

4 cases of Grade  $\geq 3$  CRS (n=4, 10.3%) and 3 cases of Grade  $\geq 3$  NT (n=3, 7.7%). Following CNCT19 infusion, all the patients recovered. No death cases were reported due to CRS or NT.

CNCT19 CAR-T cell therapy achieved a high rate of MRD-negative complete remission in adult patients with R/R B-cell ALL. Thus, with its distinct CAR structure containing a unique CD19 scFv (HI19a), CNCT19 provides effective treatment with potential long-term clinical benefits for adult patients with R/R B-cell ALL.

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## Sp10

### Personalized Dendritic Cell Vaccines

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Due to their ability to cross-present antigens associated with tumor cells to naive T cells, DCS play an important role in generating specific T-cell-mediated antitumor effector responses in controlling tumor growth and tumor cell dissemination. Clinical trials in this area have demonstrated the possibility of immunotherapy based on dendritic cells. In the current study, we give a brief overview of the biology of DC, describe the sources of obtaining tumor-associated antigen, and also consider the current status of the field of application of DC as anti-cancer vaccines.

**Methodology:** Peripheral blood mononuclears were used in the work, as well as lung tumor cells, from which tumor lysate was obtained. Tumor lysate was obtained by freezing and thawing a cell suspension by placing an ampoule with cells in liquid nitrogen or warm water, respectively. Dendritic cells were obtained by culturing human peripheral blood monocytes. The key cytokines used in the cultivation of DC from monocytes are GM-CSF and interleukin-4 (IL-4). DC was loaded with antigens after replacing the culture medium with the addition of tumor lysate to the cells and incubation for 2 hours. The main way to assess the quality of the vaccine created on the basis of DC was the method of flow cytometry. The main characteristics by which DC is evaluated are the immunophenotype and the percentage of living cells.

**Conclusion:** The proven method of obtaining dendritic cells loaded with tumor lysate makes it possible to apply this approach more widely in oncological practice. The use of an antitumor vaccine based on autologous dendritic cells for the prevention of relapses may become a new way of adjuvant treatment.

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## Sp11

### CPI - Clalit Proactive and Preventative Intervention

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Clalit is the largest HMO in Israel that insures more than 4.7 million people and the second HMO worldwide after Kaiser in USA. CPI - Clalit Proactive and Preventative Intervention, is the flag project innovation of clalit community division, in collaboration with clalit research institute and clalit digital division. This innovation combines big data, medical databases, artificial intelligence and a complex computer algorithm, which guides the doctor during the visit, to provide evidence-based personalized knowledge.

No more, surrogate outcomes but rather pure major events outcome. The vision - Patients will receive a proactive and preventive care suitable to their current condition based on the most updated clinical guidelines in an attempt to reduce the gaps in good clinical practice and combined them together to a pure handy knowledge for the primary care physician. The former name of the project Was POEMS -Patient oriented evidence that matters meaning we treat our patients in order to improve their morbidity and to reduce their mortality.

For example, Diabetes is a major issue at the primary care clinic. When I started to practice medicine there were 3-treatment option: Sulphonyls urea Metformin and Insulin. Unfortunately, nowadays there are more than 60 drugs on the shelf, each one of them with pros and cons, and as the one responsible for the evidence based care, it is hard and almost impossible to remember the names, the inclusion criteria and the adverse effect of each drug concerning the patient history.

We used the current guidelines from the American Diabetes Association and converted those guidelines to the Israeli basket aiming to give the right medication to the right patient considering the patient morbidity as; Atherosclerotic disease, Heart Failure, and Chronic Kidney Disease. Expert committees create an ideal "clinical pathway" for each clinical condition and so, patients "travel" through these pathways every single day and gather their personalized recommendations. CPI can advise to add another diabetic medication for the patient, while taking into account his cardiac, kidney and liver functions. Detailed Explanation is available for each recommendation from Dynamed ([www.dynamed.com](http://www.dynamed.com))

This is already happening nowadays, more than 1500 physicians, half of the primary care physician at Clalit use this platform.

In 7 years the WHO is aiming to declare the world as free from hepatitis C. In march 2023 we added, hepatitis C as a major issue at CPI. We developed strict algorithm by Artificial Intelligence according to patient's risk factors. The patients are sent to Antibody Blood test (AB for Hepatitis C). People

with positive AB will automatically pass PCR test, those that are positive will be presented to the physician at the CPI screen, guiding him to prescribe one out of the two anti-viral treatment for hepatitis C while checking beyond the screen the cross reaction between the patient chronic medications and the new viral medication against Hepatitis C .

BY the end of 2023 we are going to launch our last version of hypertension treatment according to the new version of the JNC as the same manner as diabetes. Couple of weeks later we will launch the CPI model for primary CVD treatment

according to the evidence based guidelines supported by remote monitoring at the patient own and comfort environment using blood pressure gauge and glucose sensors that can broadcast the output directly to the patient record and CPi.

CPi is a breakthrough platform for Clinicians. Our routine quote for the busy physician is that 3 clicks for an answer are 2 clicks too much.

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