



POST-NEW ORLEANS 2022

Novità dal Meeting della Società Americana di Ematologia

Novità dal Meeting della Società Americana di Ematologia

Milano
Teatro Dal Verme
2-3-4 Febbraio 2023

COORDINATORI

Angelo Michele Carella
Pier Luigi Zinzani

BOARD SCIENTIFICO

Paolo Corradini
Mauro Krampera
Fabrizio Pane
Adriano Venditti





DICHIARAZIONE NOME COGNOME

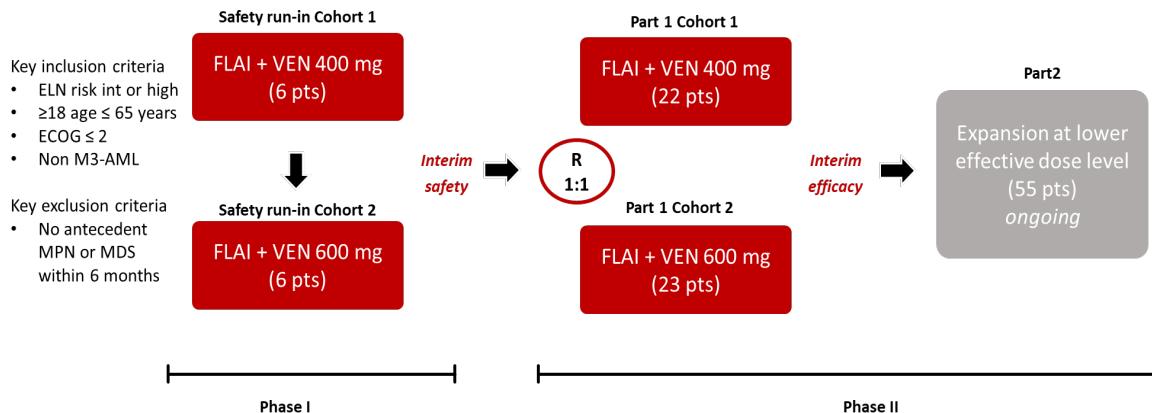
Come da nuova regolamentazione della Commissione Nazionale per la Formazione Continua del Ministero della Salute, è richiesta la trasparenza delle fonti di finanziamento e dei rapporti con soggetti portatori di interessi commerciali in campo sanitario.

- Posizione di dipendente in aziende con interessi commerciali in campo sanitario: **NIENTE DA DICHIARARE**
- Consulenza ad aziende con interessi commerciali in campo sanitario: **Novartis, Astellas, Jazz Pharmaceuticals, Astra-Zeneca, Janssen, Medac, Pfizer, Amgen, Servier, BMS, Abbvie, Gilead, Kyte-Gilead,**
- Fondi per la ricerca da aziende con interessi commerciali in campo sanitario: **Jazz Pharamaceuticals**
- Partecipazione ad Advisory Board **Novartis, Astellas, Jazz Pharmaceuticals, Astra-Zeneca, Pfizer, Servier, Gilead, Kyte-Gilead**
- Titolarità di brevetti in compartecipazione ad aziende con interessi commerciali in campo sanitario: **NIENTE DA DICHIARARE**
- Partecipazioni azionarie in aziende con interessi commerciali in campo sanitario: **NIENTE DA DICHIARARE**
- Altro: **NIENTE DA DICHIARARE**



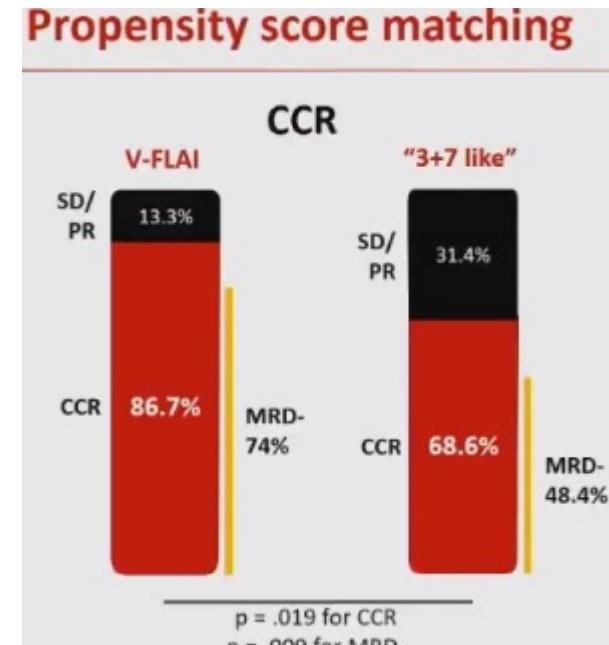
AML

- Conventional chemotherapy
 - *DNR 60 mg vs 90 mg*
 - *Ven plus FLA-Ida front-line*
 - *FLA-Ida vs CPX-351 in specific genetic signatures*
- Ven plus HMA as a backbone for triplets
 - *Plus sabatolimab, magrolimab, siremadlin, etc.....*
- Role of MRD
 - *Efficacy of new iCHT combination*
 - *Discontinuation therapy for less intensive approaches*

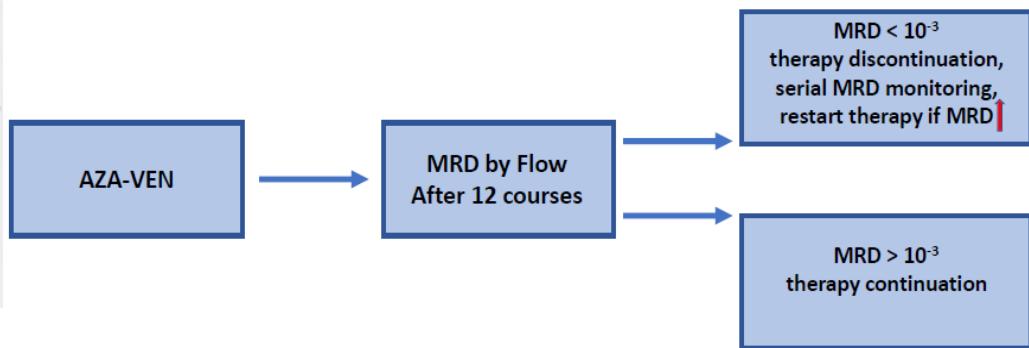
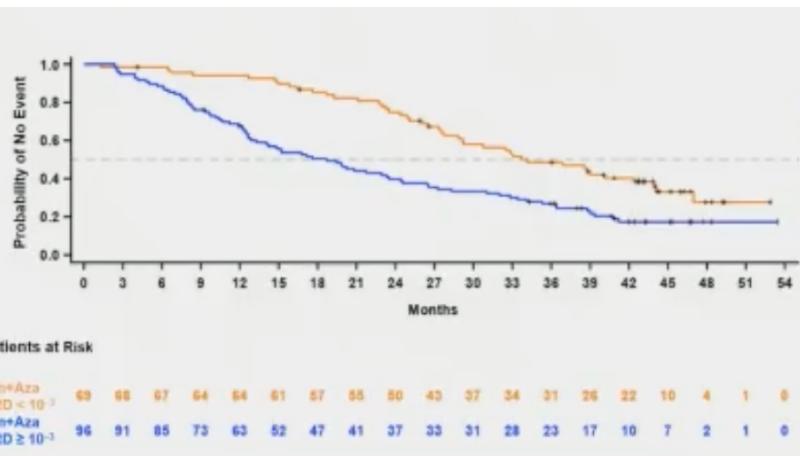


Conclusions:

- ✓ V-FLAI allows high CR rates
- ✓ Projected 1-year OS and DFS > 75%
- ✓ Safety profile is manageable
- ✓ Study extension warranted



Piciocchi A, ASH 2022 abstr n. 59
Marconi G, ASH 2022 abstr n. 710

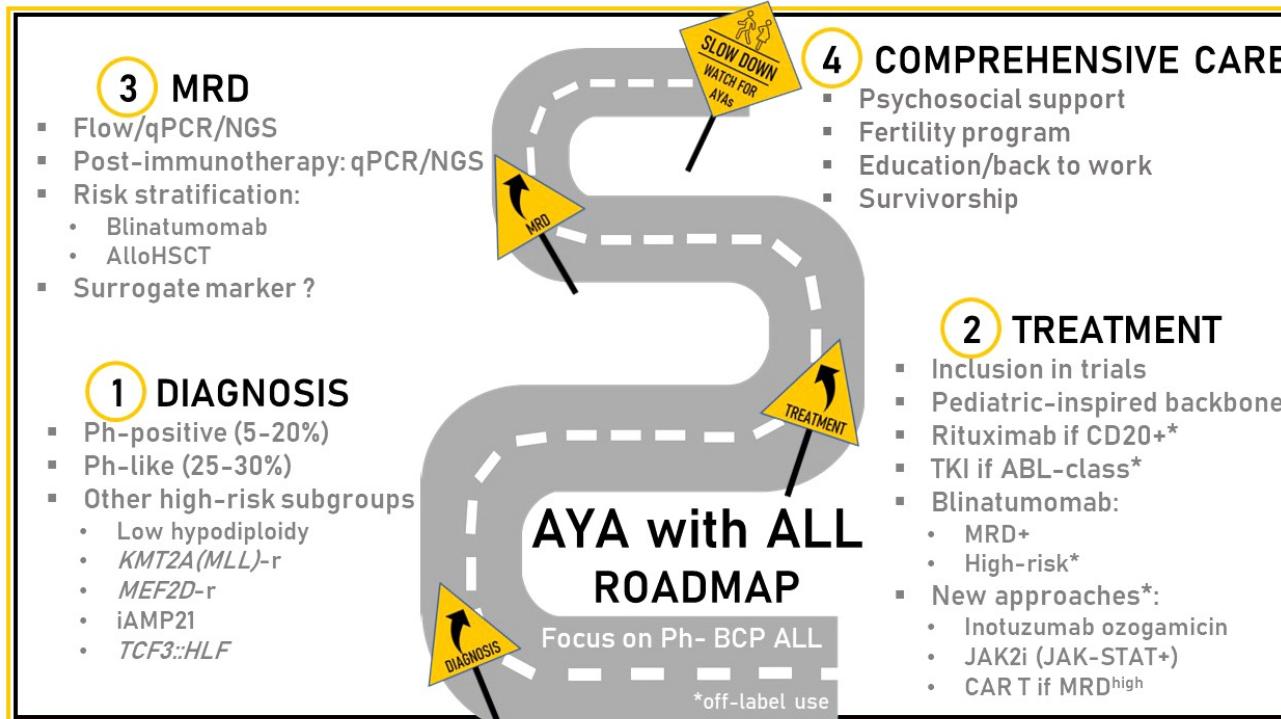


Median OS for MRD $< 10^{-3}$: 34.2 mos
Median OS for MRD $> 10^{-3}$: 18.7 mos

Wei A, trial proposal



ALL





- Addition of blinatumomab at consolidation 2 for high-risk patients or as bridge to transplant

High-Risk Patients

Blinatumomab

- From Wk 12, as part of chemotherapy backbone
- 5 cycles: 2 in consolidation and 3 in maintenance
- 28 mg/day continuous IV infusion for 4 wk

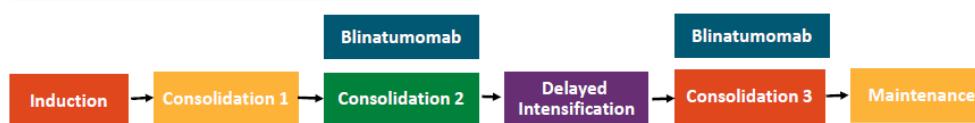
Patients Eligible for alloHSCT (VHR)

Blinatumomab

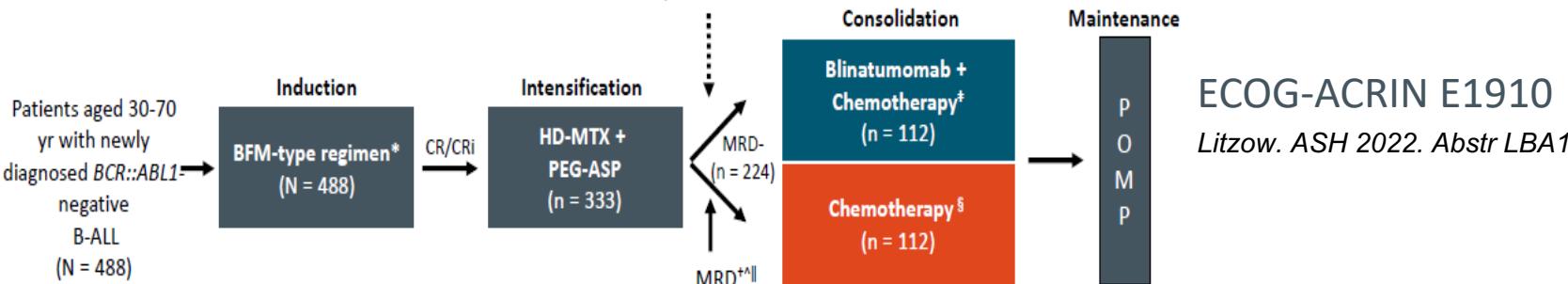
- Administered continuously as bridge to transplant
- ≥4-wk exposure to blinatumomab before HSCT

GRAALL-2014/B Trial

Boissel N, ASH 2022, abstr no. 211



Stratified by age (< or >55 yr), CD20 status, rituximab use,
HSCT intent, MRD at randomization



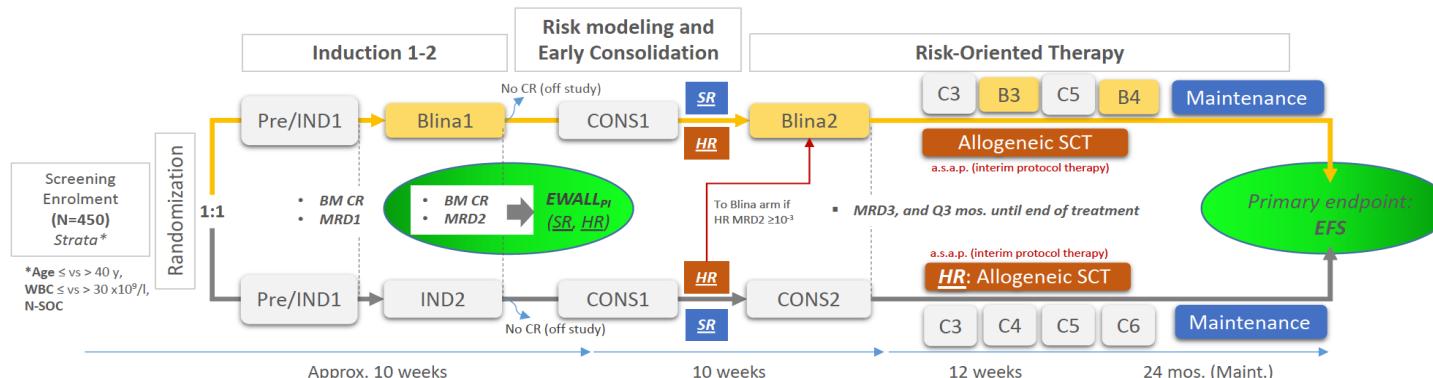
ECOG-ACRIN E1910

Litzow. ASH 2022. Abstr LBA1



«Accademia» Phase 3 Trial

- Ph- B-ALL, age 18-55 Y (N=450)
- International investigator-initiated trial (sponsor: GIMEMA)
- Randomisation (1:1) to induction/consolidation with or w/o SC Blinatumomab (replacing SOC elements)
- National SOC (by ALL Group)
 - GIMEMA, HOVON, NCRI (UK), PETHEMA
- Risk-oriented chemo or Allo-SCT design
- Homogeneous risk stratification (EWALL [UKALL] Prognostic Index)



N-SOC, National standard of care

EWALL_{PI}, prognostic index (standard- and high-risk)

IND/CONS: Induction/consolidation cycle (N-SOC)

Blina/B: SC Blinatumomab cycle

Endpoints	
Primary	<ul style="list-style-type: none"> Primary EFS MRD_{neg} CR (C2) vs relapse, MRD relapse (10⁻³), death
Secondary	<ul style="list-style-type: none"> OS CR CMR RFS MRD RFS CIR Standard EFS SCT Toxicity QoL



«Accademia» Phase 3 Trial

