Stratégia vyliečenia myelómu

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Škola myelómu 9. september 2017

Čestné prehlásenie

Pri tejto prednáške nevznikol žiadny konflikt záujmov

OBSAH

2002 Becca Levy, Miami

2010 Sigurdur Y Kristinsson, Island

2011 Victoria Mateos a San Miguel, Navarra

2013 Roberto J. Pessoa-Magalhães., Salamanca

2014 Bart Barlogie, Arkansas

2015 Jakub Krejčí, Amsterdam

2016 Bruno Paiva, Navarra

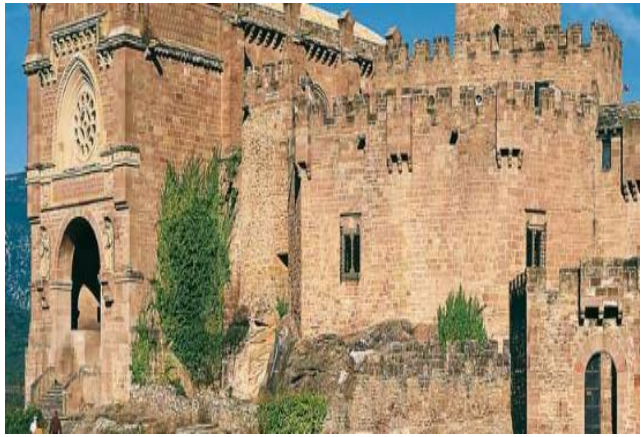
2016 Roumen Bezergianov, Arizona

2017 Karthik Ramasamy, Oxford

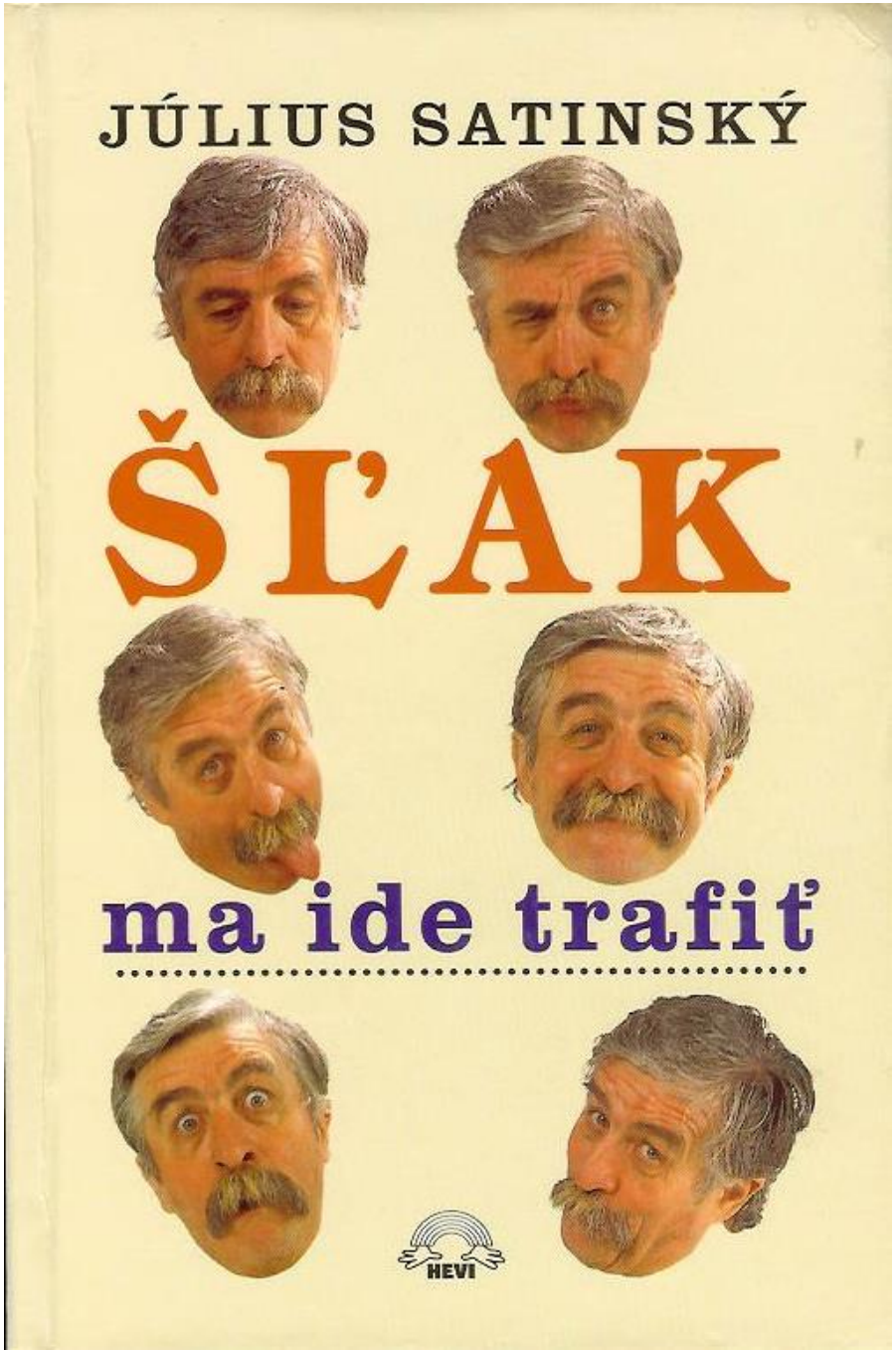








Šľak ma ide trafiť...z vyliečenia myelómu



ATTITUDES AND SOCIAL COGNITION

Longevity Increased by Positive Self-Perceptions of Aging

Becca R. Levy and Martin D. Slade
Yale University

Suzanne R. Kunkel
Miami University

Stanislav V. Kasl
Yale University

This research found that older individuals with more positive self-perceptions of aging, measured up to 23 years earlier, lived 7.5 years longer than those with less positive self-perceptions of aging. This advantage remained after age, gender, socioeconomic status, loneliness, and functional health were included as covariates. It was also found that this effect is partially mediated by will to live. The sample consisted of 660 individuals aged 50 and older who participated in a community-based survey, the Ohio Longitudinal Study of Aging and Retirement (OLSAR). By matching the OLSAR to mortality data

Research

Original Investigation

The Role of Diagnosis and Clinical Follow-up of Monoclonal Gammopathy of Undetermined Significance on Survival in Multiple Myeloma

Elin Edda Sigurdardottir, BS; Ingemar Turesson, MD, PhD; Sigrun Helga Lund, PhD; Ebba K. Lindqvist, MD; Sham Mailankody, MD; Neha Korde, MD; Magnus Björkholm, MD, PhD; Ola Landgren, MD, PhD; Sigurdur Y. Kristinsson, MD, PhD

Invited Commentary page 174

Supplemental content at jamaoncology.com

IMPORTANCE Multiple myeloma (MM) is consistently preceded by the precursor state, monoclonal gammopathy of undetermined significance (MGUS). The average annual risk of progression from MGUS to multiple myeloma is 0.5% to 1.0%. Current guidelines suggest life-long clinical follow-up of individuals diagnosed as having MGUS depending on risk stratification. The impact of diagnosing and conducting clinical follow-up of MGUS on MM survival is unclear.

OBJECTIVE To estimate the impact of prior knowledge of MGUS diagnosis and comorbidities on MM survival.

Can multiple myeloma become a curable disease?

Jesús F. San-Miguel and María-Victoria Mateos

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E-mail: sanmigiz@usal.es or mvmateos@usal.es *doi:10.3324/haematol.2011.051169*

For decades, multiple myeloma (MM) has been considered a disease of the elderly, with few therapeutic options apart from alkylators and corticosteroids. The treatment goal was disease control, with response rates of 50%, with occasional complete responses (CRs) and median survival of 2-3 years.[1] In fact, a cure was considered unattainable. It is possible that this state of affairs, which has lasted for more than 30 years, is the reason why the myeloma community has developed a rather conservative outlook.

The introduction of high-dose therapy followed by autologous stem cell support (HDT/ASCT) produced three important changes in the myeloma landscape: i) CR in 15-30% of patients; ii) the possibility of long treatment-free periods with excellent quality of life (QoL); and iii) prolongation of survival by one year.[2] Nevertheless, the greatest change has occurred in the last decade with the discovery of novel agents such as immunomodulatory drugs (thalidomide and lenalidomide) and proteasome inhibitors (bortezomib). These have contributed to doubling survival in myeloma patients as compared to the 1990s when only chemotherapy was used.[3,4]

Despite the fact that, until recently, MM was considered incurable, the introduction of HDT and novel drugs has

Analysis of the immune system of multiple myeloma patients achieving long-term disease control by multidimensional flow cytometry

Roberto J. Pessoa de Magalhães,[1,2] María-Belén Vidriales,[1,3] Bruno Paiva,[1,3] Carlos Fernandez-Gimenez,[4] Ramón García-Sanz,[1,3] Maria-Victoria Mateos,[1,3] Norma C. Gutierrez,[1,3] Quentin Lecrevisse,[4] Juan F Blanco,[1] Jose Hernández,[5] Natalia de las Heras,[6] Joaquin Martinez-Lopez,[7] Monica Roig,[8] Elaine Sobral Costa,[8] Enrique M. Ocio,[1,3] Martin Perez-Andres,[4] Angelo Maiolino,[2] Marcio Nucci,[2] Javier De La Rubia,[9] Juan-Jose Lahuerta,[7] Jesús F. San-Miguel,[1,3] and Alberto Orfao[4] on behalf the Spanish Myeloma Group (GEM) and Grupo Castellano-Leones de Gammapatias Monoclonales, cooperative study groups

[1]Hospital Universitario de Salamanca, Salamanca, Spain; [2]Serviço de Hematologia, Universidade Federal do Rio de Janeiro, Rio de Janeiro, Brazil; [3]Instituto de Investigación Biomédica de Salamanca (IBSAL), Salamanca, Spain; [4]Centro de Investigación del Cáncer (CIC, IBMCC USAL-CSIC); Servicio General de Citometría, Universidad de Salamanca, Salamanca, Spain; [5]Hospital General de Segovia, Segovia, Spain; [6]Complejo Hospitalario de León, Leon, Spain; [7]Hospital 12 de Octubre, Madrid, Spain; [8]Serviço de Hematologia Pediátrica - IPPMG, Universidade Federal do Rio de Janeiro, Rio de Janeiro, Brazil, and [9]Hospital Universitário La Fe, Valencia, Spain

ABSTRACT

Perspectives

Curing myeloma at last: defining criteria and providing the evidence

Bart Barlogie,[1] Alan Mitchell,[2] Frits van Rhee,[1] Joshua Epstein,[1] Gareth J. Morgan,[1] and John Crowley[2]

[1]Myeloma Institute for Research and Therapy, University of Arkansas for Medical Sciences, Little Rock, AR; and [2]Cancer Research And Biostatistics, Seattle, WA

Does the dogma that multiple myeloma is incurable still hold?. The genomic chaos and resulting resistance to apoptosis of myeloma, long considered an obstacle to cure, formed the basis of Total Therapy (TT) program. The TT approach uses all myeloma-active drugs upfront to target drug-resistant subclones during initial treatment to prevent later relapse. Long-term follow-up of 1202 patients (TT1: n = 231, median follow-up: 21 years; TT2: 668, median follow-up: 12 years; TT3a: n = 303, median follow-up: 9 years) permitted investigation of whether progression-free survival (PFS) and complete response (CR) duration were consistent with curability, ie observation of plateaus in Kaplan-Meier plots for PFS and CR duration. In the subset of 627 patients with plasma cell gene expression profiling data, cure plateaus were apparent at 5 years in the 14% with high-risk myeloma compared with 10 years in the remainder with low-risk disease. A parametric model based on PFS and CR duration supported an increase in curability: 10-year PFS and CR estimates increased from 8.8%/17.9% in TT1 to 15.5%/28.2% in TT2's control arm to 25.1%/35.6% in TT2's thalidomide arm and to 32.9%/48.8% in TT3a. Toward developing novel therapies, we recommend a concerted focus on patients with high-risk myeloma whose outcome has not been advanced. (*Blood*. 2014;124(20):3043-3051)

Blood First Edition Paper, prepublished online May 24, 2016; DOI 10.1182/blood-2015-12-687749

Daratumumab Depletes CD38^{+} Immune-regulatory Cells, Promotes T-cell Expansion, and Skews T-cell Repertoire in Multiple Myeloma

SHORT TITLE: Effects of Daratumumab on Immune-regulatory Cells

Jakub Krejcik, MD*[,1,2]; Tineke Casneuf, PhD*[,3]; Inger S. Nijhof, MD[1]; Bie Verbist, PhD[3]; Jaime Bald, BS[4]; Torben Plesner, MD[2]; Khaja Syed, MS[4]; Kevin Liu, PhD[5]; Niels W.C.J. van de Donk, MD[1]; Brendan M. Weiss, MD[6]; Tahamtan Ahmadi, MD[4]; Henk M. Lokhorst, MD[1]; Tuna Mutis, MD**[,1]; and A. Kate Sasser, PhD**[,4]

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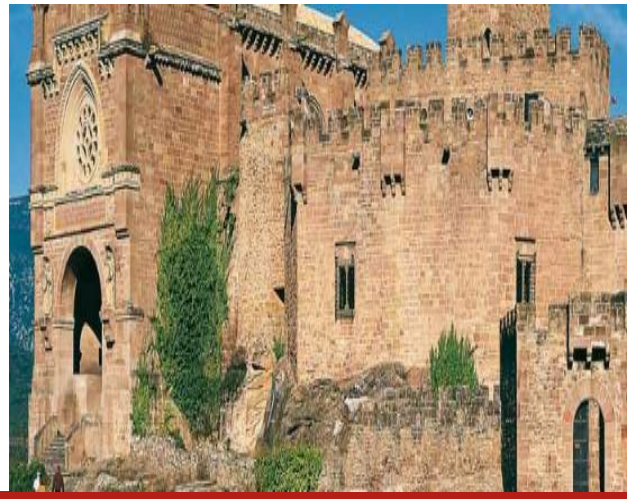

Regular Article

blood

CLINICAL TRIALS AND OBSERVATIONS

Minimal residual disease monitoring and immune profiling in multiple myeloma in elderly patients

Bruno Paiva,[1] Maria-Teresa Cedena,[2] Noemi Puig,[3] Paula Arana,[1] Maria-Belen Vidriales,[3] Lourdes Cordon,[4] Juan Flores-Montero,[5] Norma C. Gutierrez,[3] María-Luisa Martín-Ramos,[2] Joaquin Martinez-Lopez,[2] Enrique M. Ocio,[3] Miguel T. Hernandez,[6] Ana-Isabel Teruel,[7] Laura Rosiñol,[8] María-Asunción Echeveste,[9] Rafael Martinez,[10] Mercedes Gironella,[11] Albert Oriol,[12] Carmen Cabrera,[13] Jesus Martin,[14] Joan Bargay,[15] Cristina Encinas,[16] Yolanda Gonzalez,[17] Jacques J. M. Van Dongen,[18] Alberto Orfao,[5] Joan Bladé,[8] Maria-Victoria Mateos,[3] Juan José Lahuerta,[2] and Jesús F. San Miguel,[1] on behalf of the Grupo Español de Mieloma/Programa para el Estudio de la Terapéutica en Hemopatías Malignas (GEM/PETHEMA) Cooperative Study Groups

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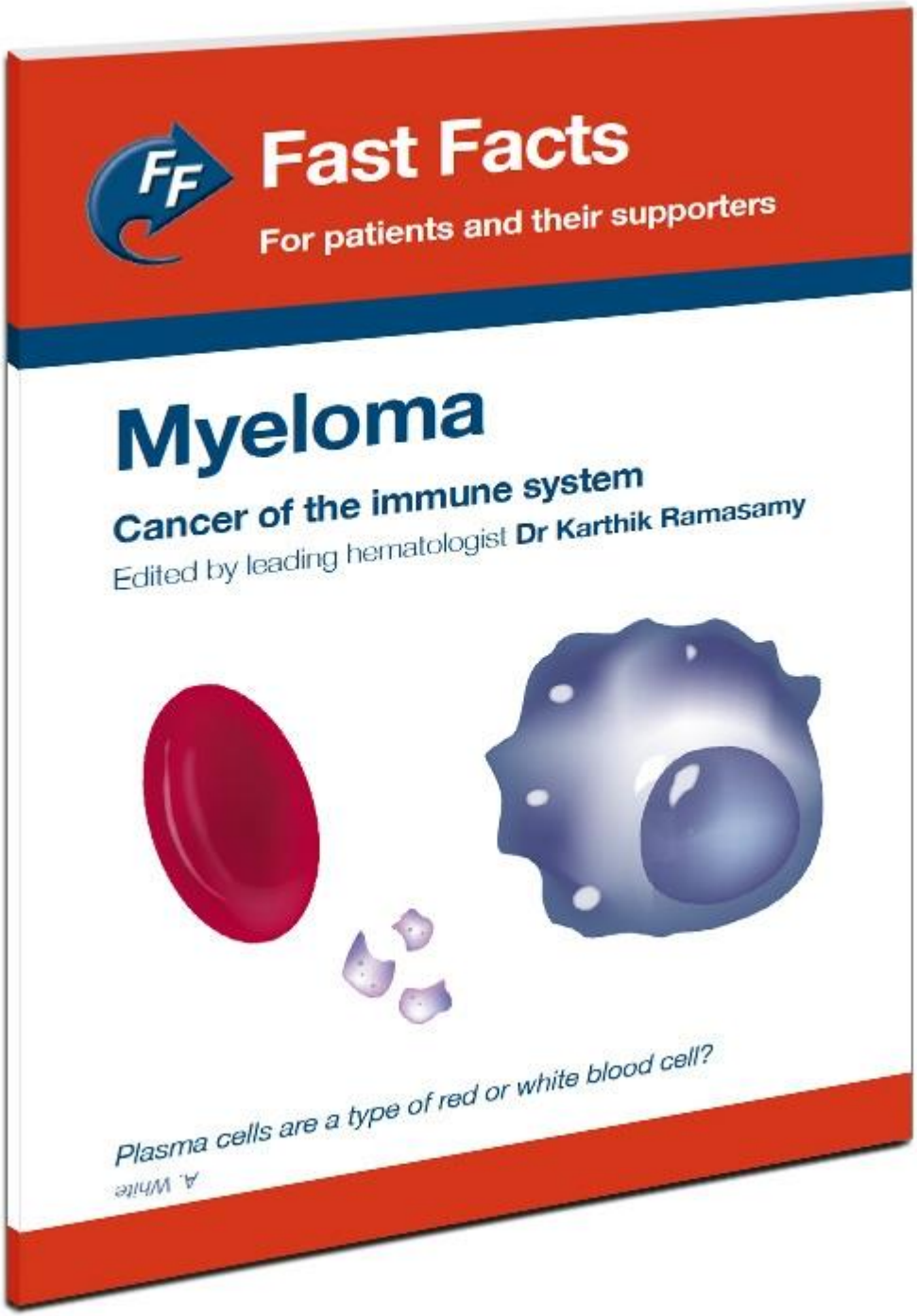
ROUMEN BEZERGIANOV
ŠACH ROZVÍJA
OSOBNOSŤ


Fast Facts
For patients and their supporters
Myeloma
Cancer of the immune system
Edited by leading hematologist Dr Karthik Ramasamy
Plasma cells are a type of red or white blood cell?
A. White

POZVÁNKA

Ústav experimentálnej onkológie, BMC SAV, Bratislava

Lekárska fakulta UK, Bratislava

International Forgiveness Institute, University of Wisconsin-Madison

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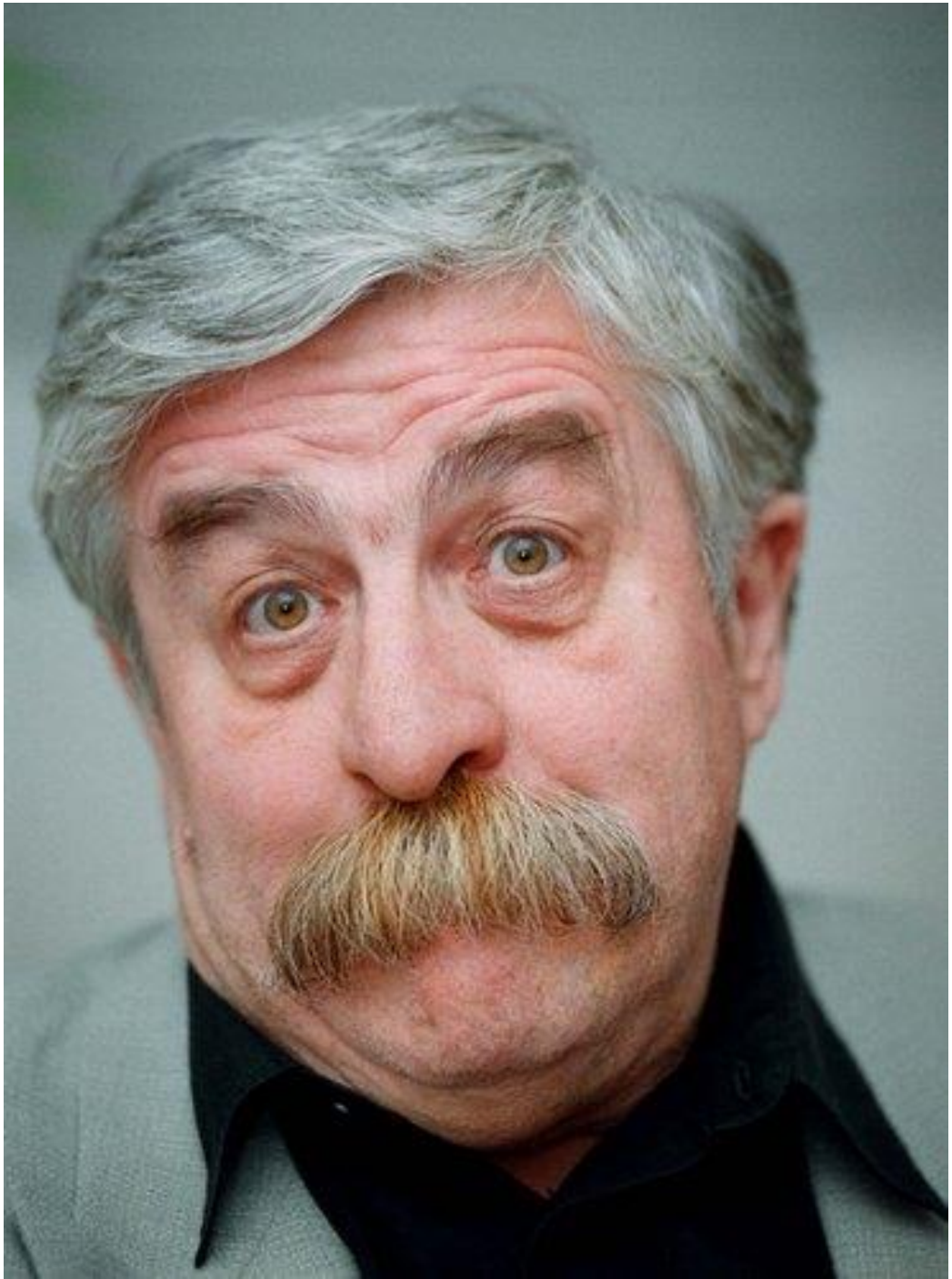






Ďakujem

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