HEMATOLOGY, TRANSFUSION AND CELL THERAPY

www.htct.com.br

Speech Summaries

01

Z-EMATOLOGY IN TURKEY

Birol Güvenç

Çukurova Üniversitesi Tıp Fakültesi Hastanesi

In alignment with this vision, we are excited to introduce a new initiative: Z-Ematology. This concept is designed to bridge the gap between Generation Z and the evolving field of hematology. The new generation brings fresh perspectives and skills, especially in areas such as artificial intelligence, big data, telemedicine, and digital health technologies. Z-Ematology reflects our belief that adapting to these trends is essential for the future of hematology, and we are committed to integrating innovation into every aspect of the profession.

https://doi.org/10.1016/j.htct.2024.11.083

02

OPTIMIZATION OF IMID-BASED THERAPIES

Murat Çınarsoy

Şanlıurfa Mehmet Akif Inan Training And Research Hospital, Hematology Department

The word optimization, meaning "to achieve the best possible," is a branch of science called the science of the best. It has also created a field within the health care system, which is a complex system, called "medical optimization". Medical optimization is defined as "a person-centered approach to the safe and effective use of medicines to ensure that people achieve the best possible outcomes from treatment. In this context, what can be said on the basis of the treatment of myeloma and the use of IMIDs? Multiple myeloma is a disease of advanced age. Although there are classical findings such as anemia, bone disease, loss of renal function, hypercalcemia, a significant proportion of patients suffer from sleep disorders, anxiety and depression, pain, malnutrition, which are not less common than classical signs and symptoms and lead to serious deterioration in the patient's quality of life. Due to the advanced age of most patients, polypharmacy, defined as the use of 4 or more drugs, can reach 80% in multiple myeloma patients, while inappropriate drug complications can reach 50%. Treatment compliance was 68% and treatment discontinuation rate was 36%. In this case, it is clear that multiple myeloma treatment optimization cannot be achieved by considering multiple myeloma treatment only as applying the appropriate drug combination.In order to ensure the optimization of IMID-based therapies, it is necessary to take a broad perspective. This perspective should include the correct selection of the patient to be treated with IMID, the development and implementation of IMID forms that will increase patient compliance, the use of techniques to predict the development of resistance, side effect management during treatment, preventing the increase in disease burden with appropriate maneuvers by following the disease burden after treatment, and drug-free follow-up. It is recommended to avoid thalidomide in the presence of peripheral neuropathy, to prefer other agents instead of lenalidomide in the presence of renal function loss, and to avoid pomalidomide in patients with COPD. Nex-20, a once-monthly subcutaneous formulation of lenalidomide, is expected to be an important breakthrough in improving patient compliance. Prediction of which patients will develop resistance will be very useful in order to have the best treatment outcomes.Calculation of miRNA risk scores, measurement of lenalidomide metabolite levels in urine, measurement of cereblon levels in blood, or immunohistochemical detection of cereblon levels are some of the methods currently being tried to predict disease resistance. Patients who develop anemia should be treated with erythropoietin, skin reactions should be treated with steroids and antihistamines, diarrhea should be treated with loperamide and colestyramine, and in general, the drug should be discontinued and the same dose or a lower dose should be insisted upon. An important part of treatment is maintenance therapy with lenalidomide. Drug discontinuation is the best possible treatment outcome. In the IFM-2009, GEM2014MAIN and MASTER trials, patients receiving lenalidomide for a fixed duration stopped the drug with MRD monitoring and had prolonged PFS.

https://doi.org/10.1016/j.htct.2024.11.084