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## **9th Annual Symposium of the European LeukemiaNet**

**Mannheim January 31 to February 1, 2012**

Organizer: Prof. Dr. Rüdiger Hehlmann

### **Summary**

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The European LeukemiaNet is an EU - initiated network of excellence with the aims to support leukemia research across Europe, to improve the management of leukemia, spread excellence globally and expand knowledge.

The 9<sup>th</sup> Annual Symposium of the European LeukemiaNet (ELN) was held on January 31 to February 1, 2012 in the m:con Congress Center, Rosengarten, in Mannheim, Germany. The ELN Network management center (NMC) organized the scientific programme and provided the operational and organizational infrastructure of the symposium and workpackage (WP) meetings. This includes the scientific program, meeting facilities, catering, accommodations and reimbursement of travel costs. It was a major goal and challenge to get the members of all ELN workpackages face-to-face together. In total, 445 participants from 34 countries attended the Symposium 2012 including invited speakers from Europe and the US. The programme was available for download on the ELN homepage. Traditionally this event was combined with the Annual Symposium of the German Leukemia Network, which directly follows the ELN Symposium and in 2012 already took place for the 13<sup>th</sup> time.

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### **Scientific content of and discussion at the Symposium**

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On the first day, each ELN-Workpackage had their meeting. Challenges and new directions in leukemia and related disease entities were highlighted during the workpackage meeting in three consecutive sessions. Each WP reported on the different projects and discussed future objectives of the group for the coming year.



### Session I

**WP4** (chronic myeloid leukemia (CML)) and **WP17** (registry) discussed the updates on the electronic case report forms (eCRF) and on the organisation of the study and insurance for the EURO-SKI study. Afterwards concise summaries of upcoming clinical trials from different study groups were presented and at the end the Russian Federation Registry of pregnancy during CML has been explained. **WP7** (chronic lymphocytic leukemia (CLL)) discussed two sections, firstly the Executive Committee Report and then projects for 2012. The projects 8-colour MRD, p53 strategy, CLL clinical form and CLL accreditation in Europe were discussed. **WP8** (myelodysplastic syndromes (MDS)) discussed both general issues and the important projects of the working group. News from the fields of translational research / biobanking, GO MDS, flow cytometry, therapeutic guidelines and EUMDS registry were presented.

### Session II

**WP5** (acute myeloid leukemia (AML)) and **WP17** (registry) discussed progress on the APL registry, the AML German intergroup study and ELN/EBMT alloSCT in elderly AML. Further points were the platform facilitating meta-analyses, a model of interconnected clinical trials and new data from the Swedish population based registry. It was also presented a new trial design. Highlights in **WP6** (European working group for acute lymphoblastic leukemia (EWALL)) were the updates on Burkitt Leukemia / Lymphoma and Ph + ALL. Several aspects like the German B-NHL Protocol 2002, the final results of the Spanish PETHEMA group in BLL, HIV + and negative patients or Post SCT strategies and salvage approaches in Ph+ ALL were considered. **WP11** (cytogenetics) and **WP13** (gene profiling) started jointly with presentations on the comprehensive molecular profiling of T-ALL, the whole-genome sequencing in CLL and the new Cytogenetic risk score in MDS. Afterwards two separate sessions of the WPs followed parallel. WP11 reported about the activities in 2011: clinical impact of CD34+ FISH of peripheral blood cells, monosomal karyotype vs. complex karyotype in AML and the cytogenetic nomenclature. Afterwards the current research project call for rare abnormalities in MDS were discussed and at the end upcoming activities in 2012 like workshops and joint research activities were planned. WP13 discussed the second version of the leukemia gene atlas. Analysis functions and data sets were explained. Further topics have been SF3B1 and NOTCH1 mutations in CLL, experiences with amplicon NGS of mutation 'hotspots' in pediatric leukemias and ELN-wide NGS working groups (IRON Phase II).



### **Session III**

**WP10** (diagnostics) reported updates on morphology, new cells, flow cytometry and minimal residual disease. Roundtable about accreditation in flow cytometry followed. **WP12** (minimal residual disease) discussed the topics MRD detection in core binding factor AML and JAK2-V617F Q-PCR study, the latter final results were shown. Furthermore, updates on BCR-ABL standardization and MPN&MPN-EuroNet guidelines were given. **WP14** (stem cell transplantation) talked about the current projects first. Afterwards new projects concerning the topic HCT vs CT randomized study in elderly patients with AML were discussed and at the end the European recommendations for the treatment of GvHD.

The joint ELN/ESF-ELN Steering Committee Meeting followed at the evening on the first day, which was by invitation only (separate protocol).

On the second day, each workpackage summarized results in a plenary session. Five keynote lectures followed, with invited speakers from Europe and US. A broad subject area within the leukemia research field was approached. N. Heisterkamp from Los Angeles showed a review of the evidence that BCR-ABL causes leukemia, R. Silver from New York answered the question “Is polycythemia vera curable?” and D. Nowak from Mannheim presented frequent pathway mutations of splicing machinery in myelodysplasia. Afterwards C. Schiffer from Detroit explained the intricacies of interactions between academic physicians and pharmaceutical companies and C. Haferlach from Munich presented the impact of cytogenetic aberrations versus mutations in AML.

In the ELN **General Assembly** seven new institutions were included, so that to date 189 institutions participate from 38 countries. There were four new countries, namely Armenia, Bosnia and Herzegovina, Moldova and USA.

The eighth information letter was prepared for the symposium in 2012, highlighting the current progress on projects and listing studies and upcoming meetings. It fosters cooperation amongst network members and informs the public on current topics in leukemia.



## **Assessment of results and impact of the Symposium on the future direction of the field**

The 9<sup>th</sup> Annual Symposium highlighted upfront European research in leukemia, also reaching out to other continents like the US. Leukemia is a rare disease and European clinical trials are important to gain a broad patient collective, to discuss and compare results and offer optimal treatment for patients. European harmonisation efforts are of major importance for progress in all leukemias. Important activities include consensus decisions in clinical study endpoints, the set up of patient registries for all leukemias, common standardisation procedures and classification systems in diagnosis and follow up (molecular monitoring, cytogenetics, minimal residual disease assessment) but also harmonisation in data evaluation and reporting. Cooperative research is the only way to cure leukemia.

The ELN offers innovative ideas and internationally recognized researchers. The ELN integrates a large portfolio of new disease markers, novel targets, drugs, drug-combination and dose-optimisation studies, vaccination approaches and next generation high-throughput technologies developed in a harmonised setting of European collaborations. All WPs and projects are the basis for high quality research, essential for European excellence in the field of leukemia and cure of leukemia. This impacts patients, health care economics and society and results in faster implementation of best treatment options for all patients across Europe.

An interesting direction is given by a multinational effort in CML, the Euro-SKI study, which is planned by 75 partners from 18 countries. So far CML patients have to take an expensive medication for life. In this study the medication will be stopped and the duration where the patient is free of disease (major molecular response) will be assessed. The study could result in a major impact on the quality of life of patients, but also on the socio-economic burden.

**Final Programme; full list of speakers and participants are attached in separate files.**