106 \longrightarrow 00:20:18.185$  presented was a retrospective study

NOTE Confidence: 0.855000820476191

 $00:20:18.185 \longrightarrow 00:20:20.729$  in which data was obtained from

NOTE Confidence: 0.855000820476191

 $00:20:20.729 \longrightarrow 00:20:22.640$  the Electronic medical records.

NOTE Confidence: 0.855000820476191

 $00:20:22.640 \longrightarrow 00:20:24.584$  Patient was selected if they had

NOTE Confidence: 0.855000820476191

 $00:20:24.584 \longrightarrow 00:20:27.117$  a diagnosis of 1 lip and disease

00:20:27.117 --> 00:20:29.067 noticed or seeking cofactor activity

NOTE Confidence: 0.855000820476191

00:20:29.067 --> 00:20:31.896 or any abnormal one will event factor

NOTE Confidence: 0.855000820476191

 $00:20:31.900 \longrightarrow 00:20:34.582$  measurements and also selected for those

NOTE Confidence: 0.855000820476191

 $00:20:34.582 \longrightarrow 00:20:37.910$  who had diagnosis of atrial fibrillation.

NOTE Confidence: 0.855000820476191

 $00:20:37.910 \longrightarrow 00:20:40.381$  The primary endpoint was rate of major

NOTE Confidence: 0.855000820476191

00:20:40.381 --> 00:20:42.730 bleeding as defined by the IST criteria,

NOTE Confidence: 0.855000820476191

 $00:20:42.730 \longrightarrow 00:20:44.038$  which is fatal.

NOTE Confidence: 0.855000820476191

 $00:20:44.038 \longrightarrow 00:20:45.782$  Bleeding, bleeding in critical

NOTE Confidence: 0.855000820476191

00:20:45.782 --> 00:20:47.828 organs or bleeding causing more

NOTE Confidence: 0.855000820476191

 $00:20:47.828 \longrightarrow 00:20:50.810$  than two grams of two grams per DL,

NOTE Confidence: 0.855000820476191

00:20:50.810 --> 00:20:53.510 drop in hemoglobin or more than two

NOTE Confidence: 0.855000820476191

 $00:20:53.510 \longrightarrow 00:20:54.950$  units of red blood cell transfusion.

NOTE Confidence: 0.855000820476191

 $00:20:54.950 \longrightarrow 00:20:58.078$  Sorry with the typo.

NOTE Confidence: 0.855000820476191

 $00{:}20{:}58.080 \dashrightarrow 00{:}21{:}02.274$  The results were that patients in

NOTE Confidence: 0.855000820476191

 $00:21:02.274 \longrightarrow 00:21:04.730$  tribulation patients were between

 $00:21:04.730 \longrightarrow 00:21:08.780$  diagnosed between 1980 and 2020.

NOTE Confidence: 0.855000820476191 00:21:08.780 --> 00:21:09.616 For 340, NOTE Confidence: 0.855000820476191

00:21:09.616 --> 00:21:11.288 patients were screened and

NOTE Confidence: 0.855000820476191

 $00:21:11.288 \longrightarrow 00:21:12.960$  89 patients were selected.

NOTE Confidence: 0.855000820476191

 $00:21:12.960 \longrightarrow 00:21:14.880$  For the final analysis.

NOTE Confidence: 0.855000820476191

00:21:14.880 --> 00:21:18.490 Out of those 64 patients were female,

NOTE Confidence: 0.855000820476191

 $00:21:18.490 \longrightarrow 00:21:19.915$  28% patients were deceased at

NOTE Confidence: 0.855000820476191

 $00:21:19.915 \longrightarrow 00:21:21.690$  the time of the data pool.

NOTE Confidence: 0.855000820476191

00:21:21.690 --> 00:21:25.650 Medium Chance Best Score was three and 89,

NOTE Confidence: 0.855000820476191

 $00:21:25.650 \longrightarrow 00:21:29.708$  so close to 90% had a score of two or higher.

NOTE Confidence: 0.855000820476191

00:21:29.710 --> 00:21:31.894 A third of the patients also had

NOTE Confidence: 0.855000820476191

00:21:31.894 --> 00:21:34.130 a quote acute coronary syndrome,

NOTE Confidence: 0.855000820476191

00:21:34.130 --> 00:21:36.110 which the authors lumped together

NOTE Confidence: 0.855000820476191

00:21:36.110 --> 00:21:38.090 STEMI non STEMI and Angela.

NOTE Confidence: 0.853843228181818

 $00:21:40.990 \longrightarrow 00:21:45.310$  In the in the figure over here as we can see,

NOTE Confidence: 0.853843228181818

 $00:21:45.310 \longrightarrow 00:21:47.890$  42.7% of the patients in the

 $00:21:47.890 \longrightarrow 00:21:50.362$  study were on aspirin or they

NOTE Confidence: 0.853843228181818

00:21:50.362 --> 00:21:51.866 were ever prescribed aspirin.

NOTE Confidence: 0.853843228181818

 $00:21:51.870 \longrightarrow 00:21:56.854$  About 13.4% of the patients were ever

NOTE Confidence: 0.853843228181818

 $00:21:56.854 \longrightarrow 00:22:01.100$  prescribed P2Y2 inhibitors and 56.2%

NOTE Confidence: 0.853843228181818

 $00:22:01.100 \longrightarrow 00:22:04.700$  were ever prescribed an anticoagulant.

NOTE Confidence: 0.853843228181818

00:22:04.700 --> 00:22:08.418 The green color represents people

NOTE Confidence: 0.853843228181818

 $00:22:08.418 \longrightarrow 00:22:11.694$  with antiplatelet agents who also had

NOTE Confidence: 0.853843228181818

 $00{:}22{:}11.700 \dashrightarrow 00{:}22{:}14.280$  diagnosis of a cute coronary syndrome.

NOTE Confidence: 0.853843228181818

00:22:14.280 --> 00:22:17.046 About 1/4 of the patients were

NOTE Confidence: 0.853843228181818

 $00{:}22{:}17.046 \to 00{:}22{:}18.890$  never prescribed any anticoagulant

NOTE Confidence: 0.853843228181818

 $00:22:18.968 \longrightarrow 00:22:20.528$  or antiplatelet agent.

NOTE Confidence: 0.894028072222222

 $00:22:23.270 \longrightarrow 00:22:25.974$  In these two graphs we can see the

NOTE Confidence: 0.894028072222222

 $00{:}22{:}25.974 \dashrightarrow 00{:}22{:}28.320$  median time to 1st bleeding event

NOTE Confidence: 0.894028072222222

 $00{:}22{:}28.320 \dashrightarrow 00{:}22{:}30.702$  on the left we have antiplatelet

NOTE Confidence: 0.894028072222222

 $00:22:30.783 \longrightarrow 00:22:33.495$  agents and on the right it's

 $00:22:33.495 \longrightarrow 00:22:36.170$  anticoagulants as we can see in both.

NOTE Confidence: 0.894028072222222

 $00:22:36.170 \longrightarrow 00:22:39.820$  It looked like the the median or

NOTE Confidence: 0.894028072222222

 $00:22:39.820 \longrightarrow 00:22:41.920$  the time taken for median first

NOTE Confidence: 0.894028072222222

 $00:22:41.920 \longrightarrow 00:22:43.950$  meeting was greater than 15 years.

NOTE Confidence: 0.894028072222222

 $00:22:43.950 \longrightarrow 00:22:46.098$  For both of these study groups.

NOTE Confidence: 0.825370145

 $00{:}22{:}49.150 \dashrightarrow 00{:}22{:}52.570$  Just going into the raw numbers,

NOTE Confidence: 0.825370145

00:22:52.570 --> 00:22:55.630 10.2 events per hundred patient years.

NOTE Confidence: 0.825370145

 $00:22:55.630 \longrightarrow 00:22:57.870$  So the rate of major bleeding was

NOTE Confidence: 0.825370145

 $00{:}22{:}57.870 \dashrightarrow 00{:}22{:}59.490$ 10.2 events per hundred patient years.

NOTE Confidence: 0.825370145

 $00:22:59.490 \longrightarrow 00:23:02.430$  For those on platelet agents,

NOTE Confidence: 0.825370145

 $00:23:02.430 \longrightarrow 00:23:04.710$  8.9 events per hundred person years.

NOTE Confidence: 0.825370145

 $00:23:04.710 \longrightarrow 00:23:06.502$  For those on anticoagulants

NOTE Confidence: 0.825370145

00:23:06.502 --> 00:23:07.846 without any statistical

NOTE Confidence: 0.825370145

 $00:23:07.846 \longrightarrow 00:23:09.920$  difference between the two groups.

NOTE Confidence: 0.825370145

 $00:23:09.920 \longrightarrow 00:23:12.458$  Baseline risk of bleeding was one

NOTE Confidence: 0.825370145

 $00:23:12.458 \longrightarrow 00:23:14.660$  event per hundred patient years,

 $00:23:14.660 \longrightarrow 00:23:17.264$  so these were the patients who

NOTE Confidence: 0.825370145

00:23:17.264 --> 00:23:19.000 never got antiplatelet therapy

NOTE Confidence: 0.825370145

 $00:23:19.071 \longrightarrow 00:23:20.850$  or anticoagulant therapy.

NOTE Confidence: 0.825370145

00:23:20.850 --> 00:23:22.218 Concomitant anticoagulant and

NOTE Confidence: 0.825370145

 $00{:}23{:}22.218 \dashrightarrow 00{:}23{:}24.042$  antiplatelet agents resulted in

NOTE Confidence: 0.825370145

00:23:24.042 --> 00:23:26.179 much higher risk of bleeding,

NOTE Confidence: 0.825370145

 $00:23:26.180 \longrightarrow 00:23:28.495$  which was about 28 events

NOTE Confidence: 0.825370145

 $00:23:28.495 \longrightarrow 00:23:30.347$  per hundred patient years.

NOTE Confidence: 0.825370145

 $00:23:30.350 \longrightarrow 00:23:33.157$  The lifetime risk of major beating was

NOTE Confidence: 0.825370145

 $00{:}23{:}33.157 \dashrightarrow 00{:}23{:}35.168$  also calculated by the investigators,

NOTE Confidence: 0.825370145

 $00:23:35.168 \longrightarrow 00:23:38.794$  which was 32% in those who were

NOTE Confidence: 0.825370145

 $00:23:38.800 \longrightarrow 00:23:41.158$  ever prescribed anticoagulants,

NOTE Confidence: 0.825370145

 $00{:}23{:}41.158 --> 00{:}23{:}43.978$  and 25.6% who were never

NOTE Confidence: 0.825370145

00:23:43.978 --> 00:23:44.810 prescribed anticoagulants,

NOTE Confidence: 0.825370145

 $00:23:44.810 \longrightarrow 00:23:46.845$  and there was no statistical

00:23:46.845 --> 00:23:48.880 difference between the two groups.

NOTE Confidence: 0.879458732

00:23:51.020 --> 00:23:52.460 Looking at the stroke risk,

NOTE Confidence: 0.879458732

 $00:23:52.460 \longrightarrow 00:23:54.960$  the incidence of stroke was

NOTE Confidence: 0.879458732

00:23:54.960 --> 00:23:57.650 about 15 point 7\%. And notably,

NOTE Confidence: 0.879458732

 $00:23:57.650 \longrightarrow 00:24:00.065$  11 out of the 14 patients had

NOTE Confidence: 0.879458732

 $00:24:00.065 \longrightarrow 00:24:02.360$  never used and equivalent for more

NOTE Confidence: 0.879458732

00:24:02.360 --> 00:24:04.771 than sorry had not been prescribed

NOTE Confidence: 0.879458732

00:24:04.771 --> 00:24:07.549 anticoagulant for 90 days or more.

NOTE Confidence: 0.879458732

00:24:07.550 --> 00:24:09.464 The median chance best score was

NOTE Confidence: 0.879458732

 $00:24:09.464 \longrightarrow 00:24:11.500$  three in those who had stroke.

NOTE Confidence: 0.709424477

 $00:24:13.740 \longrightarrow 00:24:17.100$  And and also those who are

NOTE Confidence: 0.709424477

 $00:24:17.100 \longrightarrow 00:24:19.340$  not anti quietly therapy.

NOTE Confidence: 0.709424477

 $00:24:19.340 \longrightarrow 00:24:21.266$  One of those patients who had

NOTE Confidence: 0.709424477

 $00:24:21.266 \longrightarrow 00:24:25.510$  a stroke had a fatal stroke.

NOTE Confidence: 0.709424477

 $00:24:25.510 \longrightarrow 00:24:28.075$  So the authors concluded that 50% of

NOTE Confidence: 0.709424477

 $00{:}24{:}28.075 \dashrightarrow 00{:}24{:}31.105$  the patients in their study group

 $00{:}24{:}31.105 \dashrightarrow 00{:}24{:}33.960$  were ever prescribed anticoagulant.

NOTE Confidence: 0.709424477

00:24:33.960 --> 00:24:36.886 There was no benefit in choosing anti

NOTE Confidence: 0.709424477

 $00:24:36.890 \longrightarrow 00:24:39.220$  platelet therapy or anticoagulant therapy

NOTE Confidence: 0.709424477

 $00:24:39.220 \longrightarrow 00:24:42.529$  if bleeding rate is taken into account.

NOTE Confidence: 0.709424477

 $00{:}24{:}42.530 \dashrightarrow 00{:}24{:}44.348$  There was no difference in lifetime

NOTE Confidence: 0.709424477

 $00:24:44.348 \longrightarrow 00:24:46.711$  risk of bleeding in those who were

NOTE Confidence: 0.709424477

 $00:24:46.711 \longrightarrow 00:24:48.167$  prescribed anticoagulants versus those

NOTE Confidence: 0.709424477

 $00:24:48.167 \longrightarrow 00:24:50.750$  who were not prescribed anticoagulants.

NOTE Confidence: 0.709424477

 $00:24:50.750 \longrightarrow 00:24:54.422$  Limited use of anticoagulant and antiplatelet

NOTE Confidence: 0.709424477

00:24:54.422 --> 00:24:57.210 therapy has much higher risk of bleeding,

NOTE Confidence: 0.709424477

 $00{:}24{:}57.210 \dashrightarrow 00{:}25{:}00.970$  which is not surprising and 57% of

NOTE Confidence: 0.709424477

 $00:25:00.970 \longrightarrow 00:25:03.050$  patients had thromboembolic strokes.

NOTE Confidence: 0.709424477

 $00{:}25{:}03.050 \dashrightarrow 00{:}25{:}06.560$  Most of those who were not the rapy.

NOTE Confidence: 0.709424477

 $00:25:06.560 \longrightarrow 00:25:08.366$  So my take away from this study

NOTE Confidence: 0.709424477

 $00:25:08.366 \longrightarrow 00:25:10.970$  was that it was one of the largest

 $00:25:10.970 \longrightarrow 00:25:12.740$  studies looking specifically at this

NOTE Confidence: 0.709424477

 $00:25:12.800 \longrightarrow 00:25:15.062$  population of one will appendices.

NOTE Confidence: 0.709424477

 $00{:}25{:}15.062 \dashrightarrow 00{:}25{:}18.026$  Individuals who also have April fibrillation.

NOTE Confidence: 0.709424477

 $00:25:18.030 \longrightarrow 00:25:19.440$  It was a retrospective study,

NOTE Confidence: 0.709424477

 $00:25:19.440 \longrightarrow 00:25:21.200$  so has its own limitations,

NOTE Confidence: 0.709424477

 $00:25:21.200 \longrightarrow 00:25:24.154$  but it still provides one of the

NOTE Confidence: 0.709424477

 $00:25:24.154 \longrightarrow 00:25:26.919$  largest studies or largest evidence,

NOTE Confidence: 0.709424477

 $00:25:26.920 \longrightarrow 00:25:29.174$  which makes us probably feel a little

NOTE Confidence: 0.709424477

 $00{:}25{:}29.174 {\:{\circ}{\circ}{\circ}}>00{:}25{:}31.041$  bit more comfortable using anticoagulant

NOTE Confidence: 0.709424477

 $00:25:31.041 \longrightarrow 00:25:34.407$  in these patients with appropriate risk.

NOTE Confidence: 0.709424477

 $00:25:34.410 \longrightarrow 00:25:36.780$  Assessment of bleeding.

NOTE Confidence: 0.709424477

 $00{:}25{:}36.780 \dashrightarrow 00{:}25{:}39.964$  Often times antiplatelet agents are

NOTE Confidence: 0.709424477

 $00:25:39.964 \longrightarrow 00:25:41.840$  prescribed over antique violence as

NOTE Confidence: 0.709424477

 $00{:}25{:}41.840 \dashrightarrow 00{:}25{:}44.180$  a way to reduce the risk of bleeding,

NOTE Confidence: 0.709424477

 $00:25:44.180 \longrightarrow 00:25:46.760$  but this study sort of makes

NOTE Confidence: 0.709424477

 $00:25:46.760 \longrightarrow 00:25:48.480$  us doubt that assumption.

 $00:25:48.480 \longrightarrow 00:25:50.580$  Details of 1 milligram disease

NOTE Confidence: 0.709424477

 $00:25:50.580 \longrightarrow 00:25:51.840$  subtypes were missing,

NOTE Confidence: 0.709424477

 $00:25:51.840 \longrightarrow 00:25:53.564$  and as we know,

NOTE Confidence: 0.709424477

 $00:25:53.564 \longrightarrow 00:25:55.854$  the severity of lung disease or

NOTE Confidence: 0.709424477

 $00{:}25{:}55.854 \dashrightarrow 00{:}25{:}58.110$  the type of 1 disease could make a

NOTE Confidence: 0.709424477

 $00:25:58.174 \longrightarrow 00:26:00.084$  difference to the bleeding risk.

NOTE Confidence: 0.709424477

 $00:26:00.084 \longrightarrow 00:26:02.616$  We also have noted recently that

NOTE Confidence: 0.709424477

 $00:26:02.616 \longrightarrow 00:26:04.693$  ristocetin cofactor activity may not

NOTE Confidence: 0.709424477

 $00{:}26{:}04.693 \dashrightarrow 00{:}26{:}06.643$  be appropriate to diagnose patients

NOTE Confidence: 0.709424477

 $00:26:06.643 \longrightarrow 00:26:08.750$  with type 21 blip and disease,

NOTE Confidence: 0.709424477

 $00:26:08.750 \longrightarrow 00:26:10.934$  so some of those individuals were

NOTE Confidence: 0.709424477

 $00:26:10.934 \longrightarrow 00:26:13.456$  typed as one group and disease back

NOTE Confidence: 0.709424477

 $00:26:13.456 \longrightarrow 00:26:15.495$  in the previous years may actually

NOTE Confidence: 0.709424477

 $00:26:15.495 \longrightarrow 00:26:17.800$  not have one web and disease.

NOTE Confidence: 0.709424477

00:26:17.800 --> 00:26:18.195 Similarly,

 $00:26:18.195 \longrightarrow 00:26:20.170$  practice patterns for A-fib management

NOTE Confidence: 0.709424477

 $00{:}26{:}20.170 \dashrightarrow 00{:}26{:}22.967$  as well as the choice of anticoagulation

NOTE Confidence: 0.709424477

 $00:26:22.967 \longrightarrow 00:26:25.648$  has changed quite a bit since 1980s,

NOTE Confidence: 0.709424477

 $00:26:25.650 \longrightarrow 00:26:30.510$  so that would certainly people founder.

NOTE Confidence: 0.709424477

 $00:26:30.510 \longrightarrow 00:26:34.150$  We're gonna move on to the next.

NOTE Confidence: 0.709424477

 $00:26:34.150 \longrightarrow 00:26:38.190$  So this was a man and also an

NOTE Confidence: 0.709424477

 $00:26:38.190 \longrightarrow 00:26:39.200$  oral presentation.

NOTE Confidence: 0.709424477

 $00{:}26{:}39.200 \dashrightarrow 00{:}26{:}44.120$  Presented on behalf of Doctor Connors.

NOTE Confidence: 0.709424477

 $00:26:44.120 \longrightarrow 00:26:46.640$  It was it was a meta analysis of

NOTE Confidence: 0.709424477

 $00:26:46.640 \longrightarrow 00:26:49.145$  direct oral anticoagulants versus low

NOTE Confidence: 0.709424477

 $00:26:49.145 \longrightarrow 00:26:51.746$  molecular weight heparin for treatment

NOTE Confidence: 0.709424477

00:26:51.746 --> 00:26:53.358 of cancer associated thrombus.

NOTE Confidence: 0.883181894

 $00:26:57.490 \longrightarrow 00:27:00.356$  In the in this study, the authors

NOTE Confidence: 0.883181894

 $00:27:00.356 \longrightarrow 00:27:03.794$  looked at 6 randomized control trials.

NOTE Confidence: 0.883181894

 $00:27:03.800 \longrightarrow 00:27:06.935$  The. This was an update to

NOTE Confidence: 0.883181894

 $00:27:06.935 \longrightarrow 00:27:08.107$  the previous meta analysis,

 $00:27:08.110 \longrightarrow 00:27:10.354$  which had four of these trials

NOTE Confidence: 0.883181894

 $00{:}27{:}10.354 \dashrightarrow 00{:}27{:}12.419$  mentioned over here. The top four.

NOTE Confidence: 0.883181894

 $00:27:12.419 \longrightarrow 00:27:14.297$  So the two bottom ones were

NOTE Confidence: 0.883181894

00:27:14.297 --> 00:27:16.049 included in this meta analysis,

NOTE Confidence: 0.883181894

 $00:27:16.050 \longrightarrow 00:27:19.558$  so there were a total of 3690 patients

NOTE Confidence: 0.883181894

00:27:19.558 --> 00:27:23.450 out of which 1850 got direct oral

NOTE Confidence: 0.883181894

 $00:27:23.450 \longrightarrow 00:27:25.288$  anticoagulants and 1840 got local.

NOTE Confidence: 0.735115040909091

 $00:27:28.460 \longrightarrow 00:27:30.574$  The authors looked at the risk of

NOTE Confidence: 0.735115040909091

00:27:30.574 --> 00:27:32.030 recurrent venous from embolism,

NOTE Confidence: 0.735115040909091

 $00:27:32.030 \longrightarrow 00:27:35.315$  and it favored use of

NOTE Confidence: 0.735115040909091

 $00{:}27{:}35.315 \dashrightarrow 00{:}27{:}37.286$  direct oral anticoagulants.

NOTE Confidence: 0.735115040909091

00:27:37.290 --> 00:27:42.740 Incidence rate of recurrent VTE was 5.5%.

NOTE Confidence: 0.735115040909091

 $00{:}27{:}42.740 \dashrightarrow 00{:}27{:}44.448$  In the electrolytic group

NOTE Confidence: 0.735115040909091

 $00:27:44.448 \longrightarrow 00:27:46.892$  and eight point 3% in the low

NOTE Confidence: 0.735115040909091

 $00:27:46.892 \longrightarrow 00:27:47.868$  molecular Weight Heparin group.

 $00:27:49.890 \longrightarrow 00:27:56.870$  With the risk ratio of .67 favoring director.

NOTE Confidence: 0.79593669

 $00{:}27{:}56.870 \dashrightarrow 00{:}27{:}59.372$  Risk of major bleeding was about

NOTE Confidence: 0.79593669

 $00:27:59.372 \longrightarrow 00:28:02.089$  the same in the two groups,

NOTE Confidence: 0.79593669

 $00:28:02.090 \longrightarrow 00:28:04.526$  so the incidence was four point 3%

NOTE Confidence: 0.79593669

 $00:28:04.530 \longrightarrow 00:28:06.075$  in the direct oral anticoagulants

NOTE Confidence: 0.79593669

 $00:28:06.075 \longrightarrow 00:28:08.994$  group and three point 7% in the low

NOTE Confidence: 0.79593669

 $00{:}28{:}08.994 \dashrightarrow 00{:}28{:}10.826$  molecular Weight Heparin group.

NOTE Confidence: 0.79593669

 $00:28:10.830 \longrightarrow 00:28:12.560$  And statistically, there was no

NOTE Confidence: 0.79593669

 $00{:}28{:}12.560 \dashrightarrow 00{:}28{:}14.290$  difference between the two groups.

NOTE Confidence: 0.79593669

 $00:28:14.290 \longrightarrow 00:28:17.565$  The clinically non the clinically

NOTE Confidence: 0.79593669

 $00:28:17.565 \longrightarrow 00:28:20.185$  relevant non major bleeding.

NOTE Confidence: 0.79593669

00:28:20.190 --> 00:28:22.478 Favored use of heparin,

NOTE Confidence: 0.79593669

 $00{:}28{:}22.478 \dashrightarrow 00{:}28{:}27.610$  so it was the incidence was 9.5%

NOTE Confidence: 0.79593669

 $00:28:27.610 \longrightarrow 00:28:30.550$  of this bleeding in the direct or

NOTE Confidence: 0.79593669

 $00:28:30.550 \longrightarrow 00:28:33.192$  anticoagulant group and five point 7% in

NOTE Confidence: 0.79593669

 $00:28:33.192 \longrightarrow 00:28:35.244$  the low molecular weight heparin group.

 $00:28:35.250 \longrightarrow 00:28:38.211$  The risk was 1.6 and statistically favoring

NOTE Confidence: 0.79593669

 $00:28:38.211 \longrightarrow 00:28:40.479$  low molecular weight heparin group.

NOTE Confidence: 0.777690424285714

 $00:28:42.780 \longrightarrow 00:28:43.980$  All 'cause mortality was

NOTE Confidence: 0.777690424285714

 $00:28:43.980 \longrightarrow 00:28:47.440$  similar in the two groups.

NOTE Confidence: 0.777690424285714

00:28:47.440 --> 00:28:49.894 The conclusions drawn from this study

NOTE Confidence: 0.777690424285714

 $00:28:49.894 \longrightarrow 00:28:52.784$  of from this paralysis for that to

NOTE Confidence: 0.777690424285714

00:28:52.784 --> 00:28:55.154 act significantly reduce the risk of

NOTE Confidence: 0.777690424285714

00:28:55.154 --> 00:28:57.255 recurrent VTE compared with heparin,

NOTE Confidence: 0.777690424285714

 $00:28:57.255 \longrightarrow 00:28:58.680$  without increasing the

NOTE Confidence: 0.777690424285714

 $00:28:58.680 \longrightarrow 00:29:00.580$  risk of major bleeding.

NOTE Confidence: 0.777690424285714

 $00:29:00.580 \longrightarrow 00:29:02.610$  However, use of direct oral

NOTE Confidence: 0.777690424285714

 $00:29:02.610 \longrightarrow 00:29:03.828$  anticoagulants was associated

NOTE Confidence: 0.777690424285714

 $00{:}29{:}03.828 \to 00{:}29{:}05.832$  with increased risk of clinically

NOTE Confidence: 0.777690424285714

00:29:05.832 --> 00:29:07.344 relevant non major bleeding.

NOTE Confidence: 0.89843117

 $00:29:10.350 \longrightarrow 00:29:13.906$  Finally, the last oral study that I

00:29:13.906 --> 00:29:17.575 would like to present was about impact

NOTE Confidence: 0.89843117

00:29:17.575 --> 00:29:20.185 of race and ethnicity on cancer,

NOTE Confidence: 0.89843117

 $00:29:20.190 \longrightarrow 00:29:21.894$  associated thrombosis among

NOTE Confidence: 0.89843117

 $00:29:21.894 \longrightarrow 00:29:24.166$  underserved patients with cancer.

NOTE Confidence: 0.89843117

 $00:29:24.170 \longrightarrow 00:29:26.060$  This was an oral presentation

NOTE Confidence: 0.89843117

 $00{:}29{:}26.060 \dashrightarrow 00{:}29{:}27.572$  presented by Doctor Decosta.

NOTE Confidence: 0.78882363875

 $00:29:30.410 \longrightarrow 00:29:32.990$  In this study, a retrospective

NOTE Confidence: 0.78882363875

 $00:29:32.990 \longrightarrow 00:29:38.190$  analysis was done and the investigators

NOTE Confidence: 0.78882363875

 $00:29:38.190 \longrightarrow 00:29:40.616$  identified 9353 patients.

NOTE Confidence: 0.78882363875

 $00:29:40.616 \longrightarrow 00:29:45.370$  After those, 49.3% were Hispanics,

NOTE Confidence: 0.78882363875

 $00:29:45.370 \longrightarrow 00:29:48.170 \ 27.6\%$  were non Hispanic blacks,

NOTE Confidence: 0.78882363875

 $00:29:48.170 \longrightarrow 00:29:49.542$  50.5% were non Hispanic

NOTE Confidence: 0.78882363875

 $00:29:49.542 \longrightarrow 00:29:50.950$  whites and 7.6% were passed.

NOTE Confidence: 0.83399587

 $00:29:52.990 \longrightarrow 00:29:56.600$  Islanders interestingly,

NOTE Confidence: 0.83399587

 $00:29:56.600 \longrightarrow 00:30:00.760$  74.7% were uninsured, and.

NOTE Confidence: 0.83399587

 $00:30:00.760 \longrightarrow 00:30:02.950$  The reason for this was the

 $00:30:02.950 \longrightarrow 00:30:05.161$  study was primarily focused on a

NOTE Confidence: 0.83399587

00:30:05.161 --> 00:30:06.866 safety net hospital in Houston,

NOTE Confidence: 0.83399587

 $00:30:06.870 \longrightarrow 00:30:11.076$  which has this demographic of population.

NOTE Confidence: 0.83399587

 $00:30:11.080 \longrightarrow 00:30:13.335$  The incidence of cancer associated

NOTE Confidence: 0.83399587

00:30:13.335 --> 00:30:15.139 thrombosis was seven point,

NOTE Confidence: 0.83399587

 $00:30:15.140 \longrightarrow 00:30:18.912$  3% at six months and 9.6% at 12 months.

NOTE Confidence: 0.83399587

 $00:30:18.912 \longrightarrow 00:30:20.604$  Of previous studies which

NOTE Confidence: 0.83399587

 $00:30:20.604 \longrightarrow 00:30:22.130$  have looked at this,

NOTE Confidence: 0.83399587

00:30:22.130 --> 00:30:24.848 which were primarily focused

NOTE Confidence: 0.83399587

00:30:24.848 --> 00:30:26.132 on Caucasian population,

NOTE Confidence: 0.83399587

00:30:26.132 --> 00:30:29.609 the risk at 12 months is much lower,

NOTE Confidence: 0.83399587

 $00:30:29.610 \longrightarrow 00:30:30.336$  about 2.3%.

NOTE Confidence: 0.83399587

 $00:30:30.336 \longrightarrow 00:30:32.514$  So something to keep in mind.

NOTE Confidence: 0.823889203333333

 $00{:}30{:}35.450 --> 00{:}30{:}36.536$  On the graph on the left,

NOTE Confidence: 0.823889203333333

 $00:30:36.540 \longrightarrow 00:30:38.970$  we can see, as expected,

00:30:38.970 --> 00:30:42.473 pancreatic upper GI where the OR

NOTE Confidence: 0.823889203333333

00:30:42.473 --> 00:30:44.471 patients with pancreatic or upper GI

NOTE Confidence: 0.823889203333333

 $00:30:44.471 \longrightarrow 00:30:46.762$  cancers were the ones with highest

NOTE Confidence: 0.823889203333333

 $00:30:46.762 \longrightarrow 00:30:48.807$  risk of cancer associated thrombosis.

NOTE Confidence: 0.823889203333333

 $00:30:48.810 \longrightarrow 00:30:50.628$  The interesting part was the top.

NOTE Confidence: 0.823889203333333

 $00:30:50.630 \longrightarrow 00:30:53.622$  Sorry, the bottom right figure where

NOTE Confidence: 0.823889203333333

 $00:30:53.622 \longrightarrow 00:30:57.060$  we can see that non Hispanic black

NOTE Confidence: 0.823889203333333

00:30:57.060 --> 00:30:59.510 population and non Hispanic white

NOTE Confidence: 0.823889203333333

 $00:30:59.510 \longrightarrow 00:31:02.095$  population seem to have similar

NOTE Confidence: 0.823889203333333

 $00:31:02.095 \longrightarrow 00:31:04.139$  cumulative incidence of cancer

NOTE Confidence: 0.823889203333333

 $00:31:04.139 \longrightarrow 00:31:06.469$  associated thrombosis at 12 months.

NOTE Confidence: 0.823889203333333

00:31:06.470 --> 00:31:09.990 While Hispanic population and Asian

NOTE Confidence: 0.823889203333333

00:31:09.990 --> 00:31:12.790 population seem to have a lower risk,

NOTE Confidence: 0.823889203333333

 $00:31:12.790 \longrightarrow 00:31:15.592$  so this contradicts what we have

NOTE Confidence: 0.823889203333333

00:31:15.592 --> 00:31:17.843 traditionally known about thrombosis,

NOTE Confidence: 0.823889203333333

 $00:31:17.843 \longrightarrow 00:31:22.650$  which is reported to be higher in

 $00:31:22.650 \longrightarrow 00:31:25.146$  individuals with black ancestry.

NOTE Confidence: 0.823889203333333

 $00:31:25.150 \longrightarrow 00:31:26.622$  And Hispanic population have

NOTE Confidence: 0.823889203333333

 $00:31:26.622 \longrightarrow 00:31:28.462$  been traditionally known to have

NOTE Confidence: 0.823889203333333

 $00:31:28.462 \longrightarrow 00:31:30.349$  a lower risk of thrombosis,

NOTE Confidence: 0.823889203333333

 $00:31:30.350 \longrightarrow 00:31:33.094$  so that is congruent with that knowledge.

NOTE Confidence: 0.693077274285714

 $00:31:35.700 \longrightarrow 00:31:37.840$  When the authors did the

NOTE Confidence: 0.693077274285714

 $00:31:37.840 \longrightarrow 00:31:38.696$  multivariable analysis,

NOTE Confidence: 0.693077274285714

 $00{:}31{:}38.700 \dashrightarrow 00{:}31{:}41.790$  they again found Hispanic race

NOTE Confidence: 0.693077274285714

 $00:31:41.790 \longrightarrow 00:31:45.632$  and Asian race were to have an

NOTE Confidence: 0.693077274285714

00:31:45.632 --> 00:31:47.888 impact on the risk of getting

NOTE Confidence: 0.693077274285714

 $00:31:47.888 \longrightarrow 00:31:49.460$  cancer associated thrombosis.

NOTE Confidence: 0.89390926625

00:31:52.360 --> 00:31:53.848 The conclusions drawn were

NOTE Confidence: 0.89390926625

 $00{:}31{:}53.848 \dashrightarrow 00{:}31{:}55.336$  higher incidence of cancer.

NOTE Confidence: 0.89390926625

 $00:31:55.340 \longrightarrow 00:31:57.488$  Associated thrombosis was noted

NOTE Confidence: 0.89390926625

 $00:31:57.488 \longrightarrow 00:32:00.173$  compared to the European registries.

 $00:32:00.180 \longrightarrow 00:32:03.040$  Non Hispanic blacks had similar

NOTE Confidence: 0.89390926625

00:32:03.040 --> 00:32:05.328 incidence of cancer associated

NOTE Confidence: 0.89390926625

 $00:32:05.328 \longrightarrow 00:32:07.790$  thrombosis to non Hispanic whites.

NOTE Confidence: 0.89390926625

 $00:32:07.790 \longrightarrow 00:32:09.415$  Hispanic and Asian Pacific Islanders

NOTE Confidence: 0.89390926625

 $00:32:09.415 \dashrightarrow 00:32:11.891$  had a lower risk of cancer associated

NOTE Confidence: 0.89390926625

00:32:11.891 --> 00:32:13.866 thrombosis compared to non Hispanic

NOTE Confidence: 0.89390926625

 $00:32:13.866 \longrightarrow 00:32:16.619$  whites and non Hispanic black population.

NOTE Confidence: 0.89390926625

00:32:16.620 --> 00:32:19.332 And treatment with chemotherapy

NOTE Confidence: 0.89390926625

 $00{:}32{:}19.332 \dashrightarrow 00{:}32{:}21.366$  or immunotherapy associated.

NOTE Confidence: 0.89390926625

 $00:32:21.370 \longrightarrow 00:32:24.408$  It would help you or immunotherapy was

NOTE Confidence: 0.89390926625

 $00:32:24.408 \longrightarrow 00:32:27.068$  associated with increased risk of thrombosis.

NOTE Confidence: 0.89390926625

 $00:32:27.070 \longrightarrow 00:32:29.518$  That concludes my talk.

NOTE Confidence: 0.386202125

 $00:32:32.830 \longrightarrow 00:32:33.510$  You said that she.

NOTE Confidence: 0.679631074

 $00:32:48.010 \longrightarrow 00:32:50.560$  I'm just gonna start my groups.

NOTE Confidence: 0.812904183333333

 $00:32:53.260 \longrightarrow 00:32:54.079$  The right one.

NOTE Confidence: 0.881443083333333

 $00:33:01.790 \longrightarrow 00:33:04.580$  Hopefully this is the right one.

00:33:04.580 --> 00:33:10.082 Alright, I'm so let me just start moving.

NOTE Confidence: 0.881443083333333

 $00:33:10.082 \longrightarrow 00:33:15.350$  OK so hello buddy and Alex Pine and I

NOTE Confidence: 0.881443083333333

00:33:15.350 --> 00:33:18.264 wanted to briefly briefly everybody

NOTE Confidence: 0.881443083333333

 $00:33:18.264 \longrightarrow 00:33:21.254$  on 3 potentially 4 abstracts.

NOTE Confidence: 0.881443083333333

 $00:33:21.260 \longrightarrow 00:33:24.830$  If we have time and.

NOTE Confidence: 0.881443083333333

 $00:33:24.830 \longrightarrow 00:33:27.644$  The first three are sort of have

NOTE Confidence: 0.881443083333333

 $00:33:27.644 \longrightarrow 00:33:29.943$  this ITP flavor and a couple

NOTE Confidence: 0.881443083333333

 $00:33:29.943 \longrightarrow 00:33:31.992$  of them has kovid color,

NOTE Confidence: 0.881443083333333

 $00:33:31.992 \longrightarrow 00:33:35.639$  so the first one is actually the

NOTE Confidence: 0.881443083333333

00:33:35.639 --> 00:33:39.315 first two kind of have the same motif,

NOTE Confidence: 0.881443083333333

 $00:33:39.315 \longrightarrow 00:33:42.780$  and they both studies actually looked into.

NOTE Confidence: 0.661312154545454

00:33:44.820 --> 00:33:47.170 What happens to patients with

NOTE Confidence: 0.661312154545454

 $00{:}33{:}47.170 \dashrightarrow 00{:}33{:}48.580$  persisting thermoset opinion

NOTE Confidence: 0.661312154545454

 $00:33:48.580 \longrightarrow 00:33:51.514$  when they receive COVID that

NOTE Confidence: 0.661312154545454

 $00:33:51.514 \longrightarrow 00:33:55.816$  vaccines and so the first study?

 $00:33:55.820 \longrightarrow 00:33:58.800$  Which was out of Cornell.

NOTE Confidence: 0.661312154545454

00:33:58.800 --> 00:34:00.976 Essentially they were operating

NOTE Confidence: 0.661312154545454

 $00:34:00.976 \longrightarrow 00:34:03.696$  on the premise that play,

NOTE Confidence: 0.661312154545454

00:34:03.700 --> 00:34:06.668 let's play play quite a bit of

NOTE Confidence: 0.661312154545454

00:34:06.668 --> 00:34:09.050 a role in immune immune system.

NOTE Confidence: 0.757131832

 $00:34:11.130 \longrightarrow 00:34:14.600$  And also in their cohort,

NOTE Confidence: 0.757131832

00:34:14.600 --> 00:34:17.228 different cohort but in their center

NOTE Confidence: 0.757131832

00:34:17.230 --> 00:34:20.614 thrust opinion happened in 27% of

NOTE Confidence: 0.757131832

 $00:34:20.614 \longrightarrow 00:34:24.040$  patients with just COVID-19, so they.

NOTE Confidence: 0.757131832

00:34:24.040 --> 00:34:24.952 Actually postulated,

NOTE Confidence: 0.757131832

 $00:34:24.952 \longrightarrow 00:34:29.760$  or at least developed the concept further.

NOTE Confidence: 0.757131832

 $00:34:29.760 \longrightarrow 00:34:31.743$  That in COVID-19,

NOTE Confidence: 0.757131832

 $00:34:31.743 \longrightarrow 00:34:34.795$  especially severe COVID-19, there's a a.

NOTE Confidence: 0.757131832

 $00{:}34{:}34.795 \dashrightarrow 00{:}34{:}36.925$  This is normal glycosylation of the

NOTE Confidence: 0.757131832

00:34:36.925 --> 00:34:39.624 spike protein antibodies is is a

NOTE Confidence: 0.757131832

 $00:34:39.624 \longrightarrow 00:34:41.440$  prothrombotic signal for platelets,

 $00:34:41.440 \longrightarrow 00:34:44.010$  especially through.

NOTE Confidence: 0.608086705636364

 $00:34:46.360 \longrightarrow 00:34:49.320$  Direct receptor these complexes of

NOTE Confidence: 0.608086705636364

 $00:34:49.320 \longrightarrow 00:34:52.650$  IgG and virus operate through the

NOTE Confidence: 0.608086705636364

 $00:34:52.650 \longrightarrow 00:34:59.100$  Cy come receptor and So what they?

NOTE Confidence: 0.608086705636364

 $00:34:59.100 \longrightarrow 00:35:02.444$  They also. There was also a

NOTE Confidence: 0.608086705636364

 $00:35:02.444 \longrightarrow 00:35:03.588$  clinical sort of observation.

NOTE Confidence: 0.608086705636364

 $00:35:03.590 \longrightarrow 00:35:07.064$  Then there were some reports of ITP in post

NOTE Confidence: 0.608086705636364

 $00:35:07.064 \longrightarrow 00:35:10.230$  vaccine settings in a single institution.

NOTE Confidence: 0.608086705636364

 $00:35:10.230 \longrightarrow 00:35:11.298$  I believe I'm GH.

NOTE Confidence: 0.608086705636364

00:35:11.298 --> 00:35:13.236 There was a 52 patients and there

NOTE Confidence: 0.608086705636364

 $00{:}35{:}13.236 \dashrightarrow 00{:}35{:}15.605$  were 12% of ITP dissertations.

NOTE Confidence: 0.608086705636364

00:35:15.605 --> 00:35:18.630 So they asked the question.

NOTE Confidence: 0.608086705636364

 $00{:}35{:}18.630 \dashrightarrow 00{:}35{:}20.886$  Several questions is in fact what is the

NOTE Confidence: 0.608086705636364

00:35:20.886 --> 00:35:23.027 effect of vaccines on platelet count,

NOTE Confidence: 0.608086705636364

00:35:23.030 --> 00:35:26.238 risk of bleeding events?

00:35:26.240 --> 00:35:29.720 What kind of what kind of effect

NOTE Confidence: 0.608086705636364

 $00{:}35{:}29.720 \dashrightarrow 00{:}35{:}31.460$  is in repeat dosing of vaccines?

NOTE Confidence: 0.608086705636364

 $00:35:31.460 \longrightarrow 00:35:32.970$  You know the second vaccine

NOTE Confidence: 0.608086705636364

 $00:35:32.970 \longrightarrow 00:35:34.178$  booster and so on,

NOTE Confidence: 0.608086705636364

 $00:35:34.180 \longrightarrow 00:35:35.795$  and what the risks of

NOTE Confidence: 0.608086705636364

00:35:35.795 --> 00:35:36.764 the actual exacerbation.

NOTE Confidence: 0.608086705636364

 $00:35:36.770 \longrightarrow 00:35:38.996$  What sort of plays a role in

NOTE Confidence: 0.608086705636364

 $00:35:39.000 \longrightarrow 00:35:43.790$  exacerbating so their cohort was

NOTE Confidence: 0.608086705636364

 $00:35:43.790 \longrightarrow 00:35:46.133$  retrospective from patients 10

NOTE Confidence: 0.608086705636364

 $00:35:46.133 \longrightarrow 00:35:47.516$  university affiliated patients

NOTE Confidence: 0.608086705636364

 $00:35:47.516 \longrightarrow 00:35:50.300$  that we actually also participated.

NOTE Confidence: 0.608086705636364

 $00:35:50.300 \longrightarrow 00:35:54.040$  So it's 117 patients.

NOTE Confidence: 0.608086705636364

 $00:35:54.040 \longrightarrow 00:35:57.055$  With a pretty long history of ITP 12 years.

NOTE Confidence: 0.608086705636364

 $00:35:57.060 \longrightarrow 00:35:59.670$  And of course they were.

NOTE Confidence: 0.608086705636364

 $00:35:59.670 \longrightarrow 00:36:01.420$  You know at the time where the

NOTE Confidence: 0.608086705636364

 $00:36:01.420 \longrightarrow 00:36:02.949$  study was sort of conducted,

 $00:36:02.950 \longrightarrow 00:36:03.618$  yeah,

NOTE Confidence: 0.608086705636364

 $00:36:03.618 \longrightarrow 00:36:06.958$  the patients were getting vaccinated

NOTE Confidence: 0.608086705636364

 $00:36:06.958 \longrightarrow 00:36:08.962$  were older patients.

NOTE Confidence: 0.608086705636364

 $00:36:08.970 \longrightarrow 00:36:12.760$  So breakdown of what therapies

NOTE Confidence: 0.608086705636364

 $00:36:12.760 \longrightarrow 00:36:14.276$  were administered,

NOTE Confidence: 0.608086705636364

 $00:36:14.280 \longrightarrow 00:36:16.752$  either on therapy or off therapy

NOTE Confidence: 0.608086705636364

 $00:36:16.752 \longrightarrow 00:36:18.400$  or prior prior therapy.

NOTE Confidence: 0.608086705636364

00:36:18.400 --> 00:36:18.890 So

NOTE Confidence: 0.438028055

 $00:36:20.940 \longrightarrow 00:36:24.600$  TPO, RA's and we talk smack word

NOTE Confidence: 0.438028055

 $00:36:24.600 \longrightarrow 00:36:26.620$  bulk of the of the treatments,

NOTE Confidence: 0.438028055

 $00:36:26.620 \longrightarrow 00:36:28.864$  and colectomy was also in 21% of

NOTE Confidence: 0.438028055

 $00{:}36{:}28.864 \dashrightarrow 00{:}36{:}31.896$  patients and at the time of the study 40

NOTE Confidence: 0.438028055

 $00{:}36{:}31.896 \dashrightarrow 00{:}36{:}34.514$  patients were off treatment and 16 of

NOTE Confidence: 0.438028055

 $00:36:34.514 \longrightarrow 00:36:37.319$  those were with normal platelet count.

NOTE Confidence: 0.438028055

 $00:36:37.320 \longrightarrow 00:36:38.830$  This is a breakdown of.

 $00:36:38.830 \longrightarrow 00:36:42.898$  See the exchange that we received.

NOTE Confidence: 0.438028055

 $00:36:42.900 \longrightarrow 00:36:45.015$  Simon, of course majority and

NOTE Confidence: 0.438028055

00:36:45.015 --> 00:36:47.130 then definitions how they sort

NOTE Confidence: 0.438028055

 $00:36:47.210 \longrightarrow 00:36:49.400$  of were assessing the response.

NOTE Confidence: 0.438028055

 $00:36:49.400 \longrightarrow 00:36:51.302$  So stable platelet count was plus

NOTE Confidence: 0.438028055

 $00:36:51.302 \longrightarrow 00:36:53.460$  minus 20% of the pre vaccine level,

NOTE Confidence: 0.438028055

 $00:36:53.460 \longrightarrow 00:37:01.090$  and ITP exasperation was defined as either.

NOTE Confidence: 0.438028055

 $00:37:01.090 \longrightarrow 00:37:03.526$  Much higher than 50% reduction of

NOTE Confidence: 0.438028055

 $00:37:03.526 \longrightarrow 00:37:07.702$  platelet count or 20% reduction if you.

NOTE Confidence: 0.438028055

 $00:37:07.702 \longrightarrow 00:37:10.198$  If the if the native platelets

NOTE Confidence: 0.438028055

 $00:37:10.198 \longrightarrow 00:37:13.159$  below 30,000 or the use of rescue

NOTE Confidence: 0.438028055

 $00:37:13.159 \longrightarrow 00:37:15.604$  treatment and So what?

NOTE Confidence: 0.438028055

 $00:37:15.604 \longrightarrow 00:37:18.181$  They found that there's a

NOTE Confidence: 0.438028055

 $00{:}37{:}18.181 \dashrightarrow 00{:}37{:}19.809$  three groups of patients.

NOTE Confidence: 0.438028055

 $00:37:19.810 \longrightarrow 00:37:23.209$  So in about.

NOTE Confidence: 0.438028055

 $00:37:23.210 \longrightarrow 00:37:26.586$  I would say third or close to third

00:37:26.586 --> 00:37:28.852 quarter places actually increased

NOTE Confidence: 0.438028055

 $00:37:28.852 \longrightarrow 00:37:31.308$  platelet count increased in.

NOTE Confidence: 0.438028055

 $00:37:31.310 \longrightarrow 00:37:33.928$  Happened in middle part like a 40%.

NOTE Confidence: 0.438028055

 $00:37:33.930 \longrightarrow 00:37:36.266$  Nothing happened and in

NOTE Confidence: 0.438028055

 $00:37:36.266 \longrightarrow 00:37:39.174$  about third so to speak,

NOTE Confidence: 0.438028055

 $00:37:39.174 \longrightarrow 00:37:41.463$  it's actually decreased and this is

NOTE Confidence: 0.438028055

 $00:37:41.463 \longrightarrow 00:37:42.730$  the first Test of the second dose.

NOTE Confidence: 0.438028055

 $00:37:42.730 \longrightarrow 00:37:46.042$  Sort of similar and they pointed out

NOTE Confidence: 0.438028055

 $00:37:46.042 \longrightarrow 00:37:48.810$  that it may not be the same patience.

NOTE Confidence: 0.438028055

 $00:37:48.810 \longrightarrow 00:37:53.082$  So they broke it down into

NOTE Confidence: 0.438028055

 $00{:}37{:}53.082 \dashrightarrow 00{:}37{:}55.930$  into into several groups.

NOTE Confidence: 0.438028055

00:37:55.930 --> 00:37:56.478 Specifically,

NOTE Confidence: 0.438028055

 $00{:}37{:}56.478 {\:{\mbox{--}}\!\!>}\ 00{:}37{:}59.649$  so they assessed all patients in

NOTE Confidence: 0.438028055

 $00:37:59.649 \longrightarrow 00:38:02.223$  terms of incidence of post vaccine

NOTE Confidence: 0.438028055

00:38:02.223 --> 00:38:04.170 ITP reservation splenectomy patients,

 $00:38:04.170 \longrightarrow 00:38:06.417$  patients with me in patients with very

NOTE Confidence: 0.438028055

 $00:38:06.417 \longrightarrow 00:38:08.470$  heavily pretreated with five more than five,

NOTE Confidence: 0.438028055

 $00:38:08.470 \longrightarrow 00:38:10.820$  five, and more prior therapies,

NOTE Confidence: 0.438028055

 $00:38:10.820 \longrightarrow 00:38:11.516$  and so,

NOTE Confidence: 0.438028055

00:38:11.516 --> 00:38:12.212 interestingly enough,

NOTE Confidence: 0.438028055

00:38:12.212 --> 00:38:14.750 if you look at this point to me,

NOTE Confidence: 0.438028055

 $00:38:14.750 \longrightarrow 00:38:18.746$  it's they they saw a significant

NOTE Confidence: 0.438028055

00:38:18.750 --> 00:38:22.418 significantly higher incidence of.

NOTE Confidence: 0.534652041

 $00:38:24.850 \longrightarrow 00:38:28.743$  I've played loads of ITP reservations

NOTE Confidence: 0.534652041

 $00:38:28.743 \longrightarrow 00:38:31.494$  as well as patients with who are

NOTE Confidence: 0.534652041

 $00:38:31.494 \longrightarrow 00:38:33.339$  very, very heavily pretreated.

NOTE Confidence: 0.720235435454545

 $00:38:35.780 \longrightarrow 00:38:37.628$  Now when the when the post vaccine

NOTE Confidence: 0.720235435454545

 $00:38:37.628 \longrightarrow 00:38:39.120$  rescue therapy was administered,

NOTE Confidence: 0.720235435454545

 $00:38:39.120 \longrightarrow 00:38:41.276$  it was it was effective was administered

NOTE Confidence: 0.720235435454545

 $00:38:41.276 \longrightarrow 00:38:44.615$  about 30% of patients and they they

NOTE Confidence: 0.720235435454545

 $00:38:44.615 \longrightarrow 00:38:47.330$  reported no serious bleeding events.

 $00:38:47.330 \longrightarrow 00:38:49.510$  From a patient with.

NOTE Confidence: 0.75235606875

 $00:38:51.620 \longrightarrow 00:38:54.404$  Patients with stable or

NOTE Confidence: 0.75235606875

 $00:38:54.404 \longrightarrow 00:38:57.188$  increased platelet count after.

NOTE Confidence: 0.75235606875

 $00:38:57.190 \longrightarrow 00:38:58.354$  The first vaccine,

NOTE Confidence: 0.75235606875

 $00:38:58.354 \longrightarrow 00:39:00.682$  so that was those 43 patients,

NOTE Confidence: 0.75235606875

00:39:00.690 --> 00:39:05.186 and after those number 26 patients have

NOTE Confidence: 0.75235606875

 $00:39:05.186 \longrightarrow 00:39:08.610$  platelet count, decreased below 30.

NOTE Confidence: 0.75235606875

 $00:39:08.610 \longrightarrow 00:39:10.890$  So factors that are found not

NOTE Confidence: 0.75235606875

 $00:39{:}10.890 \dashrightarrow 00{:}39{:}13.045$  predictive of estimation were age,

NOTE Confidence: 0.75235606875

 $00:39:13.045 \longrightarrow 00:39:14.905$  gender, vaccine type and

NOTE Confidence: 0.75235606875

00:39:14.910 --> 00:39:18.250 presence of autoimmune disease.

NOTE Confidence: 0.75235606875

 $00:39:18.250 \dashrightarrow 00:39:20.620$  They actually had access to two

NOTE Confidence: 0.75235606875

 $00:39:20.620 \longrightarrow 00:39:22.949$  surveys and they sort of tried.

NOTE Confidence: 0.75235606875

 $00:39:22.950 \longrightarrow 00:39:26.160$  They tried to validate their findings

NOTE Confidence: 0.75235606875

 $00:39:26.160 \longrightarrow 00:39:30.584$  and they they looked into these surveys.

 $00:39:30.590 \longrightarrow 00:39:32.334$  These are two surveys.

NOTE Confidence: 0.75235606875

 $00:39:32.334 \longrightarrow 00:39:34.750$  One is from a base in the United States,

NOTE Confidence: 0.75235606875

 $00:39:34.750 \longrightarrow 00:39:36.310$  one is from UK especially.

NOTE Confidence: 0.75235606875

 $00:39:36.310 \longrightarrow 00:39:37.638$  They track the track.

NOTE Confidence: 0.76842572

 $00:39:39.680 \longrightarrow 00:39:43.678$  Similar data. And so they found

NOTE Confidence: 0.76842572

00:39:43.678 --> 00:39:46.752 that in indeed in patients who

NOTE Confidence: 0.76842572

00:39:46.752 --> 00:39:50.280 had platelet count decreased.

NOTE Confidence: 0.76842572

 $00:39:50.280 \longrightarrow 00:39:51.660$  There were a lot more

NOTE Confidence: 0.76842572

 $00{:}39{:}51.660 \dashrightarrow 00{:}39{:}54.470$  people with splenectomy.

NOTE Confidence: 0.76842572

 $00:39:54.470 \longrightarrow 00:39:57.320$  And then when they looked

NOTE Confidence: 0.76842572

00:39:57.320 --> 00:39:59.600 into your CTP cohort.

NOTE Confidence: 0.76842572

 $00:39:59.600 \longrightarrow 00:40:02.685$  Also survey based they found

NOTE Confidence: 0.76842572

 $00{:}40{:}02.685 \dashrightarrow 00{:}40{:}05.770$  sort of breakdown of similar.

NOTE Confidence: 0.76842572

 $00:40:05.770 \longrightarrow 00:40:07.406$  Similar breakdown of decreased

NOTE Confidence: 0.76842572

 $00:40:07.406 \longrightarrow 00:40:09.860$  platelets about the third of patients

NOTE Confidence: 0.76842572

 $00{:}40{:}09.860 \dashrightarrow 00{:}40{:}11.284$  indeed had ITP assassinations,

 $00:40:11.284 \longrightarrow 00:40:13.420$  and they also in the same

NOTE Confidence: 0.76842572

 $00{:}40{:}13.492 \dashrightarrow 00{:}40{:}15.340$  survey found this book to me.

NOTE Confidence: 0.76842572

 $00:40:15.340 \longrightarrow 00:40:17.209$  Was the shade with a 2 fold

NOTE Confidence: 0.76842572

00:40:17.209 --> 00:40:18.748 increase of risk of decreasing

NOTE Confidence: 0.76842572

 $00:40:18.748 \longrightarrow 00:40:20.911$  in platelets by more than 50%.

NOTE Confidence: 0.76842572

 $00:40:20.911 \longrightarrow 00:40:23.266$  So they acknowledged the speed

NOTE Confidence: 0.76842572

00:40:23.266 --> 00:40:25.820 limitaciones that there's no lack of.

NOTE Confidence: 0.76842572

 $00:40:25.820 \longrightarrow 00:40:28.580$  There's there's no unvaccinated

NOTE Confidence: 0.76842572

 $00:40:28.580 \longrightarrow 00:40:30.650$  control group 2.

NOTE Confidence: 0.76842572

 $00:40:30.650 \longrightarrow 00:40:31.316$  To compare,

NOTE Confidence: 0.76842572

 $00{:}40{:}31.316 \dashrightarrow 00{:}40{:}32.981$  there was a possible selection

NOTE Confidence: 0.76842572

 $00:40:32.981 \longrightarrow 00:40:34.588$  bias because they were following

NOTE Confidence: 0.76842572

 $00:40:34.588 \longrightarrow 00:40:36.492$  a lot closer to the people who

NOTE Confidence: 0.76842572

00:40:36.492 --> 00:40:40.198 are had refractory GP already.

NOTE Confidence: 0.76842572

 $00:40:40.200 \longrightarrow 00:40:41.710$  They were they didn't account

00:40:41.710 --> 00:40:43.220 for titration for concurrent sort

NOTE Confidence: 0.76842572

 $00:40:43.270 \longrightarrow 00:40:44.908$  of interventions in terms of how

NOTE Confidence: 0.76842572

 $00:40:44.908 \longrightarrow 00:40:46.340$  they affect the platelet count,

NOTE Confidence: 0.76842572

 $00:40:46.340 \longrightarrow 00:40:48.194$  including the titrations of the of

NOTE Confidence: 0.76842572

 $00:40:48.194 \longrightarrow 00:40:49.831$  the medications of the treatment

NOTE Confidence: 0.76842572

 $00:40:49.831 \longrightarrow 00:40:51.877$  that the patients were already on,

NOTE Confidence: 0.76842572

 $00:40:51.880 \longrightarrow 00:40:54.112$  and the technology that the possible

NOTE Confidence: 0.76842572

 $00:40:54.112 \longrightarrow 00:40:56.030$  overlap between cohort might effect

NOTE Confidence: 0.76842572

 $00{:}40{:}56.030 \dashrightarrow 00{:}40{:}57.890$  might affect the platelet count,

NOTE Confidence: 0.76842572

 $00:40:57.890 \longrightarrow 00:41:00.248$  but overall they felt that the

NOTE Confidence: 0.76842572

 $00{:}41{:}00.248 \dashrightarrow 00{:}41{:}02.799$  major point was that there was

NOTE Confidence: 0.76842572

 $00:41:02.799 \longrightarrow 00:41:05.273$  no bleeding in refractory TCP

NOTE Confidence: 0.76842572

 $00:41:05.273 \longrightarrow 00:41:07.292$  in refractory thrombocytopenia.

NOTE Confidence: 0.76842572

 $00:41:07.292 \longrightarrow 00:41:09.870$  Following vaccination and the major.

NOTE Confidence: 0.7417165027

 $00:41:12.180 \longrightarrow 00:41:13.686$  .0 there was like if it's

NOTE Confidence: 0.7417165027

 $00:41:13.686 \longrightarrow 00:41:14.690$  if it's a splenectomy.

 $00:41:14.690 \longrightarrow 00:41:15.695$  Patients follow closer.

NOTE Confidence: 0.7417165027

00:41:15.695 --> 00:41:17.035 If it's a patient,

NOTE Confidence: 0.7417165027

 $00:41:17.040 \longrightarrow 00:41:18.548$  were the difficult control

NOTE Confidence: 0.7417165027

 $00:41:18.548 \longrightarrow 00:41:20.056$  ITP or heavily pretreated.

NOTE Confidence: 0.7417165027

 $00:41:20.060 \longrightarrow 00:41:21.029$  Follow them closer.

NOTE Confidence: 0.794892965

 $00:41:23.240 \longrightarrow 00:41:28.412$  And so that was main main idea and then

NOTE Confidence: 0.794892965

00:41:28.412 --> 00:41:30.879 in a sort of in the in the post

NOTE Confidence: 0.794892965

 $00:41:30.880 \longrightarrow 00:41:33.736$  in a additional question sort of session

NOTE Confidence: 0.794892965

 $00{:}41{:}33.740 \dashrightarrow 00{:}41{:}35.052$  following the abstract presentation.

NOTE Confidence: 0.794892965

 $00:41:35.052 \longrightarrow 00:41:37.756$  Somebody was asking, how would you counsel

NOTE Confidence: 0.794892965

 $00{:}41{:}37.756 \dashrightarrow 00{:}41{:}40.330$  consultations and who actually did not,

NOTE Confidence: 0.794892965

 $00:41:40.330 \longrightarrow 00:41:42.616$  perhaps did not who I had

NOTE Confidence: 0.794892965

 $00:41:42.620 \longrightarrow 00:41:43.840$  from Selena after the first.

NOTE Confidence: 0.794892965

00:41:43.840 --> 00:41:45.340 Actually would you, you know,

NOTE Confidence: 0.794892965

 $00:41:45.340 \longrightarrow 00:41:48.308$  give the second vaccine, and so the

00:41:48.308 --> 00:41:52.250 presenter actually said that she usually.

NOTE Confidence: 0.794892965

 $00:41:52.250 \longrightarrow 00:41:54.250$  She would actually recommend

NOTE Confidence: 0.794892965

 $00:41:54.250 \longrightarrow 00:41:56.069$  but with close observation.

NOTE Confidence: 0.794892965

00:41:56.069 --> 00:41:58.302 Alright, so moving on to the second

NOTE Confidence: 0.794892965

 $00:41:58.302 \longrightarrow 00:42:00.690$  one so the second study was similar.

NOTE Confidence: 0.794892965

 $00{:}42{:}00.690 \dashrightarrow 00{:}42{:}02.979$  In fact, they just followed one another.

NOTE Confidence: 0.794892965

 $00:42:02.980 \longrightarrow 00:42:05.220$  This one is from.

NOTE Confidence: 0.794892965

 $00:42:05.220 \longrightarrow 00:42:07.260$  Dutch study the benefit of this

NOTE Confidence: 0.794892965

 $00:42:07.260 \longrightarrow 00:42:09.120$  study was a prospective cohort,

NOTE Confidence: 0.794892965

 $00:42:09.120 \longrightarrow 00:42:11.316$  but the question was fairly similar

NOTE Confidence: 0.794892965

 $00{:}42{:}11.316 \dashrightarrow 00{:}42{:}13.752$  to what happens in patients with

NOTE Confidence: 0.794892965

 $00:42:13.752 \longrightarrow 00:42:15.992$  ITP with pre-existing ITP when

NOTE Confidence: 0.794892965

 $00:42:15.992 \longrightarrow 00:42:17.950$  they receive COVID-19 vaccine.

NOTE Confidence: 0.794892965

 $00{:}42{:}17.950 \dashrightarrow 00{:}42{:}21.046$  This study had a control arm.

NOTE Confidence: 0.794892965

 $00:42:21.050 \longrightarrow 00:42:24.384$  It had about a similar twice

NOTE Confidence: 0.794892965

00:42:24.384 --> 00:42:26.316 as much patients,

 $00:42:26.316 \longrightarrow 00:42:29.179$  218 in about the same number of 200.

NOTE Confidence: 0.794892965

 $00:42:29.180 \longrightarrow 00:42:30.086$  Healthy controls.

NOTE Confidence: 0.794892965

 $00:42:30.086 \longrightarrow 00:42:33.257$  Breakdown of vaccine was a little different,

NOTE Confidence: 0.794892965

 $00:42:33.260 \longrightarrow 00:42:35.759$  most of them received Moderna that was.

NOTE Confidence: 0.794892965

 $00:42:35.760 \longrightarrow 00:42:37.413$  Holland come in.

NOTE Confidence: 0.794892965

 $00:42:37.413 \longrightarrow 00:42:39.617$  All healthy controls received.

NOTE Confidence: 0.794892965

 $00:42:39.620 \longrightarrow 00:42:42.380$  Moderna 15 patients required

NOTE Confidence: 0.794892965

 $00:42:42.380 \longrightarrow 00:42:43.760$  rescue treatment.

NOTE Confidence: 0.794892965

 $00:42:43.760 \longrightarrow 00:42:47.913$  Now this is a breakdown of the treatment

NOTE Confidence: 0.794892965

 $00:42:47.913 \longrightarrow 00:42:52.554$  that patients were received or were on.

NOTE Confidence: 0.794892965

00:42:52.560 --> 00:42:55.395 So quite a number were on steroids

NOTE Confidence: 0.794892965

 $00:42:55.395 \longrightarrow 00:42:58.542$  in at a time and then also

NOTE Confidence: 0.794892965

00:42:58.542 --> 00:43:02.034 about 10% were Hispanic to me,

NOTE Confidence: 0.794892965

 $00:43:02.040 \longrightarrow 00:43:04.284$  definition of ITP dissertation

NOTE Confidence: 0.794892965

 $00:43:04.284 \longrightarrow 00:43:06.528$  was fairly the same.

 $00:43:06.530 \longrightarrow 00:43:09.120$  In fact, exactly the same.

NOTE Confidence: 0.794892965

 $00:43:09.120 \longrightarrow 00:43:12.276$  And sorry and So what they?

NOTE Confidence: 0.794892965

 $00:43:12.280 \longrightarrow 00:43:15.292$  What they found here on the

NOTE Confidence: 0.794892965

 $00:43:15.292 \longrightarrow 00:43:19.110$  graph below is that the.

NOTE Confidence: 0.794892965

00:43:19.110 --> 00:43:21.935 Both pleasant count in both

NOTE Confidence: 0.794892965

 $00:43:21.935 \longrightarrow 00:43:24.195$  normal controls and in.

NOTE Confidence: 0.768123773857143

00:43:26.600 --> 00:43:28.356 Patient stated patients actually

NOTE Confidence: 0.768123773857143

 $00{:}43{:}28.356 \dashrightarrow 00{:}43{:}30.551$  decreased and they I believe

NOTE Confidence: 0.768123773857143

 $00:43:30.551 \longrightarrow 00:43:33.052$  they said it's decreased by 6.3%

NOTE Confidence: 0.768123773857143

 $00:43:33.052 \longrightarrow 00:43:35.894$  in both in both in both groups,

NOTE Confidence: 0.768123773857143

 $00{:}43{:}35.894 \dashrightarrow 00{:}43{:}37.322$  so they didn't really feel there

NOTE Confidence: 0.768123773857143

 $00:43:37.322 \longrightarrow 00:43:38.797$  was a difference in reduction,

NOTE Confidence: 0.768123773857143

 $00:43:38.800 \longrightarrow 00:43:41.218$  but they both platelets

NOTE Confidence: 0.768123773857143

 $00:43:41.218 \longrightarrow 00:43:43.708$  in both groups went down.

NOTE Confidence: 0.72874327777778

 $00:43:45.740 \longrightarrow 00:43:49.214$  In fact, this is the better image of that.

NOTE Confidence: 0.851011732

 $00:43:53.500 \longrightarrow 00:43:55.230$  And so they further look

 $00:43:55.230 \longrightarrow 00:43:56.960$  into risk factors as well.

NOTE Confidence: 0.851011732

 $00{:}43{:}56.960 {\:\dashrightarrow\:} 00{:}43{:}59.564$  And here they found interesting piece

NOTE Confidence: 0.851011732

 $00:43:59.564 \longrightarrow 00:44:02.610$  which is a contradicts the previous study.

NOTE Confidence: 0.851011732

 $00:44:02.610 \longrightarrow 00:44:05.130$  They found that split me actually was

NOTE Confidence: 0.851011732

 $00:44:05.130 \longrightarrow 00:44:07.230$  associated with increase of platelets,

NOTE Confidence: 0.851011732

00:44:07.230 --> 00:44:10.240 quite substantial cruise of platelets.

NOTE Confidence: 0.851011732

 $00:44:10.240 \longrightarrow 00:44:14.585$  And a current treatment was associated

NOTE Confidence: 0.851011732

 $00:44:14.585 \longrightarrow 00:44:17.915$  with a decrease of platelets and.

NOTE Confidence: 0.851011732

 $00:44:17.920 \longrightarrow 00:44:21.376$  Age was associated with small decrease

NOTE Confidence: 0.851011732

 $00{:}44{:}21.380 \dashrightarrow 00{:}44{:}23.148$  in platelets following vaccinations.

NOTE Confidence: 0.723092663333333

 $00:44:25.350 \longrightarrow 00:44:28.365$  So this is again sort of a tally that

NOTE Confidence: 0.723092663333333

 $00:44:28.370 \longrightarrow 00:44:31.138$  3030 patients developing masturbations

NOTE Confidence: 0.723092663333333

 $00{:}44{:}31.138 \dashrightarrow 00{:}44{:}33.906$  15 required rescue treatment.

NOTE Confidence: 0.723092663333333

00:44:33.910 --> 00:44:36.190 The bleeding they did report bleeding,

NOTE Confidence: 0.723092663333333

 $00:44:36.190 \longrightarrow 00:44:39.502$  and interestingly enough and in

 $00:44:39.502 \longrightarrow 00:44:43.112$  a post in a in a in a question

NOTE Confidence: 0.723092663333333

00:44:43.112 --> 00:44:45.629 period they were asked about this,

NOTE Confidence: 0.723092663333333

 $00:44:45.630 \longrightarrow 00:44:48.174$  so all the five bleeding episodes

NOTE Confidence: 0.723092663333333

 $00:44:48.174 \longrightarrow 00:44:50.362$  happened in patients with platelet

NOTE Confidence: 0.723092663333333

 $00:44:50.362 \longrightarrow 00:44:52.499$  count of higher than 100,000.

NOTE Confidence: 0.723092663333333

 $00:44:52.499 \longrightarrow 00:44:56.251$  And in fact one patient who had a

NOTE Confidence: 0.723092663333333

 $00:44:56.251 \longrightarrow 00:44:58.020$  fatal fatal gastrointestinal bleeding

NOTE Confidence: 0.723092663333333

 $00:44:58.020 \longrightarrow 00:45:00.150$  also had platelet count of 100.

NOTE Confidence: 0.723092663333333

 $00:45:00.150 \longrightarrow 00:45:04.820$  So their answer was that it's.

NOTE Confidence: 0.723092663333333

00:45:04.820 --> 00:45:06.476 It was not related to vaccination at all,

NOTE Confidence: 0.723092663333333

 $00:45:06.480 \longrightarrow 00:45:07.185$  it was comorbidities,

NOTE Confidence: 0.723092663333333

 $00:45:07.185 \longrightarrow 00:45:08.830$  and in fact in the patients who

NOTE Confidence: 0.723092663333333

 $00:45:08.881 \longrightarrow 00:45:10.260$  had a GI bleed fatal jab bleed,

NOTE Confidence: 0.723092663333333

 $00:45:10.260 \longrightarrow 00:45:14.916$  it was a severe liver disease.

NOTE Confidence: 0.723092663333333

 $00:45:14.920 \longrightarrow 00:45:17.256$  Few patients require transfusions

NOTE Confidence: 0.723092663333333

 $00:45:17.256 \longrightarrow 00:45:19.008$  over plated or.

00:45:19.010 --> 00:45:21.677 It helps so the conclusions here is,

NOTE Confidence: 0.723092663333333

 $00:45:21.680 \longrightarrow 00:45:23.430$  it's actually kind of similar.

NOTE Confidence: 0.723092663333333

 $00:45:23.430 \longrightarrow 00:45:25.890$  The effect of code in vaccination

NOTE Confidence: 0.723092663333333

 $00:45:25.890 \longrightarrow 00:45:28.456$  is similar in health in healthy

NOTE Confidence: 0.723092663333333

 $00:45:28.456 \longrightarrow 00:45:30.308$  controls and ITP patients.

NOTE Confidence: 0.723092663333333

 $00:45:30.310 \longrightarrow 00:45:31.782$  Dissertations were only a

NOTE Confidence: 0.723092663333333

 $00:45:31.782 \longrightarrow 00:45:33.622$  few very few ITP patients.

NOTE Confidence: 0.723092663333333

 $00{:}45{:}33.630 \dashrightarrow 00{:}45{:}36.085$  There was a good response

NOTE Confidence: 0.723092663333333

 $00:45:36.085 \longrightarrow 00:45:37.558$  to rescue treatment.

NOTE Confidence: 0.723092663333333

 $00:45:37.560 \longrightarrow 00:45:40.332$  And essentially vaccination is safe and

NOTE Confidence: 0.723092663333333

 $00:45:40.332 \longrightarrow 00:45:43.039$  monitoring is advised and is actually

NOTE Confidence: 0.723092663333333

 $00:45:43.040 \longrightarrow 00:45:46.820$  was recommended by ASH guidelines.

NOTE Confidence: 0.723092663333333

 $00{:}45{:}46.820 \dashrightarrow 00{:}45{:}49.092$  Come and this is sort of the additional

NOTE Confidence: 0.723092663333333

 $00{:}45{:}49.092 \to 00{:}45{:}50.560$  questions that they were asked.

NOTE Confidence: 0.723092663333333

 $00:45:50.560 \longrightarrow 00:45:52.205$  Somebody asked whether they check

00:45:52.205 --> 00:45:53.850 for platelet antibodies and they

NOTE Confidence: 0.723092663333333

 $00:45:53.905 \longrightarrow 00:45:55.897$  said they did not evaluate for

NOTE Confidence: 0.723092663333333

 $00:45:55.897 \longrightarrow 00:45:56.893$  platelet antibodies directly,

NOTE Confidence: 0.723092663333333

 $00:45:56.900 \longrightarrow 00:46:00.675$  but but there's no association with

NOTE Confidence: 0.723092663333333

 $00:46:00.675 \longrightarrow 00:46:05.580$  high levels in health healthy controls.

NOTE Confidence: 0.723092663333333

 $00:46:05.580 \longrightarrow 00:46:05.911 \text{ So}$ 

NOTE Confidence: 0.723092663333333

00:46:05.911 --> 00:46:08.890 so I want to just finish up with this

NOTE Confidence: 0.723092663333333

 $00:46:08.971 \longrightarrow 00:46:13.940$  third study, which is which is also.

NOTE Confidence: 0.723092663333333

 $00:46:13.940 \longrightarrow 00:46:15.116$  ITP related studying.

NOTE Confidence: 0.723092663333333 00:46:15.116 --> 00:46:15.900 In fact, NOTE Confidence: 0.723092663333333

 $00:46:15.900 \longrightarrow 00:46:20.152$  this is an interesting trial about use

NOTE Confidence: 0.723092663333333

 $00:46:20.152 \longrightarrow 00:46:24.744$  of BTK inhibitor will support NIP in.

NOTE Confidence: 0.723092663333333

00:46:24.750 --> 00:46:26.630 A refractory relapsed ITP's.

NOTE Confidence: 0.723092663333333

 $00:46:26.630 \longrightarrow 00:46:30.588$  The premise of the of the of the trial

NOTE Confidence: 0.723092663333333

00:46:30.590 --> 00:46:33.164 was was I think it was five for face,

NOTE Confidence: 0.723092663333333

 $00:46:33.170 \longrightarrow 00:46:33.471$  face,

 $00:46:33.471 \longrightarrow 00:46:34.073$  one face,

NOTE Confidence: 0.723092663333333

00:46:34.073 --> 00:46:36.600 two sort of update on on on the

NOTE Confidence: 0.723092663333333

 $00:46:36.600 \longrightarrow 00:46:38.350$  phase one phase two trial.

NOTE Confidence: 0.723092663333333

 $00:46:38.350 \longrightarrow 00:46:40.822$  The the premise was that pertain

NOTE Confidence: 0.723092663333333

00:46:40.822 --> 00:46:43.967 inhibitors modulate quite a bit of a quite

NOTE Confidence: 0.723092663333333

 $00:46:43.967 \longrightarrow 00:46:46.109$  a number of different effector cells.

NOTE Confidence: 0.723092663333333

 $00:46:46.110 \longrightarrow 00:46:48.938$  B cells and macrophages.

NOTE Confidence: 0.723092663333333

 $00{:}46{:}48.940 \dashrightarrow 00{:}46{:}52.192$  Then also signaling signaling of the

NOTE Confidence: 0.723092663333333

 $00{:}46{:}52.192 \dashrightarrow 00{:}46{:}54.945$  basilar receptor and inhibitors decrease

NOTE Confidence: 0.723092663333333

 $00:46:54.945 \longrightarrow 00:46:58.594$  our reactive antibodies in so there's a.

NOTE Confidence: 0.723092663333333

 $00{:}46{:}58.594 \dashrightarrow 00{:}47{:}00.779$  There's an interest in evaluating

NOTE Confidence: 0.723092663333333

 $00:47:00.779 \longrightarrow 00:47:03.880$  this group of class of medications.

NOTE Confidence: 0.723092663333333

 $00:47:03.880 \longrightarrow 00:47:05.758$  Class of drugs in it P.

NOTE Confidence: 0.723092663333333

 $00:47:05.760 \longrightarrow 00:47:07.080$  And specifically.

NOTE Confidence: 0.723092663333333

 $00:47:07.080 \longrightarrow 00:47:11.700$  While I'm really Brittany was chosen because.

00:47:11.700 --> 00:47:13.428 Is believed to be very selective,

NOTE Confidence: 0.723092663333333

 $00:47:13.430 \longrightarrow 00:47:15.785$  so out of different kinases

NOTE Confidence: 0.723092663333333

00:47:15.785 --> 00:47:17.669 it's it's pretty selective.

NOTE Confidence: 0.723092663333333

00:47:17.670 --> 00:47:23.320 It inhibits quite quite nicely, but.

NOTE Confidence: 0.723092663333333

 $00:47:23.320 \longrightarrow 00:47:27.060$  But not others, rather occupy.

NOTE Confidence: 0.723092663333333

 $00{:}47{:}27.060 \dashrightarrow 00{:}47{:}29.160$  Target potentially, but not others.

NOTE Confidence: 0.723092663333333

 $00:47:29.160 \longrightarrow 00:47:32.190$  It's quite reversible.

NOTE Confidence: 0.723092663333333

00:47:32.190 --> 00:47:34.626 And why not in Britain for instance?

NOTE Confidence: 0.723092663333333 00:47:34.630 --> 00:47:35.110 Well,

NOTE Confidence: 0.723092663333333

 $00:47:35.110 \longrightarrow 00:47:37.030$  so there's association of

NOTE Confidence: 0.723092663333333

00:47:37.030 --> 00:47:38.950 play legation with liberty,

NOTE Confidence: 0.723092663333333

 $00:47:38.950 \longrightarrow 00:47:42.440$  but not as shown here when.

NOTE Confidence: 0.763151872857143

 $00{:}47{:}44.840 \dashrightarrow 00{:}47{:}47.936$  Was tested against collagen

NOTE Confidence: 0.763151872857143

 $00:47:47.936 \longrightarrow 00:47:51.130$  so much much. He come.

NOTE Confidence: 0.592017207142857

 $00:47:53.710 \longrightarrow 00:47:55.612$  Specially associated with

NOTE Confidence: 0.592017207142857

00:47:55.612 --> 00:47:58.148 aggregation more than rules.

 $00:47:58.150 \longrightarrow 00:48:01.072$  So the trial instant criteria was

NOTE Confidence: 0.592017207142857

 $00{:}48{:}01.072 \dashrightarrow 00{:}48{:}03.442$  fairly straightforward, its response.

NOTE Confidence: 0.592017207142857

 $00:48:03.442 \longrightarrow 00:48:05.864$  It's essentially adults response.

NOTE Confidence: 0.592017207142857

 $00:48:05.864 \longrightarrow 00:48:08.870$  They have to have at least had to have

NOTE Confidence: 0.592017207142857

00:48:08.949 --> 00:48:11.805 at least response to one prior treatment,

NOTE Confidence: 0.592017207142857

 $00:48:11.810 \longrightarrow 00:48:14.060$  and there's no other available

NOTE Confidence: 0.592017207142857

 $00:48:14.060 \longrightarrow 00:48:16.310$  to them or not approved.

NOTE Confidence: 0.592017207142857

 $00{:}48{:}16.310 \dashrightarrow 00{:}48{:}19.126$  And there should be at least two platelet

NOTE Confidence: 0.592017207142857

00:48:19.126 --> 00:48:22.238 count less than 30 thirty thousand

NOTE Confidence: 0.592017207142857

 $00{:}48{:}22.238 \dashrightarrow 00{:}48{:}25.502$  brother on 2 occasions and concurrent

NOTE Confidence: 0.592017207142857

00:48:25.502 --> 00:48:28.470 therapists were allowed, including.

NOTE Confidence: 0.592017207142857

 $00:48:28.470 \longrightarrow 00:48:29.766$  Storage entity arrays.

NOTE Confidence: 0.592017207142857

 $00{:}48{:}29.766 \dashrightarrow 00{:}48{:}33.660$  There was a dose escalation as a phase one,

NOTE Confidence: 0.592017207142857

 $00:48:33.660 \longrightarrow 00:48:35.501$  but in kind of a phase two

NOTE Confidence: 0.592017207142857

00:48:35.501 --> 00:48:38.208 phase of it part of it they use

00:48:38.208 --> 00:48:39.684 actually 400 milligrams VID,

NOTE Confidence: 0.592017207142857

 $00:48:39.690 \longrightarrow 00:48:42.010$  which I'll show soon.

NOTE Confidence: 0.592017207142857

00:48:42.010 --> 00:48:44.910 Primary in point was essentially.

NOTE Confidence: 0.592017207142857

 $00:48:44.910 \longrightarrow 00:48:47.480$  Account of greater than 50,000

NOTE Confidence: 0.592017207142857

 $00:48:47.480 \longrightarrow 00:48:50.050$  on two occasion at least,

NOTE Confidence: 0.592017207142857

 $00:48:50.050 \longrightarrow 00:48:53.842$  and an increase of 2020 thousand of the

NOTE Confidence: 0.592017207142857

 $00:48:53.842 \longrightarrow 00:48:56.990$  baseline without use of rescue medication.

NOTE Confidence: 0.592017207142857

 $00:48:56.990 \longrightarrow 00:48:59.503$  And they actually had a long term

NOTE Confidence: 0.592017207142857

 $00:48:59.503 \longrightarrow 00:49:01.970$  extension also for 400 milligrams PID.

NOTE Confidence: 0.592017207142857

 $00:49:01.970 \longrightarrow 00:49:04.000$  And so here's what happened.

NOTE Confidence: 0.592017207142857

00:49:04.000 --> 00:49:07.426 So this is kind of a overall study diagram,

NOTE Confidence: 0.592017207142857

 $00:49:07.426 \longrightarrow 00:49:11.249$  so this is the 400 the ID group.

NOTE Confidence: 0.592017207142857

 $00:49:11.249 \longrightarrow 00:49:12.964$  So this is 45 patients.

NOTE Confidence: 0.592017207142857

 $00:49:12.970 \longrightarrow 00:49:16.954$  And so here's the results.

NOTE Confidence: 0.592017207142857

 $00:49:16.954 \longrightarrow 00:49:20.750$  So out of this 4518 that is 40% reached

NOTE Confidence: 0.592017207142857

 $00:49:20.750 \longrightarrow 00:49:22.630$  the primary endpoint so greater

 $00:49:22.706 \longrightarrow 00:49:24.855$  than 50 in with 20 greater than.

NOTE Confidence: 0.80177619

 $00:49:27.840 \longrightarrow 00:49:31.248$  50% fifty thousand increase.

NOTE Confidence: 0.80177619

 $00:49:31.250 \longrightarrow 00:49:34.502$  Sorry, greater than 50,000 platelet count

NOTE Confidence: 0.80177619

 $00:49:34.502 \longrightarrow 00:49:36.586$  increased 20,000 from the baseline,

NOTE Confidence: 0.80177619

 $00:49:36.586 \longrightarrow 00:49:39.234$  so that's 18 patients reached that end

NOTE Confidence: 0.80177619

 $00{:}49{:}39.234 \dashrightarrow 00{:}49{:}42.410$  point and it was very rapid improvement,

NOTE Confidence: 0.80177619

 $00:49:42.410 \longrightarrow 00:49:44.546$  so this is it's probably hard to see.

NOTE Confidence: 0.80177619

 $00:49:44.550 \longrightarrow 00:49:47.700$  But this is days and so within,

NOTE Confidence: 0.80177619

 $00:49:47.700 \longrightarrow 00:49:49.206$  you know this is actually 20.

NOTE Confidence: 0.80177619

00:49:49.210 --> 00:49:52.208 I think it's 25 or 29 days,

NOTE Confidence: 0.80177619

00:49:52.208 --> 00:49:53.936 so it's a really rapid improvement

NOTE Confidence: 0.80177619

 $00:49:53.936 \longrightarrow 00:49:55.350$  and it's actually sustained.

NOTE Confidence: 0.80177619

 $00{:}49{:}55.350 \dashrightarrow 00{:}49{:}58.190$  And of course these are not responders and

NOTE Confidence: 0.80177619

 $00:49:58.190 \longrightarrow 00:50:01.260$  you can see here that this is sort of a.

NOTE Confidence: 0.80177619

 $00:50:01.260 \longrightarrow 00:50:03.290$  Better.

 $00:50:03.290 \longrightarrow 00:50:05.354$  Way to assess sort of duration of response.

NOTE Confidence: 0.80177619

 $00{:}50{:}05.360 \dashrightarrow 00{:}50{:}07.810$  So this is greater than 30 number

NOTE Confidence: 0.80177619

 $00:50:07.810 \longrightarrow 00:50:09.707$  of number of weeks achieved

NOTE Confidence: 0.80177619

 $00:50:09.707 \longrightarrow 00:50:13.400$  in 20 and then 15 and 14.

NOTE Confidence: 0.77861778

 $00:50:15.470 \longrightarrow 00:50:18.599$  So then, whoops.

NOTE Confidence: 0.885930590909091

 $00:50:20.760 \longrightarrow 00:50:22.860$  And so they made a point

NOTE Confidence: 0.885930590909091

 $00:50:22.860 \longrightarrow 00:50:24.800$  that it's indeed very rapid,

NOTE Confidence: 0.885930590909091

 $00:50:24.800 \longrightarrow 00:50:28.412$  very rapid increase in fact,

NOTE Confidence: 0.885930590909091

 $00{:}50{:}28.412 --> 00{:}50{:}31.268$  median time to greater than  $30{,}000$ 

NOTE Confidence: 0.885930590909091

 $00:50:31.270 \longrightarrow 00:50:34.660$  level was achieved in 8.5 days

NOTE Confidence: 0.885930590909091

00:50:34.660 --> 00:50:37.310 greater than 30,000 + 20,000 above

NOTE Confidence: 0.885930590909091

 $00:50:37.310 \longrightarrow 00:50:39.210$  the baseline in basically 12

NOTE Confidence: 0.885930590909091

 $00:50:39.210 \longrightarrow 00:50:41.496$  days in greater than 50,000 play

NOTE Confidence: 0.885930590909091

 $00:50:41.496 \longrightarrow 00:50:43.680$  account in just about the same

NOTE Confidence: 0.885930590909091

 $00:50:43.680 \longrightarrow 00:50:45.857$  12.5 days and median time for the

NOTE Confidence: 0.885930590909091

 $00:50:45.857 \longrightarrow 00:50:47.659$  primary response was about a month,

00:50:47.660 --> 00:50:50.670 so it's very very rapid.

NOTE Confidence: 0.885930590909091

 $00:50:50.670 \longrightarrow 00:50:53.736$  And then they also showed the.

NOTE Confidence: 0.885930590909091

 $00:50:53.740 \longrightarrow 00:50:57.534$  What happened in this long long extension?

NOTE Confidence: 0.885930590909091

 $00:50:57.540 \longrightarrow 00:50:59.252$  Arms, so to speak,

NOTE Confidence: 0.885930590909091

 $00:50:59.252 \longrightarrow 00:51:01.820$  and they said that it's basically

NOTE Confidence: 0.885930590909091

 $00:51:01.820 \longrightarrow 00:51:04.688$  it was quite robust.

NOTE Confidence: 0.82241778555555

 $00:51:08.300 \longrightarrow 00:51:09.752$  Especially it's a.

NOTE Confidence: 0.82241778555555

 $00:51:09.752 \longrightarrow 00:51:12.656$  It's a maintain the maintained the

NOTE Confidence: 0.822417785555555

 $00{:}51{:}12.660 \dashrightarrow 00{:}51{:}16.656$  response al right and then adverse effects.

NOTE Confidence: 0.82241778555555

00:51:16.660 --> 00:51:19.331 Basically it's all grade one grade,

NOTE Confidence: 0.822417785555555

00:51:19.331 --> 00:51:22.097 one grade, two diarrhea and nausea,

NOTE Confidence: 0.822417785555555

00:51:22.100 --> 00:51:24.920 fatigue. And again this is all

NOTE Confidence: 0.82241778555555

 $00{:}51{:}24.920 \dashrightarrow 00{:}51{:}27.379$  about 400 milligrams twice a day,

NOTE Confidence: 0.82241778555555

 $00:51:27.380 \longrightarrow 00:51:31.046$  so conclusions. Mr.

NOTE Confidence: 0.82241778555555

 $00:51:31.046 \longrightarrow 00:51:32.018$  Bracnet provides.

 $00:51:34.220 \longrightarrow 00:51:38.990$  Inhibition of phagocytosis.

NOTE Confidence: 0.73578703

00:51:38.990 --> 00:51:41.822 And 40% of patients on 400

NOTE Confidence: 0.73578703

 $00{:}51{:}41.822 \dashrightarrow 00{:}51{:}43.710$  milligram VID achieved endpoint

NOTE Confidence: 0.73578703

00:51:43.801 --> 00:51:46.406 primary endpoint at 18 patients.

NOTE Confidence: 0.73578703

 $00{:}51{:}46.410 \dashrightarrow 00{:}51{:}50.430$  Response was rapid and was well

NOTE Confidence: 0.73578703

 $00:51:50.430 \longrightarrow 00:51:53.432$  tolerated and response was maintained.

NOTE Confidence: 0.73578703

 $00:51:53.432 \longrightarrow 00:51:54.720$  So there's open going

NOTE Confidence: 0.73578703

 $00:51:54.720 \longrightarrow 00:51:56.330$  face the Luna three trial,

NOTE Confidence: 0.73578703

 $00{:}51{:}56.330 \dashrightarrow 00{:}52{:}00.950$  which further will address this.

NOTE Confidence: 0.73578703

 $00:52:00.950 \longrightarrow 00:52:05.572$  This this modality in additional questions.

NOTE Confidence: 0.73578703

 $00{:}52{:}05.572 \dashrightarrow 00{:}52{:}07.636$  I think there was nothing really

NOTE Confidence: 0.73578703

00:52:07.636 --> 00:52:08.630 particularly interesting,

NOTE Confidence: 0.73578703

 $00:52:08.630 \longrightarrow 00:52:10.130$  but they said there's no,

NOTE Confidence: 0.73578703

 $00:52:10.130 \longrightarrow 00:52:13.970$  nobody, nobody was on any.

NOTE Confidence: 0.73578703

00:52:13.970 --> 00:52:15.740 Antibiotic prophylaxis and

NOTE Confidence: 0.73578703

 $00:52:15.740 \longrightarrow 00:52:18.100$  there was no infections.

00:52:18.100 --> 00:52:20.278 So I think in interest of time I finish,

NOTE Confidence: 0.73578703

 $00:52:20.280 \longrightarrow 00:52:23.418$  I stop here.

NOTE Confidence: 0.73578703

 $00{:}52{:}23.420 \dashrightarrow 00{:}52{:}25.080$  If we have some questions, well,

NOTE Confidence: 0.932399030769231

00:52:25.090 --> 00:52:27.466 thank you all very much for those very

NOTE Confidence: 0.932399030769231

 $00:52:27.466 \longrightarrow 00:52:29.499$  informative and very clear presentations.

NOTE Confidence: 0.903285578

 $00:52:31.650 \longrightarrow 00:52:33.000$  If people do have questions,

NOTE Confidence: 0.903285578

 $00:52:33.000 \longrightarrow 00:52:35.440$  if they could put them in the chat

NOTE Confidence: 0.903285578

 $00:52:35.440 \longrightarrow 00:52:37.409$  that there are a couple there.

NOTE Confidence: 0.903285578

 $00:52:37.410 \longrightarrow 00:52:39.408$  Maybe we can start with those.

NOTE Confidence: 0.903285578

 $00:52:39.410 \longrightarrow 00:52:40.742$  So I'm Kelsey.

NOTE Confidence: 0.903285578

 $00{:}52{:}40.742 \dashrightarrow 00{:}52{:}43.406$  You mentioned in your abstract with

NOTE Confidence: 0.903285578

 $00:52:43.406 \longrightarrow 00:52:46.429$  factor 11 deficiency that some patients

NOTE Confidence: 0.903285578

 $00:52:46.430 \longrightarrow 00:52:50.330$  bled despite getting fresh frozen plasma.

NOTE Confidence: 0.903285578

 $00:52:50.330 \longrightarrow 00:52:52.124$  What what might be some alternatives

NOTE Confidence: 0.903285578

 $00:52:52.124 \longrightarrow 00:52:53.320$  to treat those individuals?

 $00:52:53.320 \longrightarrow 00:52:55.088$  Or do you have any any thoughts about

NOTE Confidence: 0.903285578

 $00:52:55.088 \longrightarrow 00:52:56.797$  why those people still had bleeding?

NOTE Confidence: 0.904679545384615

00:52:58.370 --> 00:52:59.423 Yeah, it's interesting.

NOTE Confidence: 0.904679545384615

 $00:52:59.423 \longrightarrow 00:53:02.659$  I mean the half life of factor 11 is long.

NOTE Confidence: 0.904679545384615

00:53:02.660 --> 00:53:04.095 I think about two days or so,

NOTE Confidence: 0.904679545384615

 $00:53:04.100 \longrightarrow 00:53:05.612$  and so it's it's.

NOTE Confidence: 0.904679545384615

00:53:05.612 --> 00:53:07.334 It's intriguing, but I think something

NOTE Confidence: 0.904679545384615

 $00{:}53{:}07.334 \dashrightarrow 00{:}53{:}08.539$  we've all experienced in practice.

NOTE Confidence: 0.904679545384615

 $00:53:08.540 \longrightarrow 00:53:10.020$  I think that may happen,

NOTE Confidence: 0.904679545384615

00:53:10.020 --> 00:53:12.440 perhaps just the quantity effect

NOTE Confidence: 0.904679545384615

 $00{:}53{:}12.440 \dashrightarrow 00{:}53{:}14.860$  or Lebanon is not concentrated.

NOTE Confidence: 0.904679545384615

00:53:14.860 --> 00:53:16.570 You know, you never maybe know

NOTE Confidence: 0.904679545384615

00:53:16.570 --> 00:53:18.259 exactly what you're getting in the FP,

NOTE Confidence: 0.904679545384615

 $00:53:18.260 \longrightarrow 00:53:19.752$  and maybe one element.

NOTE Confidence: 0.904679545384615

 $00:53:19.752 \longrightarrow 00:53:21.660$  And I, you know there are

NOTE Confidence: 0.904679545384615

 $00:53:21.660 \longrightarrow 00:53:22.820$  cases reported of inhibitors,

 $00:53:22.820 \longrightarrow 00:53:24.105$  so perhaps some of those

NOTE Confidence: 0.904679545384615

00:53:24.105 --> 00:53:25.133 patients that didn't respond,

NOTE Confidence: 0.904679545384615

 $00:53:25.140 \longrightarrow 00:53:27.690$  maybe inhibitors.

NOTE Confidence: 0.904679545384615

00:53:27.690 --> 00:53:32.926 I think that I think Novoseven could be used,

NOTE Confidence: 0.904679545384615

 $00:53:32.930 \longrightarrow 00:53:34.372$  but I think with caution and maybe

NOTE Confidence: 0.904679545384615

 $00:53:34.372 \longrightarrow 00:53:36.122$  at a lower dose or maybe particularly

NOTE Confidence: 0.904679545384615

 $00:53:36.122 \longrightarrow 00:53:37.742$  in someone who had an inhibitor.

NOTE Confidence: 0.904679545384615

 $00:53:37.750 \longrightarrow 00:53:39.294$  I think there would be a role there,

NOTE Confidence: 0.904679545384615

 $00{:}53{:}39.300 \dashrightarrow 00{:}53{:}41.974$  and then may be sort of leaning more

NOTE Confidence: 0.904679545384615

 $00:53:41.974 \longrightarrow 00:53:44.102$  heavily on anti fibrinolytics might

NOTE Confidence: 0.904679545384615

00:53:44.102 --> 00:53:47.956 be useful, but I mean I think it's.

NOTE Confidence: 0.904679545384615

 $00:53:47.960 \longrightarrow 00:53:50.452$  A challenge we've all seen and experienced

NOTE Confidence: 0.904679545384615

 $00{:}53{:}50.452 \dashrightarrow 00{:}53{:}52.589$  that sometimes is hard to pinpoint.

NOTE Confidence: 0.904679545384615

 $00:53:52.590 \longrightarrow 00:53:53.390$  It's a great question,

NOTE Confidence: 0.798709166

 $00:53:53.740 \longrightarrow 00:53:54.988$  great, thank you.

 $00{:}53{:}54.988 \dashrightarrow 00{:}53{:}56.880$  Thank you and and Sudan shoe. You.

NOTE Confidence: 0.798709166

 $00:53:56.880 \longrightarrow 00:53:58.752$  You mentioned that there was an

NOTE Confidence: 0.798709166

 $00:53:58.752 \longrightarrow 00:54:00.484$  increase in the clinical clinically

NOTE Confidence: 0.798709166

 $00:54:00.484 \longrightarrow 00:54:02.620$  relevant non major bleeding and

NOTE Confidence: 0.798709166

 $00:54:02.620 \longrightarrow 00:54:04.820$  individuals who are getting doax

NOTE Confidence: 0.798709166

 $00:54:04.820 \longrightarrow 00:54:06.580$  for cancer associated thrombosis.

NOTE Confidence: 0.798709166

 $00:54:06.580 \longrightarrow 00:54:08.500$  So when when you prescribe either

NOTE Confidence: 0.798709166

 $00{:}54{:}08.500 \dashrightarrow 00{:}54{:}10.218$  a low molecular weight heparin

NOTE Confidence: 0.798709166

 $00{:}54{:}10.218 \dashrightarrow 00{:}54{:}12.822$  or ado act to a patient with cancer

NOTE Confidence: 0.798709166

00:54:12.822 --> 00:54:14.404 associated thrombosis, how do you?

NOTE Confidence: 0.798709166

 $00:54:14.404 \longrightarrow 00:54:15.238$  How do you?

NOTE Confidence: 0.769428

00:54:17.290 --> 00:54:19.210 Decide on the benefits, risks there,

NOTE Confidence: 0.769428

 $00:54:19.210 \longrightarrow 00:54:20.390$  and what what agents do.

NOTE Confidence: 0.769428

 $00{:}54{:}20.390 \dashrightarrow 00{:}54{:}21.587$  You tend to choose and are there.

NOTE Confidence: 0.769428

 $00:54:21.590 \longrightarrow 00:54:23.090$  Are there things about the

NOTE Confidence: 0.769428

 $00:54:23.090 \longrightarrow 00:54:24.432$  patient that may point you

 $00:54:24.432 \longrightarrow 00:54:25.780$  in One Direction or another?

NOTE Confidence: 0.733083880363636

 $00:54:27.840 \longrightarrow 00:54:30.594$  So the clinically relevant non major

NOTE Confidence: 0.733083880363636

 $00.54:30.594 \longrightarrow 00.54:33.130$  bleeding was really of concern,

NOTE Confidence: 0.733083880363636

 $00:54:33.130 \longrightarrow 00:54:34.894$  which was higher in doax and

NOTE Confidence: 0.733083880363636

00:54:34.894 --> 00:54:36.740 that has been pretty consistent

NOTE Confidence: 0.733083880363636

 $00:54:36.740 \longrightarrow 00:54:38.820$  throughout all the six trials.

NOTE Confidence: 0.733083880363636

 $00:54:38.820 \longrightarrow 00:54:42.078$  So it wasn't just one study.

NOTE Confidence: 0.733083880363636

 $00:54:42.080 \longrightarrow 00:54:44.271$  And the way it impacts my practice

NOTE Confidence: 0.733083880363636

 $00:54:44.271 \longrightarrow 00:54:46.981$  is if if I do look at the patient's

NOTE Confidence: 0.733083880363636

 $00:54:46.981 \longrightarrow 00:54:48.544$  underlying bleeding risk.

NOTE Confidence: 0.733083880363636

 $00:54:48.544 \longrightarrow 00:54:51.386$  If there isn't an individual where I

NOTE Confidence: 0.733083880363636

00:54:51.386 --> 00:54:53.300 would be more concerned about bleeding,

NOTE Confidence: 0.733083880363636

 $00{:}54{:}53.300 \dashrightarrow 00{:}54{:}56.250$  perhaps some one who had immediate

NOTE Confidence: 0.733083880363636

 $00:54:56.250 \longrightarrow 00:54:57.598$  postoperative thrombotic event,

NOTE Confidence: 0.733083880363636

 $00:54:57.598 \longrightarrow 00:54:59.872$  or perhaps with somebody who's going

00:54:59.872 --> 00:55:02.813 for a surgery or has a known history

NOTE Confidence: 0.733083880363636

 $00:55:02.813 \longrightarrow 00:55:04.740$  of underlying bleeding or faults.

NOTE Confidence: 0.733083880363636

 $00:55:04.740 \longrightarrow 00:55:08.856$  I might be more inclined to use

NOTE Confidence: 0.733083880363636

 $00:55:08.860 \longrightarrow 00:55:11.060$  those individuals rather than doax,

NOTE Confidence: 0.733083880363636

 $00:55:11.060 \longrightarrow 00:55:12.747$  so that would be my approach and.

NOTE Confidence: 0.733083880363636

 $00:55:12.750 \longrightarrow 00:55:14.868$  How I would use that information?

NOTE Confidence: 0.733083880363636 00:55:14.870 --> 00:55:15.120 Thank

NOTE Confidence: 0.71389297

00:55:15.130 --> 00:55:17.090 you very much, don't you?

NOTE Confidence: 0.71389297

 $00{:}55{:}17.090 \dashrightarrow 00{:}55{:}19.682$  And Alex, are there any situations

NOTE Confidence: 0.71389297

00:55:19.682 --> 00:55:22.310 in patients with ITP, and in in,

NOTE Confidence: 0.71389297

 $00{:}55{:}22.310 \dashrightarrow 00{:}55{:}26.032$  in which you might hold off on giving

NOTE Confidence: 0.71389297

00:55:26.032 --> 00:55:27.740 COVID vaccine COVID-19 vaccine?

NOTE Confidence: 0.71389297

 $00:55:27.740 \longrightarrow 00:55:30.410$  So individuals who are recently flared

NOTE Confidence: 0.71389297

 $00:55:30.410 \longrightarrow 00:55:33.773$  or have very low platelet counts and

NOTE Confidence: 0.71389297

 $00:55:33.773 \longrightarrow 00:55:35.920$  requiring intense therapy, for instance?

NOTE Confidence: 0.813180108

 $00:55:38.200 \longrightarrow 00:55:39.892$  You know, so this is interesting

00:55:39.892 --> 00:55:41.998 because the data they really didn't

NOTE Confidence: 0.813180108

00:55:41.998 --> 00:55:43.378 actually include specifically,

NOTE Confidence: 0.813180108

00:55:43.380 --> 00:55:47.370 like they didn't address the question

NOTE Confidence: 0.813180108

 $00:55:47.370 \longrightarrow 00:55:50.338$  of whether patients who were in right,

NOTE Confidence: 0.813180108

 $00:55:50.340 \longrightarrow 00:55:52.926$  right, or right now on inactive.

NOTE Confidence: 0.610153234285714

00:55:55.370 --> 00:55:56.606 ITP destinations,

NOTE Confidence: 0.610153234285714

 $00:55:56.606 \longrightarrow 00:56:00.254$  prior to prior to vaccination. They were.

NOTE Confidence: 0.610153234285714

 $00:56:00.254 \longrightarrow 00:56:02.193$  They only had patients who were on

NOTE Confidence: 0.610153234285714

00:56:02.193 --> 00:56:04.276 sort of chronic chronic therapy,

NOTE Confidence: 0.610153234285714

 $00:56:04.276 \longrightarrow 00:56:09.342$  so I I don't think we have data per

NOTE Confidence: 0.610153234285714

 $00:56:09.342 \longrightarrow 00:56:12.490$  say in that regard, but personally,

NOTE Confidence: 0.610153234285714

00:56:12.490 --> 00:56:17.308 I think if there's a flare actually flare,

NOTE Confidence: 0.610153234285714

00:56:17.310 --> 00:56:19.990 I probably would hold off,

NOTE Confidence: 0.610153234285714

 $00:56:19.990 \longrightarrow 00:56:23.390$  just not to disturb.

NOTE Confidence: 0.610153234285714

 $00:56:23.390 \longrightarrow 00:56:25.060$  You know it. You know,

 $00:56:25.060 \longrightarrow 00:56:28.168$  in in in response further,

NOTE Confidence: 0.610153234285714

00:56:28.168 --> 00:56:30.728 I think it would might what might be

NOTE Confidence: 0.610153234285714

 $00:56:30.728 \longrightarrow 00:56:33.003$  really interesting is in in this situation

NOTE Confidence: 0.610153234285714

 $00:56:33.003 \longrightarrow 00:56:35.687$  to address further whether they're truly.

NOTE Confidence: 0.610153234285714

00:56:35.690 --> 00:56:38.770 Uh and antibody platelet antibody,

NOTE Confidence: 0.610153234285714

 $00:56:38.770 \longrightarrow 00:56:40.954$  which none of them really looked into.

NOTE Confidence: 0.759774240235294

00:56:43.110 --> 00:56:44.699 Great, but but I think I would

NOTE Confidence: 0.759774240235294

00:56:44.699 --> 00:56:46.460 probably hold off until there's some

NOTE Confidence: 0.759774240235294

 $00:56:46.460 \longrightarrow 00:56:47.836$  stabilization of platelet count.

NOTE Confidence: 0.7916155125

00:56:49.110 --> 00:56:52.600 Seems very prudent. Yep, OK, alright.

NOTE Confidence: 0.7916155125

 $00{:}56{:}52.600 \dashrightarrow 00{:}56{:}54.770$  Well it's it's just about 1:00 o'clock,

NOTE Confidence: 0.7916155125

 $00:56:54.770 \longrightarrow 00:56:58.358$  so I want to thank our speakers for again.

NOTE Confidence: 0.7916155125

 $00:56:58.358 \longrightarrow 00:56:59.594$  Excellent presentation that

NOTE Confidence: 0.7916155125

00:56:59.594 --> 00:57:01.713 were informative and I think

NOTE Confidence: 0.7916155125

 $00:57:01.713 \longrightarrow 00:57:03.361$  highlighted some really important

NOTE Confidence: 0.7916155125

00:57:03.361 --> 00:57:05.009 areas in classical hematology.

 $00{:}57{:}05.010 \dashrightarrow 00{:}57{:}07.610$  And thank you all for for joining us.

NOTE Confidence: 0.7916155125

00:57:07.610 --> 00:57:08.834 Thank you very much.

NOTE Confidence: 0.7916155125

00:57:08.834 --> 00:57:11.000 Have a great day everyone. I.