WEBVTT NOTE duration:"01:12:55.4880000" NOTE language:en-us NOTE Confidence: 0.8253415 00:00:00.000 --> 00:00:03.232 OK, good afternoon everyone it's 12:00 NOTE Confidence: 0.8253415  $00:00:03.232 \rightarrow 00:00:06.914$  PM on this beautiful Friday and today NOTE Confidence: 0.8253415  $00:00:06.914 \rightarrow 00:00:10.735$  is the next session and our yield. NOTE Confidence: 0.8253415  $00:00:10.740 \rightarrow 00:00:12.740$  Hematology hash highlights from NOTE Confidence: 0.8253415  $00{:}00{:}12.740 \dashrightarrow 00{:}00{:}15.240$  the 2020 American Society of NOTE Confidence: 0.8253415 00:00:15.240 --> 00:00:17.160 Hematology Meeting highlights. NOTE Confidence: 0.8253415 00:00:17.160 --> 00:00:21.072 So as you can see on the agenda NOTE Confidence: 0.8253415  $00:00:21.072 \rightarrow 00:00:24.119$  in the last few weeks, NOTE Confidence: 0.8253415  $00:00:24.120 \longrightarrow 00:00:26.260$  we covered multiple myeloma, NOTE Confidence: 0.8253415 00:00:26.260 --> 00:00:28.494 lymphoid malignancies, myeloid malignancies, NOTE Confidence: 0.8253415  $00:00:28.494 \rightarrow 00:00:31.404$  and pediatric leukemia and hematology. NOTE Confidence: 0.8253415  $00:00:31.410 \rightarrow 00:00:35.022$  And today we will be discussing NOTE Confidence: 0.8253415 00:00:35.022 --> 00:00:36.828 classical or B9, NOTE Confidence: 0.8253415

 $00:00:36.830 \rightarrow 00:00:39.840$  but not so benign hematology.

- NOTE Confidence: 0.83330727
- $00:00:54.230 \longrightarrow 00:00:56.450$  So as usual, many abstracts are
- NOTE Confidence: 0.83330727
- $00{:}00{:}56{.}450 \dashrightarrow 00{:}00{:}58{.}410$  presented in about classical hematology
- NOTE Confidence: 0.83330727
- $00:00:58.410 \rightarrow 00:01:00.465$  in the ash mythology meeting.
- NOTE Confidence: 0.83330727
- $00{:}01{:}00{.}470 \dashrightarrow 00{:}01{:}02{.}906$  However, due to time limitations the focus
- NOTE Confidence: 0.83330727
- $00:01:02.906 \rightarrow 00:01:05.930$  will be on the most prominent abstracts,
- NOTE Confidence: 0.83330727
- $00{:}01{:}05{.}930 \dashrightarrow 00{:}01{:}08{.}390$  and the ones that have the
- NOTE Confidence: 0.83330727
- $00:01:08.390 \longrightarrow 00:01:10.030$  highest clinical relevance to
- NOTE Confidence: 0.83330727
- 00:01:10.108 --> 00:01:12.598 practice on on a day-to-day basis.
- NOTE Confidence: 0.83330727
- $00{:}01{:}12.600 \dashrightarrow 00{:}01{:}15.765$  The abstracts will be grouped
- NOTE Confidence: 0.83330727
- $00:01:15.765 \longrightarrow 00:01:18.297$  in areas of clinical.
- NOTE Confidence: 0.83330727
- $00{:}01{:}18.300 \dashrightarrow 00{:}01{:}20.932$  Unmet need and there are many other
- NOTE Confidence: 0.83330727
- $00{:}01{:}20{.}932 \dashrightarrow 00{:}01{:}23{.}566$  abstracts of course that are very good that
- NOTE Confidence: 0.83330727
- $00:01:23.566 \dashrightarrow 00:01:26.440$  we do not have the time to cover today.
- NOTE Confidence: 0.83330727
- $00{:}01{:}26{.}440 \dashrightarrow 00{:}01{:}28{.}112$  Important to note that
- NOTE Confidence: 0.83330727
- $00{:}01{:}28.112 \dashrightarrow 00{:}01{:}29.366$  these abstracts represent.
- NOTE Confidence: 0.83330727

 $00:01:29.370 \rightarrow 00:01:30.806$  Often preliminary presentations and

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 $00{:}01{:}30.806 \dashrightarrow 00{:}01{:}33.422$  data that has not been yet completely

NOTE Confidence: 0.83330727

 $00:01:33.422 \rightarrow 00:01:35.804$  vetted or peer reviewed or finalized.

NOTE Confidence: 0.83330727

 $00:01:35.810 \rightarrow 00:01:38.850$  So we have to take that into consideration.

NOTE Confidence: 0.83330727

 $00{:}01{:}38.850 \dashrightarrow 00{:}01{:}41.272$  As we discussed the data we like

NOTE Confidence: 0.83330727

 $00:01:41.272 \longrightarrow 00:01:43.866$  to thank the authors who shared

NOTE Confidence: 0.83330727

 $00{:}01{:}43.866 \dashrightarrow 00{:}01{:}46.818$  their presentations with us and the

NOTE Confidence: 0.83330727

 $00:01:46.818 \rightarrow 00:01:49.583$  recording of this session and the

NOTE Confidence: 0.83330727

 $00{:}01{:}49.583 \dashrightarrow 00{:}01{:}51.773$  other sessions will be available.

NOTE Confidence: 0.83330727

 $00:01:51.780 \longrightarrow 00:01:54.618$  Over the next week or so,

NOTE Confidence: 0.83330727

 $00{:}01{:}54.620$  -->  $00{:}01{:}57.805$  for those who cannot attend the live NOTE Confidence: 0.83330727

00:01:57.805 --> 00:02:01.396 sessions and the CME credit will be NOTE Confidence: 0.83330727

00:02:01.396 --> 00:02:04.061 available after filling up receive

NOTE Confidence: 0.83330727

 $00{:}02{:}04.061 \dashrightarrow 00{:}02{:}06.742$  feedback on the seminars and how

NOTE Confidence: 0.83330727

 $00:02:06.742 \rightarrow 00:02:09.210$  we can improve him going forward.

NOTE Confidence: 0.83330727

 $00:02:09.210 \dashrightarrow 00:02:12.410$  So today it's a pleasure to be joined

 $00:02:12.410 \longrightarrow 00:02:15.428$  by my colleagues Sabrina Browning,

NOTE Confidence: 0.83330727

 $00{:}02{:}15{.}430 \dashrightarrow 00{:}02{:}18{.}316$  who's our instructor in medicine and

NOTE Confidence: 0.83330727

 $00:02:18.316 \dashrightarrow 00:02:21.379$  section of Hematology who will be

NOTE Confidence: 0.83330727

 $00:02:21.379 \rightarrow 00:02:23.499$  covering bleeding and hemostasis.

NOTE Confidence: 0.83330727

00:02:23.500 --> 00:02:25.606 Sam Alexander Pienaar,

NOTE Confidence: 0.83330727

 $00:02:25.606 \rightarrow 00:02:28.414$  associate professor of medicine.

NOTE Confidence: 0.83330727

 $00:02:28.420 \longrightarrow 00:02:31.180$  Who will be covering from bosses

NOTE Confidence: 0.83330727

 $00:02:31.180 \longrightarrow 00:02:32.560$  an antithrombotic therapy?

NOTE Confidence: 0.83330727

 $00{:}02{:}32.560 \dashrightarrow 00{:}02{:}35.020$  Advances from ash and then our

NOTE Confidence: 0.83330727

 $00:02:35.020 \dashrightarrow 00:02:37.301$  bright fellow George Joshua will

NOTE Confidence: 0.83330727

00:02:37.301 --> 00:02:38.999 finish their presentations,

NOTE Confidence: 0.83330727

 $00{:}02{:}39{.}000 \dashrightarrow 00{:}02{:}40{.}840$  covering other important and

NOTE Confidence: 0.83330727

 $00:02:40.840 \dashrightarrow 00:02:42.680$  relevant classical hematology topics.

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 $00{:}02{:}42.680 \dashrightarrow 00{:}02{:}45.767$  At the end we will have Professor

NOTE Confidence: 0.83330727

00:02:45.767 --> 00:02:48.199 of Medicine Doctor Robert Bona,

00:02:48.200 --> 00:02:50.960 and our Associate Professor of Medicine,

NOTE Confidence: 0.83330727

00:02:50.960 --> 00:02:52.349 Doctor Alfred Lee,

NOTE Confidence: 0.83330727

 $00{:}02{:}52{.}349 \dashrightarrow 00{:}02{:}54{.}664$  who will moderate your questions

NOTE Confidence: 0.83330727

 $00:02:54.664 \longrightarrow 00:02:57.483$  and also be available to help

NOTE Confidence: 0.83330727

 $00{:}02{:}57{.}483 \dashrightarrow 00{:}02{:}59{.}295$  the speakers in answering.

NOTE Confidence: 0.83330727

 $00{:}02{:}59{.}300 \dashrightarrow 00{:}03{:}01{.}754$  Any of the questions that are

NOTE Confidence: 0.83330727

 $00{:}03{:}01{.}754 \dashrightarrow 00{:}03{:}04{.}210$  relevant to the abstracts presented,

NOTE Confidence: 0.83330727

 $00:03:04.210 \longrightarrow 00:03:07.480$  or any other abstracts from the

NOTE Confidence: 0.83330727

 $00{:}03{:}07{.}480 \dashrightarrow 00{:}03{:}09{.}660$  meeting that are important.

NOTE Confidence: 0.83330727

 $00{:}03{:}09{.}660 \dashrightarrow 00{:}03{:}12{.}635$  So it's my pleasure to present our

NOTE Confidence: 0.83330727

00:03:12.635 --> 00:03:14.804 first speaker, doctor Sabrina Browning,

NOTE Confidence: 0.83330727

 $00:03:14.804 \rightarrow 00:03:16.994$  who will discuss bleeding and

NOTE Confidence: 0.83330727

 $00{:}03{:}16{.}994 \dashrightarrow 00{:}03{:}18{.}590$  hemostasis without so Sabrina.

NOTE Confidence: 0.83330727

 $00:03:18.590 \longrightarrow 00:03:21.140$  Feel free to share your screen.

NOTE Confidence: 0.8116819

00:03:25.840 --> 00:03:30.215 Thank you Doctor Zayden and welcome everyone.

NOTE Confidence: 0.8116819

 $00:03:30.220 \rightarrow 00:03:31.498$  For those interested,

- NOTE Confidence: 0.8116819
- $00{:}03{:}31.498 \dashrightarrow 00{:}03{:}33.628$  we've included QR codes throughout

 $00:03:33.628 \longrightarrow 00:03:35.491$  our presentation that will link

NOTE Confidence: 0.8116819

 $00:03:35.491 \dashrightarrow 00:03:37.393$  you directly to the ASH abstracts.

NOTE Confidence: 0.8116819

 $00{:}03{:}37{.}400 \dashrightarrow 00{:}03{:}40{.}015$  You can access these by

NOTE Confidence: 0.8116819

 $00{:}03{:}40.015$  -->  $00{:}03{:}42.107$  using your smartphone camera.

NOTE Confidence: 0.8116819

 $00:03:42.110 \longrightarrow 00:03:45.140$  I have no disclosures to report.

NOTE Confidence: 0.8116819

 $00{:}03{:}45{.}140 \dashrightarrow 00{:}03{:}46{.}874$  So this slide outlines the abstracts

NOTE Confidence: 0.8116819

 $00:03:46.874 \dashrightarrow 00:03:49.166$  that I will cover today which span

NOTE Confidence: 0.8116819

 $00{:}03{:}49{.}166 \dashrightarrow 00{:}03{:}50{.}961$  disorders of platelet number or

NOTE Confidence: 0.8116819

 $00{:}03{:}50{.}961 \dashrightarrow 00{:}03{:}52{.}431$  function disorders of coagulation

NOTE Confidence: 0.8116819

 $00{:}03{:}52{.}431 \dashrightarrow 00{:}03{:}54{.}171$  and fibrinolysis and von Willebrand

NOTE Confidence: 0.8116819

 $00{:}03{:}54{.}171 \dashrightarrow 00{:}03{:}56{.}492$  disease and at the end I will

NOTE Confidence: 0.8116819

 $00{:}03{:}56{.}492 \dashrightarrow 00{:}03{:}58{.}082$  briefly touch upon abstracts that

NOTE Confidence: 0.8116819

 $00{:}03{:}58.082 \dashrightarrow 00{:}04{:}00.584$  were presented at ASH on the role

NOTE Confidence: 0.8116819

 $00:04:00.584 \rightarrow 00:04:02.000$  of convalescent plasma therapy

00:04:02.060 --> 00:04:04.004 in the management of COVID-19 and

NOTE Confidence: 0.8116819

 $00:04:04.004 \dashrightarrow 00:04:07.001$  provide an update on where we stand

NOTE Confidence: 0.8116819

00:04:07.001 --> 00:04:09.269 with this treatment currently.

NOTE Confidence: 0.8116819

 $00:04:09.270 \longrightarrow 00:04:10.347$  So to begin,

NOTE Confidence: 0.8116819

00:04:10.347 $\operatorname{-->}$ 00:04:12.142 doctor Charlotte Bradbury from the

NOTE Confidence: 0.8116819

00:04:12.142 $\operatorname{-->}$ 00:04:14.431 University of Bristol in the United

NOTE Confidence: 0.8116819

 $00:04:14.431 \longrightarrow 00:04:16.316$  Kingdom presented a late breaking

NOTE Confidence: 0.8116819

 $00:04:16.316 \longrightarrow 00:04:17.928$  abstract on the flight trial,

NOTE Confidence: 0.8116819

 $00{:}04{:}17{.}930 \dashrightarrow 00{:}04{:}19{.}354$  which is a multicenter,

NOTE Confidence: 0.8116819

 $00:04:19.354 \rightarrow 00:04:21.134$  randomized trial evaluating the addition

NOTE Confidence: 0.8116819

 $00{:}04{:}21{.}134 \dashrightarrow 00{:}04{:}23{.}348$  of mycophenolate to standard of care.

NOTE Confidence: 0.8116819

 $00{:}04{:}23.350 \dashrightarrow 00{:}04{:}24.622$  Corticosteroids in the management

NOTE Confidence: 0.8116819

 $00{:}04{:}24.622 \dashrightarrow 00{:}04{:}26.212$  of patients with newly diagnosed

NOTE Confidence: 0.8116819

 $00:04:26.212 \longrightarrow 00:04:27.320$  immune thrombocytopenia.

NOTE Confidence: 0.8116819

 $00:04:27.320 \rightarrow 00:04:30.071$  This study was developed due to the

NOTE Confidence: 0.8116819

 $00:04:30.071 \rightarrow 00:04:32.073$  heterogeneous responses in ITP to

- NOTE Confidence: 0.8116819
- $00{:}04{:}32{.}073 \dashrightarrow 00{:}04{:}33{.}973$  first line steroids and concerns

 $00{:}04{:}33{.}973 \dashrightarrow 00{:}04{:}36{.}319$  regarding their long term side effects.

NOTE Confidence: 0.8116819

 $00{:}04{:}36{.}320 \dashrightarrow 00{:}04{:}38{.}456$  Evidence for mycophenolate or MF and

NOTE Confidence: 0.8116819

 $00{:}04{:}38{.}456 \dashrightarrow 00{:}04{:}40{.}335$  second line treatment and beyond

NOTE Confidence: 0.8116819

00:04:40.335 --> 00:04:42.290 really comes only from Russia's

NOTE Confidence: 0.8116819

 $00{:}04{:}42.290 \dashrightarrow 00{:}04{:}44.200$  retrospective studies at this time.

NOTE Confidence: 0.8116819

 $00{:}04{:}44{.}200 \dashrightarrow 00{:}04{:}46{.}240$  This study recruited adult patients

NOTE Confidence: 0.8116819

 $00:04:46.240 \dashrightarrow 00:04:49.573$  with ITP and a platelet count of less

NOTE Confidence: 0.8116819

 $00:04:49.573 \rightarrow 00:04:52.015$  than 30,000 who were requiring the rapy.

NOTE Confidence: 0.8116819

 $00:04:52.020 \rightarrow 00:04:53.440$  Subjects were then randomized

NOTE Confidence: 0.8116819

 $00:04:53.440 \longrightarrow 00:04:54.505$  to standard corticosteroids,

NOTE Confidence: 0.8116819

 $00{:}04{:}54{.}510 \dashrightarrow 00{:}04{:}57{.}358$  which could be in the form of dexame thasone,

NOTE Confidence: 0.8116819

00:04:57.360 --> 00:05:00.208 pulsed, at 40 milligrams daily for four days,

NOTE Confidence: 0.8116819

 $00:05:00.210 \longrightarrow 00:05:01.610$  up to three cycles,

NOTE Confidence: 0.8116819

00:05:01.610 --> 00:05:03.010 or Prednisolone 1 milligram

 $00:05:03.010 \rightarrow 00:05:04.120$  per kilogram daily,

NOTE Confidence: 0.8116819

 $00:05:04.120 \longrightarrow 00:05:05.900$  followed by a taper or

NOTE Confidence: 0.8116819

00:05:05.900 --> 00:05:06.968 corticosteroids plus MMF,

NOTE Confidence: 0.8116819

 $00:05:06.970 \longrightarrow 00:05:09.502$  which was initially dosed at 500

NOTE Confidence: 0.8116819

 $00:05:09.502 \dashrightarrow 00:05:11.586$  milligrams twice daily and then

NOTE Confidence: 0.8116819

00:05:11.586 --> 00:05:14.106 escalated to a Max dose of 1 gram

NOTE Confidence: 0.8116819

 $00{:}05{:}14.106 \dashrightarrow 00{:}05{:}16.701$  daily with a plan to taper and then

NOTE Confidence: 0.8116819

 $00:05:16.701 \rightarrow 00:05:18.997$  stop after six months of treatment.

NOTE Confidence: 0.8116819

 $00{:}05{:}18{.}997 \dashrightarrow 00{:}05{:}20{.}793$  The investigators from this

NOTE Confidence: 0.8116819

00:05:20.793 --> 00:05:22.400 trial hypothesize that MF,

NOTE Confidence: 0.8116819

 $00:05:22.400 \longrightarrow 00:05:23.525$  combined with steroids,

NOTE Confidence: 0.8116819

 $00:05:23.525 \rightarrow 00:05:26.150$  would be more effective than steroids alone,

NOTE Confidence: 0.8116819

 $00:05:26.150 \rightarrow 00:05:28.565$  and the primary outcome measured was time

NOTE Confidence: 0.8116819

 $00{:}05{:}28.565 \dashrightarrow 00{:}05{:}30.650$  from randomization to treatment failure,

NOTE Confidence: 0.8116819

 $00{:}05{:}30.650 \dashrightarrow 00{:}05{:}32.235$  defined as a platelet count

NOTE Confidence: 0.8116819

 $00:05:32.235 \longrightarrow 00:05:34.809$  less than 30 and a clinical need

- NOTE Confidence: 0.8116819
- $00:05:34.809 \longrightarrow 00:05:36.645$  for second line treatment.

 $00:05:36.650 \longrightarrow 00:05:38.150$  Secondary outcomes are outlined

NOTE Confidence: 0.8116819

 $00:05:38.150 \longrightarrow 00:05:40.025$  here and included bleeding events,

NOTE Confidence: 0.8116819

 $00:05:40.030 \longrightarrow 00:05:40.758$  side effects,

NOTE Confidence: 0.8116819

 $00{:}05{:}40.758 \dashrightarrow 00{:}05{:}42.942$  and patient reported outcomes both at

NOTE Confidence: 0.8116819

 $00{:}05{:}42{.}942 \dashrightarrow 00{:}05{:}45{.}627$  baseline and AT246 and 12 months as

NOTE Confidence: 0.8116819

 $00:05:45.627 \dashrightarrow 00:05:47.143$  measured by validated question naires.

NOTE Confidence: 0.8653912

00:05:49.220 --> 00:05:51.719 120 patients were included in this study,

NOTE Confidence: 0.8653912

 $00{:}05{:}51{.}720 \dashrightarrow 00{:}05{:}54{.}272$  with 59 on the MF ARM and 61

NOTE Confidence: 0.8653912

 $00:05:54.272 \rightarrow 00:05:55.999$  patients receiving steroids alone.

NOTE Confidence: 0.8653912

00:05:56.000 --> 00:05:58.148 The median follow-up was 18 months.

NOTE Confidence: 0.8653912

 $00{:}05{:}58{.}150 \dashrightarrow 00{:}05{:}59{.}955$ 52.4% of patients were male

NOTE Confidence: 0.8653912

 $00{:}05{:}59{.}955 \dashrightarrow 00{:}06{:}02{.}070$  with a median age of 54,

NOTE Confidence: 0.8653912

 $00{:}06{:}02{.}070 \dashrightarrow 00{:}06{:}04{.}541$  so it was noted that more than

NOTE Confidence: 0.8653912

 $00:06:04.541 \longrightarrow 00:06:06.737 1/4$  of patients enrolled in the

 $00:06:06.737 \longrightarrow 00:06:09.208$  study were over the age of 70.

NOTE Confidence: 0.8653912

 $00{:}06{:}09{.}210 \dashrightarrow 00{:}06{:}11{.}496$  The primary outcome of proportion of

NOTE Confidence: 0.8653912

 $00{:}06{:}11.496 \dashrightarrow 00{:}06{:}13.392$  patients without treatment failure is

NOTE Confidence: 0.8653912

 $00{:}06{:}13.392 \dashrightarrow 00{:}06{:}15.276$  illustrated in the Kaplan Meier curve.

NOTE Confidence: 0.8653912

 $00{:}06{:}15.280 \dashrightarrow 00{:}06{:}17.842$  Here on the left of the slide

NOTE Confidence: 0.8653912

 $00{:}06{:}17.842 \dashrightarrow 00{:}06{:}20.654$  and favored the MF arm with an

NOTE Confidence: 0.8653912

 $00:06:20.654 \longrightarrow 00:06:22.689$  adjusted hazard ratio of 0.41.

NOTE Confidence: 0.8653912

 $00:06:22.690 \longrightarrow 00:06:23.414$  Interesting Lee.

NOTE Confidence: 0.8653912

00:06:23.414 --> 00:06:24.862 Similar responses were observed

NOTE Confidence: 0.8653912

 $00:06:24.862 \longrightarrow 00:06:26.969$  in the two groups at 2 weeks,

NOTE Confidence: 0.8653912

00:06:26.970 --> 00:06:28.460 despite the less refractoriness that

NOTE Confidence: 0.8653912

00:06:28.460 --> 00:06:31.111 was seen in the MF cohort and a

NOTE Confidence: 0.8653912

 $00:06:31.111 \rightarrow 00:06:32.215$  statistically significant increase

NOTE Confidence: 0.8653912

00:06:32.215 --> 00:06:34.676 in plate in patients who reached a

NOTE Confidence: 0.8653912

 $00{:}06{:}34.676 \dashrightarrow 00{:}06{:}36.530$  platelet count greater than 100 before

NOTE Confidence: 0.8653912

 $00:06:36.530 \rightarrow 00:06:39.510$  they required in second line treatment.

- NOTE Confidence: 0.8653912
- $00{:}06{:}39{.}510 \dashrightarrow 00{:}06{:}41{.}496$  There were no differences observed in

 $00{:}06{:}41.496 \dashrightarrow 00{:}06{:}42.820$  bleeding events or hospitalizations,

NOTE Confidence: 0.8653912

 $00{:}06{:}42.820 \dashrightarrow 00{:}06{:}44.776$  and there were comperable rates of

NOTE Confidence: 0.8653912

 $00:06:44.776 \rightarrow 00:06:46.789$  treatment side effects in both groups.

NOTE Confidence: 0.8653912

00:06:46.790 --> 00:06:47.180 However,

NOTE Confidence: 0.8653912

 $00{:}06{:}47.180 \dashrightarrow 00{:}06{:}49.520$  there were some aspects on quality

NOTE Confidence: 0.8653912

 $00:06:49.520 \longrightarrow 00:06:51.282$  of life questionnaires that were

NOTE Confidence: 0.8653912

 $00:06:51.282 \rightarrow 00:06:53.410$  observed to be worse in the MF arm,

NOTE Confidence: 0.8653912

 $00:06:53.410 \longrightarrow 00:06:54.724$  including both physical

NOTE Confidence: 0.8653912

 $00:06:54.724 \longrightarrow 00:06:56.476$  function and fatigue scores.

NOTE Confidence: 0.8653912

00:06:56.480 --> 00:06:58.380 So to summarize this abstract,

NOTE Confidence: 0.8653912

 $00{:}06{:}58{.}380 \dashrightarrow 00{:}07{:}00{.}642$  this is the first randomized control

NOTE Confidence: 0.8653912

 $00:07:00.642 \longrightarrow 00:07:02.920$  trial using MF to treat ITP,

NOTE Confidence: 0.8653912

 $00{:}07{:}02.920 \dashrightarrow 00{:}07{:}04.740$  and it illustrated good overall

NOTE Confidence: 0.8653912

 $00{:}07{:}04.740 \dashrightarrow 00{:}07{:}06.560$  efficacy and tolerability when added

 $00:07:06.621 \rightarrow 00:07:08.229$  to first line corticosteroids,

NOTE Confidence: 0.8653912

 $00{:}07{:}08.230 \dashrightarrow 00{:}07{:}10.366$  including in a cohort of patients

NOTE Confidence: 0.8653912

 $00:07:10.366 \longrightarrow 00:07:12.400$  that had included elderly patients.

NOTE Confidence: 0.8653912

00:07:12.400 --> 00:07:12.770 However,

NOTE Confidence: 0.8653912

 $00:07:12.770 \longrightarrow 00:07:14.990$  there were some negative affects on

NOTE Confidence: 0.8653912

 $00{:}07{:}14.990 \dashrightarrow 00{:}07{:}17.276$  quality of life that were observed

NOTE Confidence: 0.8653912

 $00{:}07{:}17.276$  -->  $00{:}07{:}19.496$  in the treatment arm and the

NOTE Confidence: 0.8653912

 $00:07:19.496 \longrightarrow 00:07:21.084$  investigator suggested that this

NOTE Confidence: 0.8653912

 $00{:}07{:}21.084 \dashrightarrow 00{:}07{:}23.388$  regimen could be considered in some,

NOTE Confidence: 0.8653912

 $00:07:23.390 \longrightarrow 00:07:25.594$  but not necessarily all,

NOTE Confidence: 0.8653912

 $00:07:25.594 \dashrightarrow 00:07:28.349$  patients with newly diagnosed ITP.

NOTE Confidence: 0.8653912

00:07:28.350 --> 00:07:30.102 The nest next abstract I'd like

NOTE Confidence: 0.8653912

 $00{:}07{:}30{.}102 \dashrightarrow 00{:}07{:}32{.}114$  to share was presented by Doctor

NOTE Confidence: 0.8653912

 $00{:}07{:}32.114 \dashrightarrow 00{:}07{:}33.674$  David Kuter from Massachusetts

NOTE Confidence: 0.8653912

 $00{:}07{:}33.674 \dashrightarrow 00{:}07{:}35.646$  General Hospital and highlights the

NOTE Confidence: 0.8653912

 $00{:}07{:}35{.}646 \dashrightarrow 00{:}07{:}37{.}406$  clinically active and the durable

- NOTE Confidence: 0.8653912
- $00{:}07{:}37{.}406 \dashrightarrow 00{:}07{:}39{.}144$  platelet response that were observed

 $00{:}07{:}39{.}144 \dashrightarrow 00{:}07{:}41{.}412$  with the oral BTK inhibitor reels of

NOTE Confidence: 0.8653912

 $00:07:41.412 \longrightarrow 00:07:43.568$  Bruton IB in patients with heavily

NOTE Confidence: 0.8653912

 $00:07:43.568 \longrightarrow 00:07:45.368$  pretreated ITP as illustrated in

NOTE Confidence: 0.8653912

 $00{:}07{:}45{.}368 \dashrightarrow 00{:}07{:}46{.}499$  the figure here.

NOTE Confidence: 0.8653912

 $00{:}07{:}46{.}500 \dashrightarrow 00{:}07{:}48{.}803$  On the left rules ibrutinib is a

NOTE Confidence: 0.8653912

 $00{:}07{:}48.803 \dashrightarrow 00{:}07{:}50.191$  reversible and selective inhibitor

NOTE Confidence: 0.8653912

00:07:50.191 --> 00:07:52.571 of BTK that aims to target the

NOTE Confidence: 0.8653912

 $00{:}07{:}52{.}571 \dashrightarrow 00{:}07{:}54{.}067$  disease mechanisms leading to

NOTE Confidence: 0.8653912

00:07:54.067 --> 00:07:55.567 platelet destruction in ITP,

NOTE Confidence: 0.8653912

 $00{:}07{:}55{.}570 \dashrightarrow 00{:}07{:}57{.}766$  though it's without the effects on

NOTE Confidence: 0.8653912

00:07:57.766 --> 00:07:59.880 platelet aggregation that we often see.

NOTE Confidence: 0.8653912

 $00:07:59.880 \longrightarrow 00:08:02.760$  In the drug ibrutinib the trial,

NOTE Confidence: 0.8653912

00:08:02.760 --> 00:08:04.840 this trial of Phase 1 two open label

NOTE Confidence: 0.8653912

 $00{:}08{:}04{.}840 \dashrightarrow 00{:}08{:}07{.}063$  trial was a dose finding study and

NOTE Confidence: 0.8653912  $00{:}08{:}08{.}767 \dashrightarrow 00{:}08{:}10.669$  relapsed or refractory ITP who had NOTE Confidence: 0.8653912  $00:08:10.669 \dashrightarrow 00:08:12.546$  responded to at least one prior NOTE Confidence: 0.8653912  $00:08:12.546 \rightarrow 00:08:14.970$  line of ITP therapy and had two or NOTE Confidence: 0.8653912  $00:08:15.043 \rightarrow 00:08:17.107$  more platelet counts that were less NOTE Confidence: 0.8653912  $00{:}08{:}17{.}107 \dashrightarrow 00{:}08{:}19{.}937$  than 30 at the time of study entry. NOTE Confidence: 0.8653912  $00{:}08{:}19{.}940 \dashrightarrow 00{:}08{:}22{.}514$  Subjects could be on stable doses NOTE Confidence: 0.8653912  $00{:}08{:}22.514 \dashrightarrow 00{:}08{:}23.801$  of concomitant corticosteroids NOTE Confidence: 0.8653912  $00{:}08{:}23.801 \dashrightarrow 00{:}08{:}25.726$  and or thrombo poietin receptor NOTE Confidence: 0.8653912  $00:08:25.726 \longrightarrow 00:08:27.634$  agonist during this trial. NOTE Confidence: 0.8653912  $00:08:27.640 \longrightarrow 00:08:30.166$  The dose escalation phase of this NOTE Confidence: 0.8653912 00:08:30.166 --> 00:08:32.281 study was previously reported at NOTE Confidence: 0.8653912  $00:08:32.281 \longrightarrow 00:08:34.447$  ASH with a minimum effective dose NOTE Confidence: 0.8653912  $00:08:34.447 \rightarrow 00:08:36.400$  of 400 milligrams twice daily. NOTE Confidence: 0.8653912  $00:08:36.400 \rightarrow 00:08:38.640$  The primary endpoint of this part of NOTE Confidence: 0.8653912  $00:08:38.640 \rightarrow 00:08:41.393$  the study was achieving two or more 15

 $00:08:07.063 \rightarrow 00:08:08.703$  that enrolled adult patients with

NOTE Confidence: 0.8653912 00:08:41.393 --> 00:08:43.113 consecutive platelet counts that

NOTE Confidence: 0.8653912

 $00{:}08{:}43.113 \dashrightarrow 00{:}08{:}45.398$  were greater than 50,000 with an

NOTE Confidence: 0.8653912

 $00{:}08{:}45{.}398 \dashrightarrow 00{:}08{:}47{.}869$  increase of more than 20,000 from the

NOTE Confidence: 0.8653912

 $00:08:47.869 \rightarrow 00:08:49.585$  patients baseline without requiring

NOTE Confidence: 0.8653912

 $00:08:49.585 \rightarrow 00:08:51.730$  any rescue or additional medications.

NOTE Confidence: 0.8653912

 $00:08:51.730 \dashrightarrow 00:08:54.050$  The investigators also performed subgroup

NOTE Confidence: 0.8653912

 $00{:}08{:}54.050 \dashrightarrow 00{:}08{:}56.370$  analysis to determine the impact

NOTE Confidence: 0.875766

 $00:08:56.435 \longrightarrow 00:08:58.095$  of certain prior treatments

NOTE Confidence: 0.875766

 $00:08:58.095 \longrightarrow 00:08:59.755$  on this primary endpoint.

NOTE Confidence: 0.875766

 $00{:}08{:}59{.}760 \dashrightarrow 00{:}09{:}01{.}972$  A long term extension study was also

NOTE Confidence: 0.875766

 $00{:}09{:}01{.}972 \dashrightarrow 00{:}09{:}03{.}737$  conducted to further assess safety

NOTE Confidence: 0.875766

 $00{:}09{:}03.737 \dashrightarrow 00{:}09{:}05.637$  and durability of this medication,

NOTE Confidence: 0.875766

 $00{:}09{:}05{.}640 \dashrightarrow 00{:}09{:}07{.}390$  and so this specific abstract

NOTE Confidence: 0.875766

 $00{:}09{:}07{.}390 \dashrightarrow 00{:}09{:}09{.}140$  presented on 38 patients who

NOTE Confidence: 0.875766

 $00{:}09{:}09{.}201 \dashrightarrow 00{:}09{:}11.187$  had received the dose of 400

 $00:09:11.187 \rightarrow 00:09:13.268$  milligrams twice daily and the 13

NOTE Confidence: 0.875766

 $00{:}09{:}13.268 \dashrightarrow 00{:}09{:}15.332$  patients who entered the long term

NOTE Confidence: 0.875766

 $00{:}09{:}15.332 \dashrightarrow 00{:}09{:}17.408$  extension study at this same dose.

NOTE Confidence: 0.85495913

00:09:19.880 --> 00:09:22.174 So patients in the 400 milligram twice NOTE Confidence: 0.85495913

 $00:09:22.174 \rightarrow 00:09:24.503$  daily cohort had a median duration of

NOTE Confidence: 0.85495913

 $00{:}09{:}24.503 \dashrightarrow 00{:}09{:}27.080$  ITP of six years and had received a NOTE Confidence: 0.85495913

00:09:27.080 --> 00:09:29.159 median of six prior lines of therapy.

NOTE Confidence: 0.85495913

 $00:09:29.160 \dashrightarrow 00:09:31.915$  Their median age was 50, with a little

NOTE Confidence: 0.85495913

 $00{:}09{:}31{.}915 \dashrightarrow 00{:}09{:}34{.}610$  more than half of patients being female.

NOTE Confidence: 0.85495913

 $00{:}09{:}34.610 \dashrightarrow 00{:}09{:}36.506$  At the time of data cutoff,

NOTE Confidence: 0.85495913

00:09:36.510 --> 00:09:39.275 which was July of 2020, forty 2% of

NOTE Confidence: 0.85495913

 $00{:}09{:}39{.}275 \dashrightarrow 00{:}09{:}41.645$  patients had achieved the primary endpoint.

NOTE Confidence: 0.85495913

 $00:09:41.650 \rightarrow 00:09:43.318$  Furthermore, responses were relatively

NOTE Confidence: 0.85495913

 $00:09:43.318 \longrightarrow 00:09:45.820$  similar whether or not these patients

NOTE Confidence: 0.85495913

 $00:09:45.878 \longrightarrow 00:09:47.578$  had responded to prior therapy,

NOTE Confidence: 0.85495913

 $00:09:47.580 \longrightarrow 00:09:48.762$  as outlined here,

 $00{:}09{:}48.762 \dashrightarrow 00{:}09{:}50.338$  including thrombopoiet in receptor agonist,

NOTE Confidence: 0.85495913

00:09:50.340 --> 00:09:51.525 rituximab, or fostamatinib,

NOTE Confidence: 0.85495913

 $00:09:51.525 \rightarrow 00:09:53.895$  and notably responses were quite rapid,

NOTE Confidence: 0.85495913

 $00:09:53.900 \longrightarrow 00:09:56.702$  with 53% of patients achieving a

NOTE Confidence: 0.85495913

 $00:09:56.702 \longrightarrow 00:10:00.109$  platelet count of more than 30 by day 8.

NOTE Confidence: 0.85495913

 $00{:}10{:}00{.}110 \dashrightarrow 00{:}10{:}02{.}145$  And and responses were also

NOTE Confidence: 0.85495913

 $00:10:02.145 \longrightarrow 00:10:03.366$  durable in nature.

NOTE Confidence: 0.85495913

 $00:10:03.370 \longrightarrow 00:10:05.730$  A real rose alot nib was generally well

NOTE Confidence: 0.85495913

 $00{:}10{:}05{.}730 \dashrightarrow 00{:}10{:}08{.}109$  tolerated in all portions of the trial

NOTE Confidence: 0.85495913

 $00:10:08.109 \longrightarrow 00:10:09.839$  with approximately half of patients

NOTE Confidence: 0.85495913

 $00{:}10{:}09{.}900 \dashrightarrow 00{:}10{:}12{.}364$  experiencing grade one or two side effects

NOTE Confidence: 0.85495913

 $00{:}10{:}12{.}364 \dashrightarrow 00{:}10{:}14{.}428$  that were transient and mostly GI.

NOTE Confidence: 0.85495913

00:10:14.428 --> 00:10:15.100 In nature,

NOTE Confidence: 0.85495913

 $00{:}10{:}15{.}100 \dashrightarrow 00{:}10{:}17{.}158$  though there were no serious adverse

NOTE Confidence: 0.85495913

 $00{:}10{:}17{.}158 \dashrightarrow 00{:}10{:}19{.}430$  events or treatment related bleeding or

00:10:19.430 --> 00:10:21.535 thrombotic complications during this study.

NOTE Confidence: 0.85495913

00:10:21.540 --> 00:10:22.521 So, in conclusion,

NOTE Confidence: 0.85495913

 $00:10:22.521 \rightarrow 00:10:24.810$  reels reels of Bruton AB therapy at

NOTE Confidence: 0.85495913

 $00:10:24.877 \longrightarrow 00:10:27.551$  a dose of 400 milligrams twice daily

NOTE Confidence: 0.85495913

 $00:10:27.551 \rightarrow 00:10:29.499$  achieved significant rapid and long

NOTE Confidence: 0.85495913

 $00{:}10{:}29{.}499 \dashrightarrow 00{:}10{:}31{.}349$  lasting platelet responses in about

NOTE Confidence: 0.85495913

 $00{:}10{:}31{.}349 \dashrightarrow 00{:}10{:}33{.}495$  a slightly under half a percent

NOTE Confidence: 0.85495913

 $00:10:33.495 \longrightarrow 00:10:35.220$  percentage of this patient population

NOTE Confidence: 0.85495913

 $00{:}10{:}35{.}220$  -->  $00{:}10{:}37{.}189$  with heavily treated pretreated ITP,

NOTE Confidence: 0.85495913

 $00{:}10{:}37{.}190 \dashrightarrow 00{:}10{:}39{.}668$  and this was observed irrespective of the NOTE Confidence: 0.85495913

 $00{:}10{:}39.668 \dashrightarrow 00{:}10{:}42.290$  response to prior lines of treatment rules.

NOTE Confidence: 0.85495913

 $00{:}10{:}42.290 \dashrightarrow 00{:}10{:}44.105$  Ibrutinib was granted fast track

NOTE Confidence: 0.85495913

 $00{:}10{:}44.105 \dashrightarrow 00{:}10{:}46.345$  designation by the FDA in October

NOTE Confidence: 0.85495913

 $00{:}10{:}46{.}345 \dashrightarrow 00{:}10{:}48{.}523$  of this past year and further

NOTE Confidence: 0.85495913

 $00{:}10{:}48.523 \dashrightarrow 00{:}10{:}50.300$  clinical trials with this drug.

NOTE Confidence: 0.85495913

 $00:10:50.300 \longrightarrow 00:10:51.820$  That drug is current.

- NOTE Confidence: 0.85495913
- $00:10:51.820 \longrightarrow 00:10:52.960$  Currently on going.
- NOTE Confidence: 0.8092774
- $00:10:55.840 \longrightarrow 00:10:57.264$  In the plenary session,
- NOTE Confidence: 0.8092774
- $00{:}10{:}57.264 \dashrightarrow 00{:}10{:}59.896$  Doctor Terry Gurne Shime are from the
- NOTE Confidence: 0.8092774
- 00:10:59.896 --> 00:11:02.464 University of Washington School of Medicine,
- NOTE Confidence: 0.8092774
- $00{:}11{:}02{.}470 \dashrightarrow 00{:}11{:}04{.}864$  presented the results of the American
- NOTE Confidence: 0.8092774
- $00{:}11{:}04.864 \dashrightarrow 00{:}11{:}06.890$  trial using tranexamic acid and
- NOTE Confidence: 0.8092774
- $00{:}11{:}06{.}890 \dashrightarrow 00{:}11{:}09{.}098$  thrombocytopenia or the a treat trial.
- NOTE Confidence: 0.8092774
- $00:11:09.100 \rightarrow 00:11:10.536$  This study specifically examined
- NOTE Confidence: 0.8092774
- 00:11:10.536 --> 00:11:12.690 the effects of tranexamic acid or
- NOTE Confidence: 0.8092774
- $00:11:12.747 \longrightarrow 00:11:14.897$  txa prophylaxis on bleeding outcomes
- NOTE Confidence: 0.8092774
- 00:11:14.897 --> 00:11:16.617 in individuals with hematologic
- NOTE Confidence: 0.8092774
- 00:11:16.617 --> 00:11:18.679 malignancy undergoing treatment therapy.
- NOTE Confidence: 0.8092774
- $00:11:18.680 \rightarrow 00:11:20.936$  And it was supported by understanding
- NOTE Confidence: 0.8092774
- $00:11:20.936 \longrightarrow 00:11:23.340$  of the high incidence of bleeding
- NOTE Confidence: 0.8092774
- $00:11:23.340 \longrightarrow 00:11:25.000$  in this patient population,
- NOTE Confidence: 0.8092774

00:11:25.000 --> 00:11:27.828 even despite our evidence based use of

NOTE Confidence: 0.8092774

00:11:27.828 --> 00:11:29.040 platelet transfusions prophylactically

NOTE Confidence: 0.8092774

 $00{:}11{:}29{.}100 \dashrightarrow 00{:}11{:}30{.}780$  and while anti fibrinolytic therapy

NOTE Confidence: 0.8092774

 $00:11:30.780 \rightarrow 00:11:33.393$  has certainly been used with pain in NOTE Confidence: 0.8092774

 $00:11:33.393 \rightarrow 00:11:35.145$  patients with hematologic malignancy

NOTE Confidence: 0.8092774

00:11:35.145 --> 00:11:36.459 undergoing treatment evidence,

NOTE Confidence: 0.8092774

00:11:36.460 --> 00:11:38.830 evidence of its benefit has really

NOTE Confidence: 0.8092774

 $00:11:38.830 \longrightarrow 00:11:39.620$  been lacking.

NOTE Confidence: 0.8092774

 $00{:}11{:}39{.}620 \dashrightarrow 00{:}11{:}42{.}780$  So the Atria trial was a multi center,

NOTE Confidence: 0.8092774

 $00:11:42.780 \longrightarrow 00:11:43.548$  double blinded,

NOTE Confidence: 0.8092774

 $00{:}11{:}43.548 \dashrightarrow 00{:}11{:}45.468$  place bo controlled trial aimed to

NOTE Confidence: 0.8092774

 $00:11:45.468 \rightarrow 00:11:47.988$  assess the safety and efficacy of

NOTE Confidence: 0.8092774

 $00{:}11{:}47.988 \dashrightarrow 00{:}11{:}49.724$  prophylactic transit tranexamic acid.

NOTE Confidence: 0.8092774

 $00:11:49.730 \longrightarrow 00:11:52.070$  Which is seen in this schematic,

NOTE Confidence: 0.8092774

 $00{:}11{:}52.070 \dashrightarrow 00{:}11{:}54.478$  here included on the left of the

NOTE Confidence: 0.8092774

 $00:11:54.478 \rightarrow 00:11:56.876$  slide block slicing binding site on

- NOTE Confidence: 0.8092774
- 00:11:56.876 --> 00:11:59.474 plasminogen an inhibits and its activation,

 $00:11:59.480 \longrightarrow 00:12:00.533$  thus halting fibrinolysis.

NOTE Confidence: 0.8092774

 $00{:}12{:}00{.}533 \dashrightarrow 00{:}12{:}03.862$  And the train exam IC acid was used as

NOTE Confidence: 0.8092774

 $00:12:03.862 \rightarrow 00:12:06.268$  an adjunct to routine platelet transfusions.

NOTE Confidence: 0.8092774

 $00{:}12{:}06{.}270 \dashrightarrow 00{:}12{:}08{.}130$  As was previously studied.

NOTE Confidence: 0.8092774

00:12:08.130 --> 00:12:09.990 Patients undergoing therapy for

NOTE Confidence: 0.8092774

00:12:09.990 --> 00:12:11.663 hematologic malignancy whom were

NOTE Confidence: 0.8092774

 $00:12:11.663 \rightarrow 00:12:13.358$  expected to have platelet counts

NOTE Confidence: 0.8092774

 $00{:}12{:}13.358 \dashrightarrow 00{:}12{:}15.583$  less than 10,000 for five or more

NOTE Confidence: 0.8092774

 $00:12:15.583 \rightarrow 00:12:17.305$  days were eligible to be enrolled

NOTE Confidence: 0.8092774

 $00{:}12{:}17{.}310 \dashrightarrow 00{:}12{:}20{.}173$  in the study and were randomized to

NOTE Confidence: 0.8092774

00:12:20.173 --> 00:12:22.173 receive either tranexamic acid at a

NOTE Confidence: 0.8092774

00:12:22.173 --> 00:12:24.610 dose of 1 gram Ivy or 1.3 grams opeo NOTE Confidence: 0.8092774

 $00:12:24.610 \longrightarrow 00:12:26.782$  every eight hours or placebo with

NOTE Confidence: 0.8092774

 $00{:}12{:}26.782 \dashrightarrow 00{:}12{:}29.880$  the start of the study drug after a

 $00:12:29.880 \longrightarrow 00:12:32.229$  platelet count had dropped below 30.

NOTE Confidence: 0.8092774

00:12:32.230 --> 00:12:33.990 Tranexamic acid or placebo was

NOTE Confidence: 0.8092774

 $00{:}12{:}33{.}990 \dashrightarrow 00{:}12{:}36{.}157$  discontinued after 30 days or when NOTE Confidence: 0.8092774

 $00{:}12{:}36{.}157 \dashrightarrow 00{:}12{:}38{.}233$  platelet counts had re platelet count NOTE Confidence: 0.8092774

 $00{:}12{:}38{.}233 \dashrightarrow 00{:}12{:}40{.}477$  had recovered to more than 30,000

NOTE Confidence: 0.8092774

 $00{:}12{:}40.477 \dashrightarrow 00{:}12{:}42.382$  and the trans transfusion thresholds NOTE Confidence: 0.8092774

 $00:12:42.382 \longrightarrow 00:12:44.614$  used during the study where per

NOTE Confidence: 0.8092774

 $00{:}12{:}44.614 \dashrightarrow 00{:}12{:}46.810$  standard of care the primary endpoint

NOTE Confidence: 0.8092774

 $00{:}12{:}46.876 \dashrightarrow 00{:}12{:}48.880$  was the proportion of patients with

NOTE Confidence: 0.8092774

 $00{:}12{:}48.880 \dashrightarrow 00{:}12{:}51.417$  WHO grade two or above bleeding with NOTE Confidence: 0.8092774

 $00{:}12{:}51{.}417 \dashrightarrow 00{:}12{:}53{.}691$ Grade 2 being moderate bleeding Grade NOTE Confidence: 0.8092774

00:12:53.691 --> 00:12:55.538 3 being severe bleeding requiring

NOTE Confidence: 0.8092774

 $00{:}12{:}55{.}538 \dashrightarrow 00{:}12{:}57{.}740$  transfusion of red blood cells or

NOTE Confidence: 0.8092774

 $00:12:57.806 \rightarrow 00:13:00.212$  other intervention and grade for being

NOTE Confidence: 0.8092774

 $00:13:00.212 \rightarrow 00:13:02.559$  life threatening or debilitating bleed bleed.

NOTE Confidence: 0.8092774

00:13:02.560 --> 00:13:04.144 Additional secondary and safety

- NOTE Confidence: 0.8092774
- $00:13:04.144 \rightarrow 00:13:06.520$  endpoints are outlined on the slide

00:13:06.588 --> 00:13:08.718 here and include rate of thrombosis,

NOTE Confidence: 0.8092774

 $00:13:08.720 \longrightarrow 00:13:10.650$  vino occlusive disease and mortality.

NOTE Confidence: 0.85934526

 $00:13:14.810 \longrightarrow 00:13:16.210$  There were 330 patients,

NOTE Confidence: 0.85934526

 $00:13:16.210 \rightarrow 00:13:19.438$  a valuable in the study with 165 on each arm,

NOTE Confidence: 0.85934526

 $00:13:19.440 \longrightarrow 00:13:22.419$  and the two groups were well balanced by age,

NOTE Confidence: 0.85934526

 $00:13:22.420 \longrightarrow 00:13:24.080$  gender, and type of therapy.

NOTE Confidence: 0.85934526

 $00:13:24.080 \longrightarrow 00:13:26.042$  Only 9% of the patients actually

NOTE Confidence: 0.85934526

00:13:26.042 --> 00:13:27.720 completed 30 days on drug,

NOTE Confidence: 0.85934526

 $00:13:27.720 \dashrightarrow 00:13:30.699$  with an average of 12 days on train exam.

NOTE Confidence: 0.85934526

00:13:30.700 --> 00:13:31.956 IC acid or placebo.

NOTE Confidence: 0.85934526

 $00{:}13{:}31{.}956 \dashrightarrow 00{:}13{:}34{.}265$  And as you can see in the

NOTE Confidence: 0.85934526

 $00:13:34.265 \longrightarrow 00:13:35.990$  table here on the left,

NOTE Confidence: 0.85934526

 $00{:}13{:}35{.}990 \dashrightarrow 00{:}13{:}37{.}730$  the primary outcome of proportion of

NOTE Confidence: 0.85934526

00:13:37.730 --> 00:13:39.999 WHL grade two or higher bleeding was

 $00:13:39.999 \rightarrow 00:13:41.749$  no different between the tranexamic

NOTE Confidence: 0.85934526

 $00{:}13{:}41.749 \dashrightarrow 00{:}13{:}43.678$  acid and placebo, placebo arms,

NOTE Confidence: 0.85934526

 $00{:}13{:}43.678 \dashrightarrow 00{:}13{:}46.226$  and this was also true irrespective of.

NOTE Confidence: 0.85934526

 $00:13:46.230 \longrightarrow 00:13:48.066$  The pre specified treatment

NOTE Confidence: 0.85934526

 $00:13:48.066 \rightarrow 00:13:49.902$  subgroups that included allogeneic

NOTE Confidence: 0.85934526

 $00:13:49.902 \longrightarrow 00:13:51.869$  stencel stem cell transplant,

NOTE Confidence: 0.85934526

00:13:51.870 -> 00:13:53.090 autologous transplant,

NOTE Confidence: 0.85934526

 $00:13:53.090 \rightarrow 00:13:54.920$  and chemotherapy alone.

NOTE Confidence: 0.85934526

 $00{:}13{:}54{.}920 \dashrightarrow 00{:}13{:}56{.}824$  The time to 1st WH O2 or more

NOTE Confidence: 0.85934526

 $00:13:56.824 \longrightarrow 00:13:59.122$  two or higher bleeding or death

NOTE Confidence: 0.85934526

00:13:59.122 --> 00:14:00.874 was also remarkably similar,

NOTE Confidence: 0.85934526

00:14:00.880 --> 00:14:02.866 with the lines overlying each other

NOTE Confidence: 0.85934526

 $00:14:02.866 \longrightarrow 00:14:06.480$  in the graph, seen here on the right.

NOTE Confidence: 0.85934526

00:14:06.480 --> 00:14:07.816 Mean platelet transfusion mean

NOTE Confidence: 0.85934526

 $00{:}14{:}07{.}816 \dashrightarrow 00{:}14{:}10{.}288$  days alive with WHO two or more

NOTE Confidence: 0.85934526

 $00:14:10.288 \longrightarrow 00:14:12.748$  bleeding an mean red blood cell

- NOTE Confidence: 0.85934526
- $00:14:12.748 \rightarrow 00:14:13.978$  transfusion per thrombocytopenia.
- NOTE Confidence: 0.85934526
- 00:14:13.980 --> 00:14:16.530 C<br/>dai were also not impacted by
- NOTE Confidence: 0.85934526
- $00:14:16.530 \longrightarrow 00:14:18.730$  the use of tranexamic acid.
- NOTE Confidence: 0.85934526
- $00:14:18.730 \longrightarrow 00:14:19.442$  There was,
- NOTE Confidence: 0.85934526
- $00{:}14{:}19{.}442 \dashrightarrow 00{:}14{:}19{.}798$  however,
- NOTE Confidence: 0.85934526
- 00:14:19.798 --> 00:14:20.866 a statistically significant
- NOTE Confidence: 0.85934526
- $00{:}14{:}20.866 \dashrightarrow 00{:}14{:}22.664$  increase in the overall thrombotic
- NOTE Confidence: 0.85934526
- $00:14:22.664 \rightarrow 00:14:24.596$  events on the tranexamic acid arm,
- NOTE Confidence: 0.85934526
- $00:14:24.600 \rightarrow 00:14:27.176$  though this primarily was made up of
- NOTE Confidence: 0.85934526
- 00:14:27.176 --> 00:14:29.638 line occlusions with a trend that was
- NOTE Confidence: 0.85934526
- 00:14:29.638 --> 00:14:31.576 actually fewer in of non catheter
- NOTE Confidence: 0.85934526
- $00{:}14{:}31{.}641 \dashrightarrow 00{:}14{:}34{.}155$  thrombotic events in the treatment arm.
- NOTE Confidence: 0.85934526
- $00{:}14{:}34{.}160 \dashrightarrow 00{:}14{:}36{.}379$  There was no increase in Vino occlusive,
- NOTE Confidence: 0.85934526
- 00:14:36.380 --> 00:14:36.705 disease,
- NOTE Confidence: 0.85934526
- $00:14:36.705 \longrightarrow 00:14:38.330$  or alcors all cause mortality
- NOTE Confidence: 0.85934526

 $00:14:38.330 \longrightarrow 00:14:40.179$  at either 30 or 20 days,

NOTE Confidence: 0.85934526

 $00{:}14{:}40{.}180 \dashrightarrow 00{:}14{:}42{.}065$  and no deaths were observed

NOTE Confidence: 0.85934526

 $00{:}14{:}42.065 \dashrightarrow 00{:}14{:}43.950$  as the result of throm bosis.

NOTE Confidence: 0.85934526

 $00:14:43.950 \longrightarrow 00:14:46.038$  So based on all of this,

NOTE Confidence: 0.85934526

00:14:46.040 --> 00:14:47.780 train exam IC acid administered

NOTE Confidence: 0.85934526

00:14:47.780 --> 00:14:48.128 prophylactically,

NOTE Confidence: 0.85934526

 $00:14:48.130 \longrightarrow 00:14:49.760$  in addition to routine platelet

NOTE Confidence: 0.85934526

00:14:49.760 --> 00:14:51.950 transfusion did not seem to increase,

NOTE Confidence: 0.85934526

00:14:51.950 --> 00:14:53.924 decrease the rate of WHL grade 2

NOTE Confidence: 0.85934526

 $00{:}14{:}53{.}924 \dashrightarrow 00{:}14{:}55{.}867$  plus or bleeding in patients who

NOTE Confidence: 0.85934526

 $00{:}14{:}55{.}867 \dashrightarrow 00{:}14{:}56{.}902$  are severely thrombocytopenia

NOTE Confidence: 0.85934526

 $00{:}14{:}56{.}902 \dashrightarrow 00{:}14{:}59{.}674$  IK as a result of treatment for

NOTE Confidence: 0.85934526

 $00:14:59.674 \rightarrow 00:15:01.000$  their hematologic malignancy.

NOTE Confidence: 0.85934526

 $00:15:01.000 \longrightarrow 00:15:03.303$  It also did not seem to alter

NOTE Confidence: 0.85934526

 $00:15:03.303 \rightarrow 00:15:04.677$  transfusion requirements and and

NOTE Confidence: 0.85934526

 $00:15:04.677 \rightarrow 00:15:06.651$  actually resulted in an increased rate

- NOTE Confidence: 0.85934526
- $00:15:06.651 \rightarrow 00:15:08.659$  of central line occlusion events,
- NOTE Confidence: 0.85934526
- $00{:}15{:}08.660 \dashrightarrow 00{:}15{:}10.400$  and so the authors emphasize,
- NOTE Confidence: 0.85934526
- $00:15:10.400 \longrightarrow 00:15:11.372$  despite these findings,
- NOTE Confidence: 0.85934526
- $00{:}15{:}11{.}372 \dashrightarrow 00{:}15{:}12{.}992$  that the utility of tranexamic
- NOTE Confidence: 0.85934526
- $00:15:12.992 \longrightarrow 00:15:14.947$  acid in other settings with
- NOTE Confidence: 0.85934526
- $00{:}15{:}14.947 \dashrightarrow 00{:}15{:}16.619$  thrombocytopenia cannot be excluded.
- NOTE Confidence: 0.85934526
- $00:15:16.620 \rightarrow 00:15:18.068$  By this study alone.
- NOTE Confidence: 0.8342403
- $00{:}15{:}20{.}300 \dashrightarrow 00{:}15{:}23{.}023$  So moving on to an abstract presented
- NOTE Confidence: 0.8342403
- $00:15:23.023 \longrightarrow 00:15:25.433$  by Doctor Steven Pipe from the
- NOTE Confidence: 0.8342403
- 00:15:25.433 --> 00:15:28.156 University of Michigan on the long term,
- NOTE Confidence: 0.8342403
- 00:15:28.160 --> 00:15:28.944 durability, safety,
- NOTE Confidence: 0.8342403
- $00:15:28.944 \rightarrow 00:15:31.296$  and efficacy of fat user in prophylaxis,
- NOTE Confidence: 0.8342403
- $00{:}15{:}31{.}300 \dashrightarrow 00{:}15{:}32{.}828$  prophylaxis in patients with
- NOTE Confidence: 0.8342403
- 00:15:32.828 --> 00:15:35.592 hemophilia A or B with or without
- NOTE Confidence: 0.8342403
- $00{:}15{:}35{.}592 \dashrightarrow 00{:}15{:}38{.}378$  inhibitors as seen on the slide here.
- NOTE Confidence: 0.8342403

 $00{:}15{:}38{.}380 \dashrightarrow 00{:}15{:}41{.}521$  So for twos are in is a small interfering

NOTE Confidence: 0.8342403

 $00:15:41.521 \rightarrow 00:15:44.670$  RNA that as described in the schematic,

NOTE Confidence: 0.8342403

 $00:15:44.670 \longrightarrow 00:15:46.380$  blocks the production of anti

NOTE Confidence: 0.8342403

 $00{:}15{:}46{.}380 \dashrightarrow 00{:}15{:}48{.}647$  thrombin and as a result increases

NOTE Confidence: 0.8342403

 $00{:}15{:}48.647 \dashrightarrow 00{:}15{:}51.077$  or improves throm bin generation and.

NOTE Confidence: 0.8342403

 $00{:}15{:}51{.}080 \dashrightarrow 00{:}15{:}53{.}324$  Remote team of stasis and individuals

NOTE Confidence: 0.8342403

 $00:15:53.324 \rightarrow 00:15:55.130$  with hemophilia of phase one.

NOTE Confidence: 0.8342403

00:15:55.130 --> 00:15:57.260 Study of monthly subcutaneous photographer

NOTE Confidence: 0.8342403

 $00{:}15{:}57{.}260 \dashrightarrow 00{:}15{:}59{.}390$  to Sarandos ING was previously

NOTE Confidence: 0.8342403

 $00{:}15{:}59{.}453 \dashrightarrow 00{:}16{:}01{.}379$  reported in the New England Journal

NOTE Confidence: 0.8342403

 $00{:}16{:}01{.}379 \dashrightarrow 00{:}16{:}03{.}412$  of Medicine in 2017 and demonstrated

NOTE Confidence: 0.8342403

00:16:03.412 --> 00:16:05.820 that this drug was well tolerated and

NOTE Confidence: 0.8342403

 $00{:}16{:}05{.}820 \dashrightarrow 00{:}16{:}07{.}169$  also reliably lowered antithrombin

NOTE Confidence: 0.8342403

 $00{:}16{:}07{.}169 \dashrightarrow 00{:}16{:}09{.}167$  in a dose dependent manner resulting

NOTE Confidence: 0.8342403

 $00{:}16{:}09{.}167 \dashrightarrow 00{:}16{:}10{.}948$  in decreased bleeding frequency.

NOTE Confidence: 0.8342403

 $00:16:10.950 \rightarrow 00:16:13.582$  So in this trial adult male patients

- NOTE Confidence: 0.8342403
- $00{:}16{:}13.582 \dashrightarrow 00{:}16{:}15.154$  with moderate severe haemophilia

00:16:15.154 --> 00:16:17.374 moderate or severe hemophilia A or

NOTE Confidence: 0.8342403

00:16:17.374 --> 00:16:19.924 B who had tolerated for chooser in

NOTE Confidence: 0.8342403

 $00:16:19.924 \rightarrow 00:16:22.368$  in the Phase one study were eligible

NOTE Confidence: 0.8342403

 $00:16:22.368 \longrightarrow 00:16:24.258$  to continue into this phase.

NOTE Confidence: 0.8342403

00:16:24.260 --> 00:16:24.966 A2 cohort,

NOTE Confidence: 0.8342403

 $00:16:24.966 \rightarrow 00:16:27.084$  which was an open label extension

NOTE Confidence: 0.8342403

 $00:16:27.084 \rightarrow 00:16:29.118$  portion and they receive photos,

NOTE Confidence: 0.8342403

 $00{:}16{:}29{.}120 \dashrightarrow 00{:}16{:}31{.}703$  are in at a dose of 50 or 80

NOTE Confidence: 0.8342403

 $00:16:31.703 \rightarrow 00:16:33.610$  milligrams subcutaneous monthly.

NOTE Confidence: 0.8342403

00:16:33.610 --> 00:16:35.102 The primary endpoints were

NOTE Confidence: 0.8342403

 $00{:}16{:}35{.}102 \dashrightarrow 00{:}16{:}36{.}594$  safety and adverse events,

NOTE Confidence: 0.8342403

 $00{:}16{:}36{.}600 \dashrightarrow 00{:}16{:}38{.}796$  and there were key secondary endpoints

NOTE Confidence: 0.8342403

 $00{:}16{:}38.796 \dashrightarrow 00{:}16{:}40.720$  that included a calculated median.

NOTE Confidence: 0.8342403

 $00{:}16{:}40.720 \dashrightarrow 00{:}16{:}42.800$  Analyze the annualized bleed rate

 $00:16:42.800 \longrightarrow 00:16:44.464$  pharmacokinetics in quality of

NOTE Confidence: 0.8342403

 $00:16:44.464 \rightarrow 00:16:46.700$  life in the in the patient cohort.

NOTE Confidence: 0.9159124

 $00{:}16{:}49{.}070$  -->  $00{:}16{:}52{.}214$  34 patients were included in this portion of NOTE Confidence: 0.9159124

 $00:16:52.214 \rightarrow 00:16:55.409$  the study with a median age of 35.4 years.

NOTE Confidence: 0.9159124

 $00{:}16{:}55{.}410 \dashrightarrow 00{:}16{:}57{.}726$  And this included 27 individuals with

NOTE Confidence: 0.9159124

 $00:16:57.726 \longrightarrow 00:16:59.505$  hemophilia A, A7 individuals with

NOTE Confidence: 0.9159124

 $00{:}16{:}59{.}505 \dashrightarrow 00{:}17{:}02{.}378$  hemophilia B and 15 out of the group

NOTE Confidence: 0.9159124

 $00:17:02.378 \longrightarrow 00:17:04.668$  had inhibitors with 19 individuals.

NOTE Confidence: 0.9159124

 $00{:}17{:}04.670 \dashrightarrow 00{:}17{:}06.350$  Not having an inhibitor.

NOTE Confidence: 0.9159124

00:17:06.350 --> 00:17:09.578 Patients received a median of 3.1 years of

NOTE Confidence: 0.9159124

 $00{:}17{:}09{.}578 \dashrightarrow 00{:}17{:}12{.}490$  a tutor inducing as of the data cut off,

NOTE Confidence: 0.9159124

 $00:17:12.490 \longrightarrow 00:17:14.758$  which was September of 2020 and 12

NOTE Confidence: 0.9159124

 $00{:}17{:}14.758 \dashrightarrow 00{:}17{:}17{.}117$  individuals were on the 50 milligram dose,

NOTE Confidence: 0.9159124

 $00:17:17.120 \longrightarrow 00:17:20.376$  with 22 being on the 80 milligram dose.

NOTE Confidence: 0.9159124

 $00{:}17{:}20{.}380 \dashrightarrow 00{:}17{:}22{.}612$  But user and was noted in this study

NOTE Confidence: 0.9159124

 $00:17:22.612 \rightarrow 00:17:24.442$  to decrease antithrombin levels quickly

- NOTE Confidence: 0.9159124
- $00{:}17{:}24{.}442 \dashrightarrow 00{:}17{:}26{.}854$  with sustained levels that remained at

 $00{:}17{:}26.854 \dashrightarrow 00{:}17{:}29.096$  or below 20% in individuals who remained

NOTE Confidence: 0.9159124

 $00{:}17{:}29.096 \dashrightarrow 00{:}17{:}31.909$  on the drug and so this was confirmed.

NOTE Confidence: 0.9159124

 $00:17:31.910 \longrightarrow 00:17:34.724$  The findings of the Phase one portion

NOTE Confidence: 0.9159124

 $00:17:34.724 \longrightarrow 00:17:35.930$  of the study.

NOTE Confidence: 0.9159124

 $00:17:35.930 \rightarrow 00:17:37.910$  Immediate analyzed bleed rate was

NOTE Confidence: 0.9159124

 $00:17:37.910 \longrightarrow 00:17:39.890$  calculated for this cohort after

NOTE Confidence: 0.9159124

 $00{:}17{:}39{.}954 \dashrightarrow 00{:}17{:}41{.}634$  achieving antithrombin knockdown an

NOTE Confidence: 0.9159124

 $00:17:41.634 \rightarrow 00:17:44.154$  was zero for treated bleeds during

NOTE Confidence: 0.9159124

 $00:17:44.219 \longrightarrow 00:17:45.479$  the follow up period.

NOTE Confidence: 0.9159124

 $00{:}17{:}45{.}480 \dashrightarrow 00{:}17{:}48{.}091$  The figure included here on this slide

NOTE Confidence: 0.9159124

 $00{:}17{:}48.091 \dashrightarrow 00{:}17{:}51.124$  is a result from a post hoc analysis

NOTE Confidence: 0.9159124

 $00:17:51.124 \rightarrow 00:17:53.929$  of 258 treated bleeds in 15 subjects,

NOTE Confidence: 0.9159124

 $00{:}17{:}53{.}930 \dashrightarrow 00{:}17{:}56{.}228$  with each separate graph showing data

NOTE Confidence: 0.9159124

 $00:17:56.228 \rightarrow 00:17:58.090$  on bleed causality, bleed location,

 $00:17:58.090 \rightarrow 00:18:00.575$  an bleeds severity and from left to

NOTE Confidence: 0.9159124

00:18:00.575 --> 00:18:02.635 right in patients with hemophilia

NOTE Confidence: 0.9159124

 $00:18:02.635 \longrightarrow 00:18:04.680$  A with no inhibitor hemophilia.

NOTE Confidence: 0.9159124

00:18:04.680 --> 00:18:07.110 A patients with an inhibitor hemophilia

NOTE Confidence: 0.9159124

00:18:07.110 --> 00:18:09.697 B patients without an inhibitor and

NOTE Confidence: 0.9159124

 $00{:}18{:}09{.}697 \dashrightarrow 00{:}18{:}12{.}385$  hemophilia B patients with an inhibitor. NOTE Confidence: 0.9159124

 $00:18:12.390 \longrightarrow 00:18:15.400$  So while this is a bit of a busy figure,

NOTE Confidence: 0.9159124

 $00:18:15.400 \rightarrow 00:18:17.512$  the takeaway is really that breakaway

NOTE Confidence: 0.9159124

00:18:17.512 --> 00:18:18.920 break<br/>through bleeds occurred mostly  $% \left( \left( {{{\rm{ch}}} \right)_{{\rm{ch}}} \right)_{{\rm{ch}}} \right)$ 

NOTE Confidence: 0.9159124

 $00:18:18.974 \longrightarrow 00:18:20.514$  in the joints or mild in nature,

NOTE Confidence: 0.9159124

 $00{:}18{:}20{.}520 \dashrightarrow 00{:}18{:}22{.}774$  and tended to be more spontaneous in

NOTE Confidence: 0.9159124

00:18:22.774 --> 00:18:24.400 those individuals with inhibitors.

NOTE Confidence: 0.9159124

 $00{:}18{:}24{.}400 \dashrightarrow 00{:}18{:}26{.}770$  These break through bleeds were managed

NOTE Confidence: 0.9159124

 $00:18:26.770 \longrightarrow 00:18:29.140$  with factor replacement or bypassing

NOTE Confidence: 0.9159124

 $00:18:29.206 \rightarrow 00:18:31.366$  agent per the study management guidelines

NOTE Confidence: 0.9159124

 $00:18:31.366 \longrightarrow 00:18:34.489$  with a focus on reduced doses to try

- NOTE Confidence: 0.9159124
- $00:18:34.489 \rightarrow 00:18:36.913$  and minimize the potential thrombotic risk.

00:18:36.920 --> 00:18:37.316 However,

NOTE Confidence: 0.9159124

 $00:18:37.316 \longrightarrow 00:18:40.088$  in the safety analysis of this study,

NOTE Confidence: 0.9159124

 $00:18:40.090 \longrightarrow 00:18:42.532$  97% of patients experienced at least

NOTE Confidence: 0.9159124

00:18:42.532 --> 00:18:45.334 one adverse event with 38% having a

NOTE Confidence: 0.9159124

 $00{:}18{:}45{.}334 \dashrightarrow 00{:}18{:}47{.}569$  serious adverse event which included

NOTE Confidence: 0.9159124

 $00{:}18{:}47{.}569 \dashrightarrow 00{:}18{:}50{.}130$  the events such as an arterial

NOTE Confidence: 0.9159124

 $00{:}18{:}50{.}130 \dashrightarrow 00{:}18{:}52{.}797$  thrombosis in one patient and a death

NOTE Confidence: 0.9159124

 $00{:}18{:}52{.}873 \dashrightarrow 00{:}18{:}55{.}281$  that actually occurred in 2017 as a

NOTE Confidence: 0.9159124

 $00{:}18{:}55{.}281 \dashrightarrow 00{:}18{:}57{.}730$  result of a cerebral vein throm bosis.

NOTE Confidence: 0.9159124

00:18:57.730 --> 00:19:00.080 So in October of 2020,

NOTE Confidence: 0.9159124

00:19:00.080 --> 00:19:01.616 Sanofi voluntarily paused enrollment,

NOTE Confidence: 0.9159124

00:19:01.616 --> 00:19:02.768 inducing with Catoosa,

NOTE Confidence: 0.9159124

00:19:02.770 --> 00:19:05.014 ran to further investigate these adverse

NOTE Confidence: 0.9159124

 $00{:}19{:}05{.}014 \dashrightarrow 00{:}19{:}07{.}359$  events and the rate of thrombotic

 $00:19:07.359 \longrightarrow 00:19:09.319$  events in the clinical trials,

NOTE Confidence: 0.9159124

 $00{:}19{:}09{.}320 \dashrightarrow 00{:}19{:}11{.}582$  these trials have now resumed with

NOTE Confidence: 0.9159124

00:19:11.582 --> 00:19:13.550 reduced dosing of Fatou Suran,

NOTE Confidence: 0.9159124

00:19:13.550 --> 00:19:15.490 initially at 50 milligrams every

NOTE Confidence: 0.9159124

 $00{:}19{:}15{.}490 \dashrightarrow 00{:}19{:}18{.}244$  other month in order to target and

NOTE Confidence: 0.9159124

 $00:19:18.244 \longrightarrow 00:19:20.476$  antithrombin level of 15 to 35%,

NOTE Confidence: 0.9159124

 $00{:}19{:}20{.}480 \dashrightarrow 00{:}19{:}23{.}483$  which was found to be less associated

NOTE Confidence: 0.9159124

 $00{:}19{:}23.483 \dashrightarrow 00{:}19{:}25.380$  with the thrombotic events.

NOTE Confidence: 0.9159124

00:19:25.380 --> 00:19:26.463 So in summary,

NOTE Confidence: 0.9159124

 $00{:}19{:}26{.}463 \dashrightarrow 00{:}19{:}28{.}629$  for chooser and is an investigational

NOTE Confidence: 0.9159124

 $00{:}19{:}28.629 \dashrightarrow 00{:}19{:}30.160$  small interfering RNA the rapeutic

NOTE Confidence: 0.9159124

 $00{:}19{:}30{.}160 \dashrightarrow 00{:}19{:}33{.}168$  and it has the potential use as a

NOTE Confidence: 0.9159124

00:19:33.168 --> 00:19:34.636 prophylactic treatment in patients

NOTE Confidence: 0.9159124

 $00:19:34.636 \rightarrow 00:19:37.140$  with hemophilia A or B with or

NOTE Confidence: 0.9159124

 $00:19:37.140 \longrightarrow 00:19:39.120$  without inhibitors in order to try

NOTE Confidence: 0.9159124

 $00:19:39.120 \dashrightarrow 00:19:40.920$  and reestablish hemostatic balance.

- NOTE Confidence: 0.9159124
- $00{:}19{:}40{.}920 \dashrightarrow 00{:}19{:}41{.}290$  However,
- NOTE Confidence: 0.9159124
- $00:19:41.290 \longrightarrow 00:19:43.140$  further evaluation of its safety
- NOTE Confidence: 0.9159124
- $00{:}19{:}43.140 \dashrightarrow 00{:}19{:}43.880$  is imperative,
- NOTE Confidence: 0.9159124
- $00:19:43.880 \longrightarrow 00:19:45.926$  and phase three trials of this
- NOTE Confidence: 0.9159124
- 00:19:45.926 --> 00:19:47.950 drug are are now ongoing.
- NOTE Confidence: 0.85483044
- $00{:}19{:}50{.}040 \dashrightarrow 00{:}19{:}52{.}152$  And so I'll switch gears a bit with
- NOTE Confidence: 0.85483044
- $00:19:52.152 \rightarrow 00:19:54.228$  this abstract that was presented by
- NOTE Confidence: 0.85483044
- $00{:}19{:}54.228 \dashrightarrow 00{:}19{:}56.088$  Doctor Brooks Sadler from Washington
- NOTE Confidence: 0.85483044
- 00:19:56.088 --> 00:19:58.140 University School of Medicine on Geno
- NOTE Confidence: 0.85483044
- $00:19:58.140 \longrightarrow 00:20:00.232$  type analysis of adolescents with low.
- NOTE Confidence: 0.85483044
- 00:20:00.232 --> 00:20:01.648 One willibrand factor,
- NOTE Confidence: 0.85483044
- $00{:}20{:}01{.}648 \dashrightarrow 00{:}20{:}03{.}536$  an heavy menstrual bleeding.
- NOTE Confidence: 0.85483044
- $00:20:03.540 \rightarrow 00:20:05.592$  She noted that heavy menstrual bleeding
- NOTE Confidence: 0.85483044
- $00:20:05.592 \rightarrow 00:20:07.673$  occurs in about 1/3 of adolescent
- NOTE Confidence: 0.85483044
- $00:20:07.673 \rightarrow 00:20:09.948$  women and accounts for 2/3 of patients
- NOTE Confidence: 0.85483044
$00:20:09.948 \rightarrow 00:20:12.127$  who require hysterectomy and the

NOTE Confidence: 0.85483044

00:20:12.127 --> 00:20:13.923 prevalence of bleeding disorders,

NOTE Confidence: 0.85483044

 $00{:}20{:}13{.}930 \dashrightarrow 00{:}20{:}16{.}012$  including von Willebrand disease in this

NOTE Confidence: 0.85483044

 $00{:}20{:}16.012 \dashrightarrow 00{:}20{:}18.748$  cohort is higher than the general population.

NOTE Confidence: 0.85483044

00:20:18.750 --> 00:20:19.444 However, no,

NOTE Confidence: 0.85483044

 $00:20:19.444 \longrightarrow 00:20:21.526$  no one has looked or evaluated

NOTE Confidence: 0.85483044

 $00{:}20{:}21{.}526 \dashrightarrow 00{:}20{:}23{.}454$  at other genetic hemostatic risk

NOTE Confidence: 0.85483044

 $00:20:23.454 \longrightarrow 00:20:26.163$  factors that may play a role here.

NOTE Confidence: 0.85483044

 $00:20:26.170 \longrightarrow 00:20:27.642$  So in this study,

NOTE Confidence: 0.85483044

 $00:20:27.642 \longrightarrow 00:20:29.850$  86 adolescent patients who met criteria

NOTE Confidence: 0.85483044

 $00{:}20{:}29{.}919 \dashrightarrow 00{:}20{:}32{.}992$  for heavy menstrual bleeding and had von NOTE Confidence: 0.85483044

 $00:20:32.992 \rightarrow 00:20:35.090$  Willebrand activity between 30 and 50%.

NOTE Confidence: 0.85483044

 $00{:}20{:}35{.}090 \dashrightarrow 00{:}20{:}37{.}575$  Were enrolled in the study and underwent

NOTE Confidence: 0.85483044

 $00:20:37.575 \rightarrow 00:20:39.828$  whole exome sequencing that was compared

NOTE Confidence: 0.85483044

 $00{:}20{:}39.828 \dashrightarrow 00{:}20{:}41.698$  to 600 unrelated in-house controls.

NOTE Confidence: 0.85483044

00:20:41.700 --> 00:20:43.625 The sequencing interesting Lee revealed

- NOTE Confidence: 0.85483044
- 00:20:43.625 --> 00:20:46.767 in excess of rare stop gain and stop

 $00{:}20{:}46.767 \dashrightarrow 00{:}20{:}48.692$  loss mutations in genes associated

NOTE Confidence: 0.85483044

 $00:20:48.692 \rightarrow 00:20:50.662$  with bleeding or haematologic diseases

NOTE Confidence: 0.85483044

 $00:20:50.662 \rightarrow 00:20:52.936$  as outlined in the slide here.

NOTE Confidence: 0.85483044

 $00{:}20{:}52{.}940 \dashrightarrow 00{:}20{:}55{.}677$  There was also an excess of rare

NOTE Confidence: 0.85483044

 $00:20:55.677 \longrightarrow 00:20:57.317$  pathogenic variants that were

NOTE Confidence: 0.85483044

 $00{:}20{:}57{.}317 \dashrightarrow 00{:}20{:}59{.}663$  observed in jeans that cause anemia

NOTE Confidence: 0.85483044

 $00{:}20{:}59.663 \dashrightarrow 00{:}21{:}02.408$  or cause disease with anemia as a

NOTE Confidence: 0.85483044

 $00{:}21{:}02{.}408 \dashrightarrow 00{:}21{:}04{.}278$  major symptoms of major symptom.

NOTE Confidence: 0.85483044

00:21:04.280 --> 00:21:07.017 This included variance in Adams TS 13,

NOTE Confidence: 0.85483044

00:21:07.020 --> 00:21:07.435 Fink,

NOTE Confidence: 0.85483044

 $00{:}21{:}07{.}435 \dashrightarrow 00{:}21{:}10{.}340$  CA and G6PD and the other jeans

NOTE Confidence: 0.85483044

00:21:10.340 --> 00:21:12.350 that are listed here.

NOTE Confidence: 0.85483044

00:21:12.350 --> 00:21:14.360 There was analysis Additionally for

NOTE Confidence: 0.85483044

 $00{:}21{:}14.360 \dashrightarrow 00{:}21{:}15.968$  common single nucleotide polymorphism's

 $00:21:15.968 \rightarrow 00:21:18.078$  or snips that were that identified,

NOTE Confidence: 0.85483044

00:21:18.080 --> 00:21:19.990 3 common snips infirm too,

NOTE Confidence: 0.85483044

 $00{:}21{:}19{.}990 \dashrightarrow 00{:}21{:}22{.}755$  and this past genome wide significance as

NOTE Confidence: 0.85483044

 $00:21:22.755 \rightarrow 00:21:26.475$  seen in the figure here on the right firm T2,

NOTE Confidence: 0.85483044

 $00{:}21{:}26.480 \dashrightarrow 00{:}21{:}28.008$  encodes a cytoskeletal protein

NOTE Confidence: 0.85483044

 $00:21:28.008 \rightarrow 00:21:29.918$  that is important in hemostasis,

NOTE Confidence: 0.85483044

00:21:29.920 --> 00:21:31.444 angiogenesis and blood vessel,

NOTE Confidence: 0.85483044

 $00:21:31.444 \rightarrow 00:21:32.936$  home homeostasis, and so.

NOTE Confidence: 0.85483044

 $00{:}21{:}32{.}936 \dashrightarrow 00{:}21{:}35{.}114$  This was the first whole exome

NOTE Confidence: 0.85483044

 $00{:}21{:}35{.}114 \dashrightarrow 00{:}21{:}37{.}572$  sequencing study in patients with heavy

NOTE Confidence: 0.85483044

 $00{:}21{:}37{.}572 \dashrightarrow 00{:}21{:}39{.}652$  menstrual bleeding and suggest there

NOTE Confidence: 0.85483044

 $00:21:39.652 \rightarrow 00:21:42.379$  may be some Association in this group.

NOTE Confidence: 0.85483044

 $00:21:42.380 \longrightarrow 00:21:44.240$  With both rare and common

NOTE Confidence: 0.85483044

00:21:44.240 --> 00:21:46.100 variants in hemostasis and anemia,

NOTE Confidence: 0.85483044

 $00:21:46.100 \longrightarrow 00:21:47.588$  genes that warrant further

NOTE Confidence: 0.85483044

 $00:21:47.588 \longrightarrow 00:21:49.076$  validation in larger studies.

00:21:52.370 --> 00:21:54.750 And Lastly, I wanted to touch upon

NOTE Confidence: 0.8524265

 $00{:}21{:}54.750 \dashrightarrow 00{:}21{:}56.565$  the abstracts that presented data

NOTE Confidence: 0.8524265

 $00{:}21{:}56{.}565 \dashrightarrow 00{:}21{:}59{.}120$  on the use of kobid 19 convales cent

NOTE Confidence: 0.8524265

00:21:59.120 --> 00:22:00.839 plasma convalescent plasma,

NOTE Confidence: 0.8524265

00:22:00.840 --> 00:22:02.765 which is collected from individuals

NOTE Confidence: 0.8524265

 $00{:}22{:}02{.}765 \dashrightarrow 00{:}22{:}04.690$  who have recovered from infection,

NOTE Confidence: 0.8524265

 $00{:}22{:}04.690 \dashrightarrow 00{:}22{:}06.520$  is a the rapeutic modality that's

NOTE Confidence: 0.8524265

 $00:22:06.520 \longrightarrow 00:22:08.803$  actually been used for over a

NOTE Confidence: 0.8524265

 $00{:}22{:}08{.}803 \dashrightarrow 00{:}22{:}11{.}143$  century with the aim to transfer

NOTE Confidence: 0.8524265

 $00{:}22{:}11{.}143 \dashrightarrow 00{:}22{:}12{.}767$  virus neutralizing antibodies to

NOTE Confidence: 0.8524265

 $00:22:12.767 \longrightarrow 00:22:14.697$  patients who have active infection.

NOTE Confidence: 0.8524265

 $00{:}22{:}14.700 \dashrightarrow 00{:}22{:}17.689$  However, data on its use in COVID-19

NOTE Confidence: 0.8524265

 $00{:}22{:}17.689 \dashrightarrow 00{:}22{:}20.349$  has been limited and quite mixed.

NOTE Confidence: 0.8524265

 $00{:}22{:}20{.}350 \dashrightarrow 00{:}22{:}22{.}678$  And so I'll highlight here again,

NOTE Confidence: 0.8524265

 $00:22:22.680 \longrightarrow 00:22:24.630$  the five abstracts that presented

 $00:22:24.630 \longrightarrow 00:22:25.800$  some additional data.

NOTE Confidence: 0.8524265

 $00{:}22{:}25.800 \dashrightarrow 00{:}22{:}27.630$  So in our institutional experience

NOTE Confidence: 0.8524265

 $00{:}22{:}27.630 \dashrightarrow 00{:}22{:}30.202$  with 105 patients with severe or life

NOTE Confidence: 0.8524265

00:22:30.202 --> 00:22:31.892 threatening COVID-19 who were transfuse

NOTE Confidence: 0.8524265

00:22:31.892 --> 00:22:34.359 one unit of convalescent plasma through

NOTE Confidence: 0.8524265

 $00{:}22{:}34{.}359 \dashrightarrow 00{:}22{:}36{.}684$  the national Expanded Access program,

NOTE Confidence: 0.8524265

 $00:22:36.690 \longrightarrow 00:22:39.308$  we saw that 42.9% of patients had

NOTE Confidence: 0.8524265

 $00:22:39.308 \rightarrow 00:22:41.750$  improvement in their WHO ordinal scale,

NOTE Confidence: 0.8524265

 $00{:}22{:}41.750 \dashrightarrow 00{:}22{:}44.078$  which is a score comprised of

NOTE Confidence: 0.8524265

 $00:22:44.078 \longrightarrow 00:22:46.024$  functional status, level of care,

NOTE Confidence: 0.8524265

00:22:46.024 --> 00:22:47.576 and oxygen supplement Tatian.

NOTE Confidence: 0.8524265

 $00:22:47.580 \rightarrow 00:22:48.019$  Interestingly,

NOTE Confidence: 0.8524265

 $00{:}22{:}48.019 \dashrightarrow 00{:}22{:}50.653$  we observed a correlation between D

NOTE Confidence: 0.8524265

 $00:22:50.653 \longrightarrow 00:22:53.472$  dimer level more than five at 2448

NOTE Confidence: 0.8524265

 $00{:}22{:}53{.}472 \dashrightarrow 00{:}22{:}55{.}257$  and 72 hours after transfusion.

NOTE Confidence: 0.8524265

00:22:55.260 --> 00:22:57.380 Convalescent, plasma, and mortality.

- NOTE Confidence: 0.8524265
- 00:22:57.380 --> 00:22:59.500 Ibrahim and colleagues shared

00:22:59.500 --> 00:23:01.499 data on 17 patients,

NOTE Confidence: 0.8524265

 $00{:}23{:}01{.}500 \dashrightarrow 00{:}23{:}04{.}050$  six of whom were being treated

NOTE Confidence: 0.8524265

 $00:23:04.050 \rightarrow 00:23:05.750$  for a hematologic malignancy,

NOTE Confidence: 0.8524265

 $00{:}23{:}05{.}750 \dashrightarrow 00{:}23{:}07{.}505$  and these individuals were transfused

NOTE Confidence: 0.8524265

00:23:07.505 --> 00:23:09.814 one to two units of COVID-19

NOTE Confidence: 0.8524265

 $00{:}23{:}09{.}814 \dashrightarrow 00{:}23{:}12{.}274$  convalescent plasma that had concert

NOTE Confidence: 0.8524265

 $00:23:12.274 \rightarrow 00:23:14.242$  confirmed positive antibody titer,

NOTE Confidence: 0.8524265

 $00{:}23{:}14.250 \dashrightarrow 00{:}23{:}16.632$  and they also observed a decrease

NOTE Confidence: 0.8524265

00:23:16.632 --> 00:23:19.577 in the mean WHO ordinal score by

NOTE Confidence: 0.8524265

 $00{:}23{:}19{.}577 \dashrightarrow 00{:}23{:}22{.}531$  two points at the time of discharge

NOTE Confidence: 0.8524265

00:23:22.615 --> 00:23:25.243 of multi center phase two trial

NOTE Confidence: 0.8524265

 $00{:}23{:}25{.}243 \dashrightarrow 00{:}23{:}27{.}483$  presented by Doctor Al Hashmi

NOTE Confidence: 0.8524265

00:23:27.483 --> 00:23:29.898 compared 178 covid convalescent plasma

NOTE Confidence: 0.8524265

 $00{:}23{:}29.898 \dashrightarrow 00{:}23{:}32.520$  recipients to 391 matched controls.

 $00:23:32.520 \longrightarrow 00:23:34.176$  Is a significant reduction in 30

NOTE Confidence: 0.8524265

 $00{:}23{:}34{.}176 \dashrightarrow 00{:}23{:}36{.}069$  day mortality in the treatment arm.

NOTE Confidence: 0.8524265

 $00:23:36.070 \longrightarrow 00:23:37.111$  In this study,

NOTE Confidence: 0.8524265

 $00{:}23{:}37{.}111 \dashrightarrow 00{:}23{:}38{.}846$  though Interestingly they observed that

NOTE Confidence: 0.8524265

 $00:23:38.846 \rightarrow 00:23:40.766$  the hospital and ICU length of stay

NOTE Confidence: 0.8524265

 $00{:}23{:}40.766$  -->  $00{:}23{:}42.582$  as well as duration of intubation was NOTE Confidence: 0.8524265

 $00{:}23{:}42{.}582 \dashrightarrow 00{:}23{:}44{.}358$  longer and that was actually longer

NOTE Confidence: 0.8524265

 $00{:}23{:}44{.}358 \dashrightarrow 00{:}23{:}46{.}264$  in the convalescent Plasma Group.

NOTE Confidence: 0.8524265

00:23:46.264 --> 00:23:47.140 Another phase,

NOTE Confidence: 0.8524265

 $00{:}23{:}47{.}140 \dashrightarrow 00{:}23{:}49{.}084$  two matched case control study looked

NOTE Confidence: 0.8524265

 $00{:}23{:}49.084 \dashrightarrow 00{:}23{:}51.232$  at a smaller number of hospitalized

NOTE Confidence: 0.8524265

 $00{:}23{:}51{.}232 \dashrightarrow 00{:}23{:}53{.}590$  COVID-19 patients who received 2 units

NOTE Confidence: 0.8524265

 $00{:}23{:}53{.}590 \dashrightarrow 00{:}23{:}55{.}916$  of transfusion and there was a trend

NOTE Confidence: 0.8524265

 $00:23:55.916 \rightarrow 00:23:57.742$  in this group towards improved survival,

NOTE Confidence: 0.8524265

 $00:23:57.742 \longrightarrow 00:23:59.110$  though this was not

NOTE Confidence: 0.8524265

00:23:59.110 - 00:23:59.794 statistically significant,

- NOTE Confidence: 0.8524265
- $00{:}23{:}59{.}800 \dashrightarrow 00{:}24{:}02{.}128$  it was noted in this study that the

00:24:02.128 --> 00:24:04.238 donor plasma was quite heterogeneous,

NOTE Confidence: 0.8524265

 $00:24:04.240 \longrightarrow 00:24:05.950$  with an increase in antibody

NOTE Confidence: 0.8524265

 $00:24:05.950 \rightarrow 00:24:07.318$  activity observed in some,

NOTE Confidence: 0.8524265

 $00:24:07.320 \longrightarrow 00:24:08.346$  but not all,

NOTE Confidence: 0.8524265

00:24:08.346 - 00:24:10.740 of the patients included in the study,

NOTE Confidence: 0.8524265

 $00:24:10.740 \rightarrow 00:24:11.721$  and interesting Lee,

NOTE Confidence: 0.8524265

 $00{:}24{:}11{.}721 \dashrightarrow 00{:}24{:}14{.}010$  those who had undergone anti CD 20

NOTE Confidence: 0.8524265

 $00{:}24{:}14.069 \dashrightarrow 00{:}24{:}16.589$  treatment in the last year had a demo

NOTE Confidence: 0.8524265

 $00{:}24{:}16{.}589 \dashrightarrow 00{:}24{:}18{.}350$  demonstrated an impaired response.

NOTE Confidence: 0.8524265

00:24:18.350 --> 00:24:20.200 In regards to antibody activity

NOTE Confidence: 0.8524265

 $00{:}24{:}20{.}200 \dashrightarrow 00{:}24{:}22{.}754$  and Lastly a multi center Phase 1

NOTE Confidence: 0.8524265

 $00:24:22.754 \longrightarrow 00:24:24.980$  two trial of 70 patients who had

NOTE Confidence: 0.8524265

00:24:24.980 --> 00:24:26.237 received COVID-19 convalescent

NOTE Confidence: 0.8524265

 $00:24:26.237 \longrightarrow 00:24:28.847$  plasma found that 30 day overall

 $00:24:28.847 \longrightarrow 00:24:30.917$  survival was improved in those

NOTE Confidence: 0.8524265

00:24:30.917 --> 00:24:32.912 patients who had severe acute

NOTE Confidence: 0.8524265

 $00{:}24{:}32{.}912 \dashrightarrow 00{:}24{:}34{.}812$  respiratory distress syndrome as a

NOTE Confidence: 0.8524265

 $00:24:34.812 \longrightarrow 00:24:36.537$  part of their COVID-19 infection,

NOTE Confidence: 0.8524265

00:24:36.540 --> 00:24:39.186 though there was an adverse event rate

NOTE Confidence: 0.8524265

00:24:39.186 --> 00:24:41.605 of 3.65% and there was one patient

NOTE Confidence: 0.8524265

 $00{:}24{:}41.605 \dashrightarrow 00{:}24{:}44.120$  who was observed to have transfusion,

NOTE Confidence: 0.8524265

 $00:24:44.120 \rightarrow 00:24:45.772$  associated circulatory overload and

NOTE Confidence: 0.8524265

 $00{:}24{:}45.772 \dashrightarrow 00{:}24{:}48.759$  a second that was observed to have a.

NOTE Confidence: 0.8524265

00:24:48.760 --> 00:24:51.140 A venous throm<br/>boembolic event.

NOTE Confidence: 0.8445773

 $00{:}24{:}53.740 \dashrightarrow 00{:}24{:}56.064$  So the QR code included here on

NOTE Confidence: 0.8445773

 $00{:}24{:}56.064 \dashrightarrow 00{:}24{:}58.429$  this slide links to a section of

NOTE Confidence: 0.8445773

 $00{:}24{:}58{.}429 \dashrightarrow 00{:}25{:}00{.}379$  the ash website that discuss is

NOTE Confidence: 0.8445773

 $00{:}25{:}00{.}449 \dashrightarrow 00{:}25{:}02{.}869$  our available evidence on COVID-19.

NOTE Confidence: 0.8445773

00:25:02.870 --> 00:25:04.690 Convalescent Plasma provides a summary.

NOTE Confidence: 0.8445773

 $00:25:04.690 \longrightarrow 00:25:06.880$  As you can see, just from

- NOTE Confidence: 0.8445773
- $00:25:06.880 \longrightarrow 00:25:08.340$  the data presented today,

 $00{:}25{:}08{.}340 \dashrightarrow 00{:}25{:}09{.}716$  information on its effectiveness

NOTE Confidence: 0.8445773

 $00{:}25{:}09{.}716 \dashrightarrow 00{:}25{:}11.436$  has been somewhat mixed and

NOTE Confidence: 0.8445773

 $00:25:11.436 \rightarrow 00:25:13.370$  we're really awaiting data from

NOTE Confidence: 0.8445773

 $00:25:13.370 \rightarrow 00:25:14.906$  larger randomized control trials.

NOTE Confidence: 0.8445773

 $00{:}25{:}14.910 \dashrightarrow 00{:}25{:}17.465$  There are some themes that have emerged,

NOTE Confidence: 0.8445773

 $00:25:17.470 \longrightarrow 00:25:19.290$  and they include the importance

NOTE Confidence: 0.8445773

 $00:25:19.290 \longrightarrow 00:25:20.746$  of both antibody titer,

NOTE Confidence: 0.8445773

 $00{:}25{:}20.750 \dashrightarrow 00{:}25{:}23.126$  but more notably neutralizing function in

NOTE Confidence: 0.8445773

 $00{:}25{:}23{.}126 \dashrightarrow 00{:}25{:}25{.}150$  the donor COVID-19 convalescent plasma.

NOTE Confidence: 0.8445773

 $00{:}25{:}25{.}150 \dashrightarrow 00{:}25{:}28{.}166$  As well as the benefit of providing this

NOTE Confidence: 0.8445773

 $00{:}25{:}28.166 \dashrightarrow 00{:}25{:}30.159$  treatment earlier in disease course,

NOTE Confidence: 0.8445773

 $00{:}25{:}30{.}160 \dashrightarrow 00{:}25{:}32{.}162$  there has been concern raised by our

NOTE Confidence: 0.8445773

 $00{:}25{:}32.162 \dashrightarrow 00{:}25{:}33.968$  group and others regarding whether

NOTE Confidence: 0.8445773

 $00{:}25{:}33{.}968 \dashrightarrow 00{:}25{:}35{.}756$ COVID-19 convalescent plasma may

 $00:25:35.756 \rightarrow 00:25:37.544$  actually potentiates the already

NOTE Confidence: 0.8445773

00:25:37.607 -> 00:25:39.008 increased thrombotic risk.

NOTE Confidence: 0.8445773

 $00{:}25{:}39{.}010 \dashrightarrow 00{:}25{:}41{.}514$  An end to Ophelia Opathy that we now

NOTE Confidence: 0.8445773

 $00{:}25{:}41{.}514 \dashrightarrow 00{:}25{:}44{.}041$  know occurs with COVID-19 and further

NOTE Confidence: 0.8445773

 $00:25:44.041 \rightarrow 00:25:46.326$  investigation into this is warranted.

NOTE Confidence: 0.8445773

 $00{:}25{:}46{.}330 \dashrightarrow 00{:}25{:}48{.}610$  So taking this all into account

NOTE Confidence: 0.8445773

 $00:25:48.610 \longrightarrow 00:25:50.949$  as of just actually last week,

NOTE Confidence: 0.8445773

 $00:25:50.950 \rightarrow 00:25:53.194$  the FDA has updated their emergency

NOTE Confidence: 0.8445773

 $00{:}25{:}53{.}194 \dashrightarrow 00{:}25{:}54{.}690$  use authorization for COVID-19

NOTE Confidence: 0.8445773

00:25:54.747 --> 00:25:55.879 convalescent plasma.

NOTE Confidence: 0.8445773

 $00{:}25{:}55{.}880 \dashrightarrow 00{:}25{:}57{.}819$  Really limiting it to use of high

NOTE Confidence: 0.8445773

 $00{:}25{:}57{.}819 \dashrightarrow 00{:}25{:}59{.}067$  titer plasma for hospitalized

NOTE Confidence: 0.8445773

 $00{:}25{:}59.067 \dashrightarrow 00{:}26{:}01.197$  patients that are early in their

NOTE Confidence: 0.8445773

 $00:26:01.197 \rightarrow 00:26:03.392$  disease course and those who may

NOTE Confidence: 0.8445773

 $00{:}26{:}03.392 \dashrightarrow 00{:}26{:}04.820$  have impaired humoral immunity.

NOTE Confidence: 0.8751028

00:26:07.060 --> 00:26:10.000 Thank you and I'll turn it over to Alex now.

- NOTE Confidence: 0.668146
- 00:26:14.400 --> 00:26:18.680 Thank you Sabrina. I'm just.

 $00:26:33.060 \rightarrow 00:26:36.686$  OK, hopefully everybody can see the screen.

NOTE Confidence: 0.6899577

00:26:39.910 --> 00:26:44.214 Al<br/>right, wanted to say thank you to decide

NOTE Confidence: 0.6899577

 $00{:}26{:}44{.}214 \dashrightarrow 00{:}26{:}48{.}893$  and Megadeth for putting all this together

NOTE Confidence: 0.6899577

 $00:26:48.893 \rightarrow 00:26:52.613$  and everybody who's contributed else.

NOTE Confidence: 0.6899577

 $00{:}26{:}52.620 \dashrightarrow 00{:}26{:}55.434$  Um, exciting, serious, and learning a lot.

NOTE Confidence: 0.6899577

 $00:26:55.440 \longrightarrow 00:26:58.296$  So I am going to see if I

NOTE Confidence: 0.6899577

 $00:26:58.296 \longrightarrow 00:27:00.683$  can move the slides. Yes,

NOTE Confidence: 0.6899577

 $00{:}27{:}00{.}683 \dashrightarrow 00{:}27{:}06{.}360$  I'm just going to touch upon a few guests. 3.

NOTE Confidence: 0.6899577

 $00:27:06.360 \longrightarrow 00:27:09.727$  The abstracts that that and identified,

NOTE Confidence: 0.6899577

 $00{:}27{:}09{.}730 \dashrightarrow 00{:}27{:}11{.}714$  and specifically about cancer,

NOTE Confidence: 0.6899577

00:27:11.714 --> 00:27:13.202 associated venous throm<br/>boembolism

NOTE Confidence: 0.6899577

 $00{:}27{:}13.202 \dashrightarrow 00{:}27{:}16.586$  and one of the new exciting agent

NOTE Confidence: 0.6899577

 $00{:}27{:}16.586 \dashrightarrow 00{:}27{:}18.406$  for reversal of anticoagulation.

NOTE Confidence: 0.6899577

 $00{:}27{:}18{.}410 \dashrightarrow 00{:}27{:}21{.}980$  And then I'm going to touch

- $00:27:21.980 \longrightarrow 00:27:25.180$  base and our own work.
- NOTE Confidence: 0.6899577
- $00:27:25.180 \longrightarrow 00:27:27.250$  Thrombosis and COVID-19.
- NOTE Confidence: 0.6899577
- $00{:}27{:}27{.}250 \dashrightarrow 00{:}27{:}31{.}780$  How it actually. Informed us about
- NOTE Confidence: 0.6899577
- $00:27:31.780 \longrightarrow 00:27:35.060$  in conditions beyond COVID-19.
- NOTE Confidence: 0.6899577
- $00{:}27{:}35{.}060 \dashrightarrow 00{:}27{:}37{.}830$  No disclosures on my end.
- NOTE Confidence: 0.6899577
- $00{:}27{:}37{.}830 \dashrightarrow 00{:}27{:}39{.}267$  Um, so the.
- NOTE Confidence: 0.6899577
- $00:27:39.267 \longrightarrow 00:27:42.141$  One of the first highlight the
- NOTE Confidence: 0.6899577
- $00{:}27{:}42.141 \dashrightarrow 00{:}27{:}44.912$  this abstract about machine
- NOTE Confidence: 0.6899577
- $00{:}27{:}44{.}912 \dashrightarrow 00{:}27{:}48{.}547$  learning for prediction of cancer.
- NOTE Confidence: 0.6899577
- 00:27:48.550 --> 00:27:49.578 Social verbalism,
- NOTE Confidence: 0.6899577
- $00{:}27{:}49.578 \dashrightarrow 00{:}27{:}52.662$  especially in the setting of new
- NOTE Confidence: 0.6899577
- $00:27:52.662 \longrightarrow 00:27:54.805$  guidelines that ash guidelines
- NOTE Confidence: 0.6899577
- $00:27:54.805 \longrightarrow 00:27:57.375$  that have been just released
- NOTE Confidence: 0.6899577
- $00{:}27{:}57{.}375 \dashrightarrow 00{:}27{:}59{.}550$  about cancer regarding cancer.
- NOTE Confidence: 0.6899577
- $00{:}27{:}59{.}550 \dashrightarrow 00{:}28{:}01{.}236$  Associated venous throm boembolism
- NOTE Confidence: 0.6899577
- $00:28:01.236 \longrightarrow 00:28:05.777$  just the other day and as you all

- NOTE Confidence: 0.6899577
- $00{:}28{:}05{.}777 \dashrightarrow 00{:}28{:}08{.}879$  know we there are several clinical

 $00{:}28{:}08.879 \dashrightarrow 00{:}28{:}12.129$  prediction rules of which comma score.

NOTE Confidence: 0.6899577

 $00:28:12.130 \longrightarrow 00:28:15.406$  Is most validated and had been.

NOTE Confidence: 0.6899577

 $00:28:15.410 \rightarrow 00:28:21.218$  Used to stratify the risk in multiple trials,

NOTE Confidence: 0.6899577

 $00{:}28{:}21{.}220 \dashrightarrow 00{:}28{:}25{.}000$  including most recently a PERT and

NOTE Confidence: 0.6899577

00:28:25.000 --> 00:28:28.499 Cassini RCT S42 Deluxe prophylactic

NOTE Confidence: 0.6899577

00:28:28.499 --> 00:28:32.829 regimen versus placebo and recall.

NOTE Confidence: 0.6899577

 $00:28:32.830 \longrightarrow 00:28:37.345$  It's pretty simple score to

NOTE Confidence: 0.6899577

 $00:28:37.345 \longrightarrow 00:28:40.957$  to use the questions.

NOTE Confidence: 0.6899577

 $00:28:40.960 \longrightarrow 00:28:43.634$  We have been raised over the over

NOTE Confidence: 0.6899577

 $00:28:43.634 \rightarrow 00:28:45.960$  over the years is exactly where

NOTE Confidence: 0.6899577

 $00{:}28{:}45{.}960 \dashrightarrow 00{:}28{:}48{.}522$  the draw the line in terms of

NOTE Confidence: 0.6899577

 $00:28:48.606 \rightarrow 00:28:52.044$  prophylaxis versus which group to sort

NOTE Confidence: 0.6899577

 $00:28:52.044 \rightarrow 00:28:54.336$  of start prophylactic production,

NOTE Confidence: 0.6899577

 $00{:}28{:}54{.}340 \dashrightarrow 00{:}28{:}55{.}678$  if at all.

- 00:28:55.678 --> 00:28:56.570 And Furthermore,
- NOTE Confidence: 0.6899577
- 00:28:56.570 --> 00:28:59.246 since Corona score as anybody know,
- NOTE Confidence: 0.6899577
- $00{:}28{:}59{.}250 \dashrightarrow 00{:}29{:}01{.}255$  several other scores have been
- NOTE Confidence: 0.6899577
- $00{:}29{:}01{.}255 \dashrightarrow 00{:}29{:}03{.}260$  released that had also been
- NOTE Confidence: 0.6899577
- $00{:}29{:}03.330 \dashrightarrow 00{:}29{:}05.750$  addressing certain features that had
- NOTE Confidence: 0.6899577
- $00{:}29{:}05{.}750 \dashrightarrow 00{:}29{:}08{.}170$  not been including current score.
- NOTE Confidence: 0.6899577
- $00{:}29{:}08{.}170 \dashrightarrow 00{:}29{:}11{.}334$  But unfortunately all of them have been.
- NOTE Confidence: 0.6899577
- $00:29:11.340 \rightarrow 00:29:15.834$  Not so useful in terms of prediction
- NOTE Confidence: 0.6899577
- $00{:}29{:}15{.}834 \dashrightarrow 00{:}29{:}18{.}421$  because their predicted power
- NOTE Confidence: 0.6899577
- $00{:}29{:}18{.}421 \dashrightarrow 00{:}29{:}22{.}243$  was not was in moderate mild to
- NOTE Confidence: 0.6899577
- $00:29:22.243 \rightarrow 00:29:25.332$  moderate sort of territory with
- NOTE Confidence: 0.6899577
- $00:29:25.332 \longrightarrow 00:29:28.477$  statistics between .6 and .7.
- NOTE Confidence: 0.6899577
- 00:29:28.480 --> 00:29:31.540 So for Corona score itself,
- NOTE Confidence: 0.6899577
- $00{:}29{:}31{.}540 \dashrightarrow 00{:}29{:}36{.}428$  there's a three categories so long to medium,
- NOTE Confidence: 0.6899577
- $00:29:36.430 \longrightarrow 00:29:38.958$  high and specifically in
- NOTE Confidence: 0.6899577
- $00:29:38.958 \rightarrow 00:29:41.486$  high in the original.

- NOTE Confidence: 0.6899577
- 00:29:41.490 --> 00:29:44.778 An original paper by Doctor Corona.

 $00{:}29{:}44.780 \dashrightarrow 00{:}29{:}49.172$  We know that the rate of DTE was

NOTE Confidence: 0.6899577

00:29:49.172 --> 00:29:52.306 about 7% in high risk cohort,

NOTE Confidence: 0.6899577

 $00{:}29{:}52{.}306 \dashrightarrow 00{:}29{:}56{.}713$  so the authors of this app start from

NOTE Confidence: 0.6899577

 $00{:}29{:}56{.}713 \dashrightarrow 00{:}29{:}59{.}864$ Libor Sloan, Kettering, US Sameta and.

NOTE Confidence: 0.6899577

 $00{:}29{:}59{.}864 \dashrightarrow 00{:}30{:}02{.}720$  Microsoft Group they sought to use

NOTE Confidence: 0.6899577

 $00:30:02.807 \rightarrow 00:30:05.711$  to to utilize the machine learning

NOTE Confidence: 0.6899577

 $00:30:05.711 \rightarrow 00:30:08.701$  algorithms to inform about the which

NOTE Confidence: 0.6899577

00:30:08.701 --> 00:30:11.121 features actually would be more

NOTE Confidence: 0.6899577

00:30:11.121 --> 00:30:13.765 productive in there for create a

NOTE Confidence: 0.6899577

 $00{:}30{:}13.765 \dashrightarrow 00{:}30{:}16.135$  score or update the current score

NOTE Confidence: 0.6899577

 $00{:}30{:}16.135 \dashrightarrow 00{:}30{:}18.335$  that potentially could increase

NOTE Confidence: 0.6899577

 $00:30:18.335 \longrightarrow 00:30:20.635$  the its predictive power.

NOTE Confidence: 0.6899577

 $00:30:20.640 \longrightarrow 00:30:23.995$  So they positive that they

NOTE Confidence: 0.6899577

00:30:23.995 - 00:30:26.679 would use known predictors.

- $00:30:26.680 \longrightarrow 00:30:28.364$  It from Corona score.
- NOTE Confidence: 0.6899577
- $00:30:28.364 \longrightarrow 00:30:30.469$  They would utilize too much

 $00:30:30.469 \longrightarrow 00:30:32.809$  genomic information that they they

NOTE Confidence: 0.6899577

 $00{:}30{:}32{.}809 \dashrightarrow 00{:}30{:}35{.}563$  collect it in their preferred their

NOTE Confidence: 0.6899577

00:30:35.637 --> 00:30:38.433 profiling assay with 341 uncle gene

NOTE Confidence: 0.6899577

 $00{:}30{:}38{.}433 \dashrightarrow 00{:}30{:}40{.}297$  and tumor suppressor genes.

NOTE Confidence: 0.6899577

00:30:40.300 --> 00:30:40.897 Overall,

NOTE Confidence: 0.6899577

 $00{:}30{:}40.897 \dashrightarrow 00{:}30{:}45.076$  they had a significant number of patients

NOTE Confidence: 0.6899577

 $00:30:45.076 \longrightarrow 00:30:49.559$  at 12,000 out of those they had about 850.

NOTE Confidence: 0.6899577

 $00{:}30{:}49{.}560 \dashrightarrow 00{:}30{:}52{.}152$  It's something about like events in

NOTE Confidence: 0.6899577

 $00{:}30{:}52.152 \dashrightarrow 00{:}30{:}55.679$  the span of six months from from

NOTE Confidence: 0.6899577

 $00:30:55.679 \rightarrow 00:30:57.955$  the diagnosis from enrollment,

NOTE Confidence: 0.6899577

 $00:30:57.960 \dashrightarrow 00:31:00.430$  and most frequent cancer along

NOTE Confidence: 0.6899577

 $00:31:00.430 \longrightarrow 00:31:01.418$  Bryson colorectal.

NOTE Confidence: 0.6899577

 $00:31:01.420 \longrightarrow 00:31:04.384$  They did not include upper extremity

NOTE Confidence: 0.6899577

 $00:31:04.384 \rightarrow 00:31:06.360$  DVT's and their collected.

- NOTE Confidence: 0.6899577
- $00:31:06.360 \rightarrow 00:31:09.204$  This is amazing that they collected

 $00{:}31{:}09{.}204 \dashrightarrow 00{:}31{:}11{.}695$  all these events from clinic

NOTE Confidence: 0.6899577

00:31:11.695 --> 00:31:14.255 from review of clinical notes,

NOTE Confidence: 0.802935

00:31:14.260 --> 00:31:16.730 radiology reports and text search,

NOTE Confidence: 0.802935

 $00:31:16.730 \rightarrow 00:31:20.286$  which itself is very valiant effort knowing.

NOTE Confidence: 0.802935

00:31:20.290 --> 00:31:25.270 Anne. From now, from my from my

NOTE Confidence: 0.802935

 $00:31:25.270 \rightarrow 00:31:27.550$  own experience doing similar work.

NOTE Confidence: 0.802935

 $00:31:27.550 \longrightarrow 00:31:31.230$  So as far as the predictors that they

NOTE Confidence: 0.802935

 $00:31:31.230 \longrightarrow 00:31:35.148$  put that they use in the in the model,

NOTE Confidence: 0.802935

 $00{:}31{:}35{.}150 \dashrightarrow 00{:}31{:}38{.}272$  which was not really clear how they

NOTE Confidence: 0.802935

00:31:38.272 --> 00:31:41.145 selected it, but it seemed like it

NOTE Confidence: 0.802935

 $00{:}31{:}41{.}145 \dashrightarrow 00{:}31{:}44.090$  was some sort of manual selection.

NOTE Confidence: 0.802935

00:31:44.090 --> 00:31:45.766 Not unbiased informed selection,

NOTE Confidence: 0.802935

 $00{:}31{:}45.766 \dashrightarrow 00{:}31{:}48.280$  at least based on their abstract

NOTE Confidence: 0.802935

 $00:31:48.352 \rightarrow 00:31:49.450$  and presentation.

 $00:31:49.450 \rightarrow 00:31:52.579$  So the tumor type status of metastases,

NOTE Confidence: 0.802935

 $00:31:52.580 \rightarrow 00:31:54.815$  age, cytotoxic chemotherapy time since

NOTE Confidence: 0.802935

00:31:54.815 --> 00:31:56.656 cancer diagnosis, tumor sampling,

NOTE Confidence: 0.802935

 $00:31:56.656 \rightarrow 00:31:58.548$  and they included interesting

NOTE Confidence: 0.802935

 $00:31:58.548 \longrightarrow 00:32:00.440$  without the blood counts.

NOTE Confidence: 0.802935

 $00:32:00.440 \longrightarrow 00:32:01.730$  In the prior three months.

NOTE Confidence: 0.750427

 $00:32:04.110 \longrightarrow 00:32:08.432$  Indices of calculation be my end. Of course.

NOTE Confidence: 0.750427

 $00{:}32{:}08{.}432 \dashrightarrow 00{:}32{:}10{.}962$  Those somatic genetic alterations on

NOTE Confidence: 0.750427

 $00{:}32{:}10.962 \dashrightarrow 00{:}32{:}14.598$  the jeans in tumor suppression genes,

NOTE Confidence: 0.750427

 $00:32:14.600 \longrightarrow 00:32:18.410$  of which they include 56.

NOTE Confidence: 0.750427

 $00{:}32{:}18{.}410 \dashrightarrow 00{:}32{:}20{.}834$  And so when they put it all together

NOTE Confidence: 0.750427

 $00:32:20.834 \rightarrow 00:32:22.929$  and they used this fancy math,

NOTE Confidence: 0.750427

 $00:32:22.930 \longrightarrow 00:32:24.666$  the random survival forest

NOTE Confidence: 0.750427

 $00:32:24.666 \longrightarrow 00:32:27.270$  basically to create a model to

NOTE Confidence: 0.750427

 $00{:}32{:}27{.}353 \dashrightarrow 00{:}32{:}29{.}866$  fit the model using all of these.

NOTE Confidence: 0.750427

 $00:32:29.870 \rightarrow 00:32:32.789$  Various sets of permutations of the features,

- NOTE Confidence: 0.750427
- $00:32:32.790 \rightarrow 00:32:36.126$  the predictors and what they come up with.

 $00:32:36.130 \longrightarrow 00:32:38.315$  It came up with basically

NOTE Confidence: 0.750427

 $00:32:38.315 \longrightarrow 00:32:41.130$  that if you include all of it,

NOTE Confidence: 0.750427

 $00:32:41.130 \longrightarrow 00:32:44.007$  that gives usage statistics of .7 is

NOTE Confidence: 0.750427

 $00:32:44.007 \rightarrow 00:32:47.379$  just the kind of worry and people here.

NOTE Confidence: 0.750427

 $00:32:47.380 \longrightarrow 00:32:50.716$  If it's insisted 6.5 is a coin toss,

NOTE Confidence: 0.750427

 $00:32:50.720 \dashrightarrow 00:32:52.840$  so basically it doesn't predict

NOTE Confidence: 0.750427

 $00{:}32{:}52{.}840 \dashrightarrow 00{:}32{:}55{.}310$  anything and see statistics of one.

NOTE Confidence: 0.750427

00:32:55.310 --> 00:32:56.978 It's the perfect sensitivity,

NOTE Confidence: 0.750427

00:32:56.978 --> 00:33:00.070 specificity of 5%, of course is unreachable.

NOTE Confidence: 0.750427

00:33:00.070 -> 00:33:02.370 So somewhere in between that,

NOTE Confidence: 0.750427

 $00{:}33{:}02{.}370 \dashrightarrow 00{:}33{:}04{.}882$  the higher the better.

NOTE Confidence: 0.750427

 $00{:}33{:}04.882 \dashrightarrow 00{:}33{:}08.022$  But .7 ISM is it.

NOTE Confidence: 0.750427

00:33:08.030 --> 00:33:08.934 Legitimate number,

NOTE Confidence: 0.750427

 $00{:}33{:}08{.}934 \dashrightarrow 00{:}33{:}12{.}550$  and as I would like to remind every body,

 $00:33:12.550 \longrightarrow 00:33:15.230$  the original credit score

NOTE Confidence: 0.750427

 $00{:}33{:}15{.}230 \dashrightarrow 00{:}33{:}18{.}580$  system tistic was also .7.

NOTE Confidence: 0.750427

 $00{:}33{:}18.580 \dashrightarrow 00{:}33{:}21.115$  They also then separated their

NOTE Confidence: 0.750427

00:33:21.115 --> 00:33:23.143 population into five groups,

NOTE Confidence: 0.750427

 $00:33:23.150 \longrightarrow 00:33:26.156$  although how they get it not

NOTE Confidence: 0.750427

 $00:33:26.156 \longrightarrow 00:33:28.740$  clearly was outlined as well,

NOTE Confidence: 0.750427

 $00:33:28.740 \dashrightarrow 00:33:32.796$  and it's five risk groups based on the.

NOTE Confidence: 0.78821117

00:33:36.460 --> 00:33:38.810 Incidence of VTE I presume,

NOTE Confidence: 0.78821117

00:33:38.810 --> 00:33:42.982 and so then they validated this with NOTE Confidence: 0.78821117

 $00:33:42.982 \longrightarrow 00:33:47.580$  the model in the said that that is.

NOTE Confidence: 0.78821117

 $00{:}33{:}47{.}580$  -->  $00{:}33{:}50{.}670$  Per their validation metric that was NOTE Confidence: 0.78821117

 $00{:}33{:}50{.}670 \dashrightarrow 00{:}33{:}55{.}110$  validated, model was performed well.

NOTE Confidence: 0.78821117

00:33:55.110 --> 00:33:56.865 With, Interestingly enough,

NOTE Confidence: 0.78821117

 $00{:}33{:}56.865 \dashrightarrow 00{:}33{:}59.790$  when they looked at which

NOTE Confidence: 0.78821117

 $00{:}33{:}59{.}790 \dashrightarrow 00{:}34{:}02{.}937$  predictors had been most predictive

NOTE Confidence: 0.78821117

 $00:34:02.937 \dashrightarrow 00:34:05.445$  of the venous thromboembolism,

- NOTE Confidence: 0.78821117
- 00:34:05.450 00:34:10.306 they found that it's a cancer type came,

 $00{:}34{:}10{.}310 \dashrightarrow 00{:}34{:}13{.}830$  whether patient received chemotherapy,

NOTE Confidence: 0.78821117

 $00:34:13.830 \longrightarrow 00:34:15.590$  platelet count.

NOTE Confidence: 0.78821117

 $00:34:15.590 \rightarrow 00:34:19.790$  PT White count and so on was interesting.

NOTE Confidence: 0.78821117

 $00{:}34{:}19.790 \dashrightarrow 00{:}34{:}24.806$  This is out of these features.

NOTE Confidence: 0.78821117

 $00:34:24.810 \longrightarrow 00:34:27.450$  Where this is not a selection,

NOTE Confidence: 0.78821117

 $00:34:27.450 \dashrightarrow 00:34:29.650$  so these features were determined.

NOTE Confidence: 0.78821117

 $00:34:29.650 \rightarrow 00:34:32.452$  The importance of these features was

NOTE Confidence: 0.78821117

 $00:34:32.452 \longrightarrow 00:34:35.369$  determined in in sort of post hoc.

NOTE Confidence: 0.78821117

 $00:34:35.370 \longrightarrow 00:34:38.676$  These are not the features that

NOTE Confidence: 0.78821117

 $00{:}34{:}38.676 \dashrightarrow 00{:}34{:}42.620$  were selected to go into the model.

NOTE Confidence: 0.78821117

 $00{:}34{:}42.620 \dashrightarrow 00{:}34{:}45.056$  That's it, that's a key issue,

NOTE Confidence: 0.78821117

 $00:34:45.060 \rightarrow 00:34:48.870$  because in my opinion, because.

NOTE Confidence: 0.78821117

00:34:48.870 -> 00:34:52.398 If the if you if you if the features

NOTE Confidence: 0.78821117

 $00:34:52.398 \longrightarrow 00:34:55.339$  are included in a biased way,

 $00:34:55.340 \longrightarrow 00:34:58.020$  the prediction of course would

NOTE Confidence: 0.78821117

 $00:34:58.020 \rightarrow 00:35:00.164$  potentially suffer as well.

NOTE Confidence: 0.78821117

 $00{:}35{:}00{.}170 \dashrightarrow 00{:}35{:}04.850$  And so out of all the genes that they pulled.

NOTE Confidence: 0.78821117

00:35:04.850 --> 00:35:08.270 As you can see this STK 11 was found

NOTE Confidence: 0.78821117

 $00{:}35{:}08{.}270 \dashrightarrow 00{:}35{:}12{.}172$  to be significant and only one of them

NOTE Confidence: 0.78821117

 $00{:}35{:}12.172 \dashrightarrow 00{:}35{:}16.080$  based on value of false detection rate.

NOTE Confidence: 0.78821117

00:35:16.080 --> 00:35:18.888 So every every other one gene

NOTE Confidence: 0.78821117

 $00:35:18.888 \rightarrow 00:35:20.760$  was not considered significant.

NOTE Confidence: 0.78821117

 $00{:}35{:}20.760 \dashrightarrow 00{:}35{:}23.100$  And as people probably know,

NOTE Confidence: 0.78821117

 $00{:}35{:}23.100 \dashrightarrow 00{:}35{:}26.190$  STK 11 is actually tumor suppressor

NOTE Confidence: 0.78821117

 $00{:}35{:}26.190 \dashrightarrow 00{:}35{:}29.870$  gene out of all possible jeans.

NOTE Confidence: 0.78821117

 $00{:}35{:}29{.}870 \dashrightarrow 00{:}35{:}32{.}470$  So question on my end that I sort

NOTE Confidence: 0.78821117

 $00{:}35{:}32{.}470 \dashrightarrow 00{:}35{:}35{.}428$  of would like to one of wanted to

NOTE Confidence: 0.78821117

 $00:35:35.428 \longrightarrow 00:35:37.598$  clarify was unclear how initial

NOTE Confidence: 0.78821117

00:35:37.598 --> 00:35:39.398 features were selected,

NOTE Confidence: 0.78821117

 $00:35:39.400 \rightarrow 00:35:41.722$  and again that's important because the

 $00{:}35{:}41.722 \dashrightarrow 00{:}35{:}45.172$  biased it will be by a set of features

NOTE Confidence: 0.78821117

 $00{:}35{:}45{.}172 \dashrightarrow 00{:}35{:}47{.}511$  if it manually manually selected and

NOTE Confidence: 0.78821117

 $00:35:47.511 \rightarrow 00:35:50.115$  similar to other clinical scoring tools.

NOTE Confidence: 0.78821117

 $00{:}35{:}50{.}120 \dashrightarrow 00{:}35{:}52{.}538$  So there are some robust methods

NOTE Confidence: 0.78821117

 $00{:}35{:}52{.}538 \dashrightarrow 00{:}35{:}54{.}630$  exist that feature feature selection

NOTE Confidence: 0.78821117

 $00{:}35{:}54{.}630 \dashrightarrow 00{:}35{:}57{.}048$  algorithm that you know existed prior

NOTE Confidence: 0.78821117

 $00{:}35{:}57{.}048 \dashrightarrow 00{:}36{:}00{.}179$  that can be used to to select features

NOTE Confidence: 0.78821117

 $00:36:00.179 \longrightarrow 00:36:02.420$  prior to including into the model.

NOTE Confidence: 0.78821117

 $00:36:02.420 \longrightarrow 00:36:03.980$  That would be very,

NOTE Confidence: 0.78821117

 $00:36:03.980 \longrightarrow 00:36:05.420$  very helpful in China.

NOTE Confidence: 0.79679555

 $00:36:09.630 \dashrightarrow 00:36:11.534$  Something something like this.

NOTE Confidence: 0.79679555

 $00{:}36{:}11{.}534$  -->  $00{:}36{:}14{.}889$  We were actually thinking of doing the NOTE Confidence: 0.79679555

 $00{:}36{:}14.889 \dashrightarrow 00{:}36{:}16.979$  VA and another interesting component NOTE Confidence: 0.79679555

00:36:16.979 --> 00:36:20.001 was prior vtu is not included although NOTE Confidence: 0.79679555

00:36:20.001 --> 00:36:22.976 has it has a racial quoted somewhere NOTE Confidence: 0.79679555

 $00{:}36{:}22{.}980 \dashrightarrow 00{:}36{:}27{.}444$  in between two to three which is not

NOTE Confidence: 0.79679555

 $00:36:27.444 \rightarrow 00:36:30.799$  insignificant risk factor and of course.

NOTE Confidence: 0.79679555

 $00{:}36{:}30{.}800 \dashrightarrow 00{:}36{:}32{.}990$  Current score is not the dynamic

NOTE Confidence: 0.79679555

 $00:36:32.990 \dashrightarrow 00:36:35.894$  score and would be interested to know

NOTE Confidence: 0.79679555

 $00:36:35.894 \rightarrow 00:36:38.174$  how variability of the features,

NOTE Confidence: 0.79679555

 $00:36:38.180 \dashrightarrow 00:36:40.230$  specifically of CBC features assessed.

NOTE Confidence: 0.79679555

 $00{:}36{:}40{.}230 \dashrightarrow 00{:}36{:}42{.}911$  So overall it's I think it's important

NOTE Confidence: 0.79679555

 $00:36:42.911 \dashrightarrow 00:36:45.800$  work and I think it's a interesting

NOTE Confidence: 0.79679555

 $00{:}36{:}45{.}800 \dashrightarrow 00{:}36{:}48{.}840$  how the field of all because again,

NOTE Confidence: 0.79679555

 $00{:}36{:}48.840 \dashrightarrow 00{:}36{:}51.300$  even the guidelines have been released,

NOTE Confidence: 0.79679555

 $00:36:51.300 \longrightarrow 00:36:52.368$  their sort of,

NOTE Confidence: 0.79679555

 $00:36:52.368 \rightarrow 00:36:54.860$  they still leave a lot of uncertainty

NOTE Confidence: 0.79679555

 $00:36:54.933 \dashrightarrow 00:36:57.908$  into who which group needs to be

NOTE Confidence: 0.79679555

 $00{:}36{:}57{.}908 \dashrightarrow 00{:}36{:}59{.}730$  anticoagulated versus whether it's

NOTE Confidence: 0.79679555

 $00:36:59.730 \longrightarrow 00:37:02.125$  intermediate group versus high Group.

NOTE Confidence: 0.79679555

 $00:37:02.130 \rightarrow 00:37:05.066$  Um patients for should be inside quite late.

- NOTE Confidence: 0.79679555
- $00{:}37{:}05{.}070 \dashrightarrow 00{:}37{:}06{.}542$  It's still not clear.
- NOTE Confidence: 0.79679555
- 00:37:06.542 --> 00:37:08.382 I think uncertainties still exist,
- NOTE Confidence: 0.79679555
- $00:37:08.390 \longrightarrow 00:37:10.959$  and so the the better we have,
- NOTE Confidence: 0.79679555
- $00{:}37{:}10{.}960 \dashrightarrow 00{:}37{:}13{.}624$  the better method we have in terms of
- NOTE Confidence: 0.79679555
- $00:37:13.624 \rightarrow 00:37:15.750$  determining which features are important,
- NOTE Confidence: 0.79679555
- $00:37:15.750 \dashrightarrow 00:37:19.534$  I think that's going to be very helpful.
- NOTE Confidence: 0.79679555
- 00:37:19.540 --> 00:37:20.098 Alright,
- NOTE Confidence: 0.79679555
- $00:37:20.098 \rightarrow 00:37:24.004$  so moving on are also an interesting
- NOTE Confidence: 0.79679555
- $00{:}37{:}24.004 \dashrightarrow 00{:}37{:}26.049$  abstract about than you.
- NOTE Confidence: 0.79679555
- $00:37:26.050 \rightarrow 00:37:31.030$  A reversal agent for anticoagulation.
- NOTE Confidence: 0.79679555
- $00:37:31.030 \longrightarrow 00:37:34.338$  This is really interesting.
- NOTE Confidence: 0.79679555
- $00{:}37{:}34{.}340 \dashrightarrow 00{:}37{:}37{.}130$  Abstract the work has been going
- NOTE Confidence: 0.79679555
- $00:37:37.130 \longrightarrow 00:37:40.659$  on for quite awhile and I found
- NOTE Confidence: 0.79679555
- $00{:}37{:}40.659 \dashrightarrow 00{:}37{:}42.755$  references going quite badly.
- NOTE Confidence: 0.79679555
- 00:37:42.760 --> 00:37:45.286 Even just doesn't 14 but essentially
- NOTE Confidence: 0.79679555

 $00:37:45.286 \rightarrow 00:37:48.093$  pseudoprime tag is a small molecule

NOTE Confidence: 0.79679555

00:37:48.093 --> 00:37:50.713 that was initially designed through

NOTE Confidence: 0.79679555

 $00:37:50.713 \rightarrow 00:37:53.412$  very rational design to reversibly NOTE Confidence: 0.79679555

00:37:53.412 --> 00:37:56.032 bind to fractionated heparin low

NOTE Confidence: 0.79679555

00:37:56.032 --> 00:37:58.107 molecular weight he<br/>parin through

NOTE Confidence: 0.79679555

 $00{:}37{:}58{.}107 \dashrightarrow 00{:}38{:}00{.}095$  noncovalent charge charge interaction NOTE Confidence: 0.79679555

 $00{:}38{:}00{.}095 \dashrightarrow 00{:}38{:}02{.}580$  with it was interesting that

NOTE Confidence: 0.79679555

 $00:38:02.651 \rightarrow 00:38:04.599$  they unexpectedly they found.

NOTE Confidence: 0.79679555

00:38:04.600 --> 00:38:07.168 That it also binds the DOAX,

NOTE Confidence: 0.79679555

 $00{:}38{:}07{.}170 \dashrightarrow 00{:}38{:}08{.}882$  which prevents their Association

NOTE Confidence: 0.79679555

 $00:38:08.882 \longrightarrow 00:38:11.450$  with factor 10 factor to rain,

NOTE Confidence: 0.79679555

 $00{:}38{:}11{.}450 \dashrightarrow 00{:}38{:}14{.}460$  but it doesn't bind to a lot

NOTE Confidence: 0.79679555

 $00:38:14.460 \longrightarrow 00:38:17.440$  of things at a lot of drugs.

NOTE Confidence: 0.79679555

 $00{:}38{:}17{.}440 \dashrightarrow 00{:}38{:}19{.}852$  It doesn't bind to albumin and

NOTE Confidence: 0.79679555

 $00:38:19.852 \rightarrow 00:38:22.150$  doesn't bind to actual factors,

NOTE Confidence: 0.79679555

 $00:38:22.150 \longrightarrow 00:38:24.290$  and so they say uh-huh.

- NOTE Confidence: 0.79679555
- $00:38:24.290 \longrightarrow 00:38:26.090$  Let's try to reverse.

00:38:26.090 --> 00:38:29.380 Let's try to use their parents like

NOTE Confidence: 0.79679555

 $00{:}38{:}29{.}380 \dashrightarrow 00{:}38{:}32{.}894$  to reverse do act like apixaban oral

NOTE Confidence: 0.79679555

 $00:38:32.894 \rightarrow 00:38:35.368$  molecular weight heparin so they.

NOTE Confidence: 0.79679555

 $00:38:35.370 \longrightarrow 00:38:39.938$  They've done that in animals and in humans.

NOTE Confidence: 0.79679555

 $00{:}38{:}39{.}940 \dashrightarrow 00{:}38{:}42{.}964$  So here you can see that for

NOTE Confidence: 0.79679555

 $00:38:42.964 \rightarrow 00:38:44.850$  instance on the left.

NOTE Confidence: 0.79679555

 $00{:}38{:}44{.}850 \dashrightarrow 00{:}38{:}49{.}618$  A pain where you can see that several

NOTE Confidence: 0.79679555

 $00{:}38{:}49{.}618$  -->  $00{:}38{:}54{.}219$  hours after administration of edoxaban.

NOTE Confidence: 0.79679555

 $00:38:54.220 \longrightarrow 00:38:58.620$  Sorry for typo the.

NOTE Confidence: 0.79679555

 $00:38:58.620 \rightarrow 00:39:00.666$  After the silicone flag was administered,

NOTE Confidence: 0.79679555

 $00{:}39{:}00{.}670 \dashrightarrow 00{:}39{:}03{.}680$  there was a very rapid.

NOTE Confidence: 0.79679555

 $00:39:03.680 \longrightarrow 00:39:07.646$  Reversal a curd that actually stayed.

NOTE Confidence: 0.79679555

 $00{:}39{:}07{.}650 \dashrightarrow 00{:}39{:}09{.}906$  Plateaued for a number of hours

NOTE Confidence: 0.79679555

 $00:39:09.906 \dashrightarrow 00:39:13.226$  and then on the right side the same

 $00:39:13.226 \rightarrow 00:39:15.386$  idea with low molecular weights

NOTE Confidence: 0.79679555

 $00{:}39{:}15{.}386 \dashrightarrow 00{:}39{:}17{.}746$  in same sort of data that,

NOTE Confidence: 0.79679555

 $00:39:17.750 \dashrightarrow 00:39:22.118$  with different doses of Sopron tags.

NOTE Confidence: 0.79679555

 $00:39:22.120 \longrightarrow 00:39:24.640$  The universal was fairly complete.

NOTE Confidence: 0.79679555

 $00{:}39{:}24.640 \dashrightarrow 00{:}39{:}26.644$  Below 10% of baseline.

NOTE Confidence: 0.79679555

 $00{:}39{:}26.644 \dashrightarrow 00{:}39{:}29.650$  Now the metric that's being used

NOTE Confidence: 0.79679555

 $00{:}39{:}29{.}749 \dashrightarrow 00{:}39{:}32{.}725$  to determine this is a whole

NOTE Confidence: 0.79679555

00:39:32.725 --> 00:39:34.213 blood clotting time,

NOTE Confidence: 0.79679555

 $00{:}39{:}34{.}220 \dashrightarrow 00{:}39{:}37{.}238$  and that's and that's actually important,

NOTE Confidence: 0.79679555

 $00:39:37.240 \rightarrow 00:39:39.760$  because apparently I cannot activity

NOTE Confidence: 0.79679555

 $00{:}39{:}39{.}760 \dashrightarrow 00{:}39{:}42{.}280$  of Sharon Cycle rather reversal.

NOTE Confidence: 0.76944727

 $00{:}39{:}44.600 \dashrightarrow 00{:}39{:}46.900$  Enter calculation cannot be determined

NOTE Confidence: 0.76944727

00:39:46.900 --> 00:39:48.740 using regular typical methods.

NOTE Confidence: 0.76944727

 $00:39:48.740 \longrightarrow 00:39:51.470$  For instance using PT PTT

NOTE Confidence: 0.76944727

 $00{:}39{:}51{.}470 \dashrightarrow 00{:}39{:}54{.}655$  because your parent act would be

NOTE Confidence: 0.76944727

 $00:39:54.655 \rightarrow 00:39:57.479$  in in the in the tube,

- NOTE Confidence: 0.76944727
- $00:39:57.480 \longrightarrow 00:40:00.480$  in the inner tube of blood.

00:40:00.480 --> 00:40:02.900 It would be pulled competitively

NOTE Confidence: 0.76944727

00:40:02.900 --> 00:40:04.836 inhibited by like say,

NOTE Confidence: 0.76944727

 $00:40:04.840 \longrightarrow 00:40:07.255$  citrate or ETA that already

NOTE Confidence: 0.76944727

 $00:40:07.255 \longrightarrow 00:40:09.187$  present in the tube,

NOTE Confidence: 0.76944727

 $00{:}40{:}09{.}190 \dashrightarrow 00{:}40{:}11.605$  so therefore they used whole

NOTE Confidence: 0.76944727

 $00:40:11.605 \rightarrow 00:40:13.054$  blood clotting time.

NOTE Confidence: 0.76944727

 $00:40:13.060 \rightarrow 00:40:16.276$  So now the abstract itself actually

NOTE Confidence: 0.76944727

 $00{:}40{:}16.276 \dashrightarrow 00{:}40{:}19.391$  presents the two studies to phase

NOTE Confidence: 0.76944727

 $00{:}40{:}19{.}391 \dashrightarrow 00{:}40{:}21{.}581$  two will see what controlled

NOTE Confidence: 0.76944727

00:40:21.581 --> 00:40:24.357 RCT one for Apixaban and the

NOTE Confidence: 0.76944727

 $00{:}40{:}24.357 \dashrightarrow 00{:}40{:}27.099$  other one for rear axle band,

NOTE Confidence: 0.76944727

 $00{:}40{:}27.100 \dashrightarrow 00{:}40{:}30.289$  where they actually.

NOTE Confidence: 0.76944727

 $00{:}40{:}30{.}290 \dashrightarrow 00{:}40{:}33{.}465$  Looked at reversal Cedar parents

NOTE Confidence: 0.76944727

 $00:40:33.465 \longrightarrow 00:40:36.640$  like versus placebo and it's

 $00{:}40{:}36.747 \dashrightarrow 00{:}40{:}40.077$  very simple design in both arms.

NOTE Confidence: 0.76944727

 $00{:}40{:}40{.}080 \dashrightarrow 00{:}40{:}41{.}444$  Both studies.

NOTE Confidence: 0.76944727

 $00{:}40{:}41{.}444 \dashrightarrow 00{:}40{:}45{.}536$  Essentially they used do ac to reach

NOTE Confidence: 0.76944727

 $00{:}40{:}45{.}536 \dashrightarrow 00{:}40{:}50{.}085$  a steady state and then they gave

NOTE Confidence: 0.76944727

00:40:50.085 --> 00:40:54.019 patients Sera parent tag on different

NOTE Confidence: 0.76944727

 $00{:}40{:}54.019 \dashrightarrow 00{:}40{:}58.555$  doses and contract the whole blood.

NOTE Confidence: 0.76944727

00:40:58.560 --> 00:40:59.910 A cloud.

NOTE Confidence: 0.76944727

 $00{:}40{:}59{.}910 \dashrightarrow 00{:}41{:}03{.}960$  Including time and again because the

NOTE Confidence: 0.76944727

 $00{:}41{:}03{.}960 \dashrightarrow 00{:}41{:}07{.}060$  other parameters cannot be used.

NOTE Confidence: 0.76944727

 $00:41:07.060 \longrightarrow 00:41:10.120$  And in point was that WBC

NOTE Confidence: 0.76944727

 $00:41:10.120 \longrightarrow 00:41:12.760$  T should be below 10%,

NOTE Confidence: 0.76944727

 $00{:}41{:}12.760 \dashrightarrow 00{:}41{:}16.379$  and so how fast that actually happens.

NOTE Confidence: 0.76944727

 $00{:}41{:}16{.}380 \dashrightarrow 00{:}41{:}19{.}488$  And So what they showed again,

NOTE Confidence: 0.76944727

 $00{:}41{:}19{.}490 \dashrightarrow 00{:}41{:}23{.}178$  that in both cases for the Pixel banner

NOTE Confidence: 0.76944727

 $00:41:23.178 \rightarrow 00:41:26.323$  over oxygen that indeed within hours

NOTE Confidence: 0.76944727

 $00{:}41{:}26{.}323 \dashrightarrow 00{:}41{:}29{.}521$  within actually minutes the for in

- NOTE Confidence: 0.76944727
- $00{:}41{:}29.615 \dashrightarrow 00{:}41{:}32.957$  different doses of shared parent tag,

 $00{:}41{:}32{.}960 \dashrightarrow 00{:}41{:}36{.}640$  the reversal was rather.

NOTE Confidence: 0.76944727

 $00{:}41{:}36{.}640 \dashrightarrow 00{:}41{:}38{.}071$  Especially in this,

NOTE Confidence: 0.76944727

00:41:38.071 --> 00:41:41.410 in higher doses like syntax 60 milligrams,

NOTE Confidence: 0.76944727

 $00:41:41.410 \longrightarrow 00:41:45.674$  220 milligrams in takes a band and higher

NOTE Confidence: 0.76944727

 $00:41:45.674 \rightarrow 00:41:49.630$  doses in rivaroxaban group as well.

NOTE Confidence: 0.76944727

 $00:41:49.630 \longrightarrow 00:41:54.265$  Then they also looked at how fast in again,

NOTE Confidence: 0.76944727

 $00:41:54.270 \rightarrow 00:41:56.840$  how long the reversal remained.

NOTE Confidence: 0.76944727

00:41:56.840 --> 00:41:57.870 And again,

NOTE Confidence: 0.76944727

00:41:57.870 --> 00:42:00.445 in both groups fix again,

NOTE Confidence: 0.76944727

 $00:42:00.450 \longrightarrow 00:42:03.540$  but were actually in the high

NOTE Confidence: 0.76944727

00:42:03.540 --> 00:42:05.600 dose single parent tag.

NOTE Confidence: 0.76944727

 $00{:}42{:}05{.}600 \dashrightarrow 00{:}42{:}09{.}720$  The highest dose children tag in each group.

NOTE Confidence: 0.76944727

 $00{:}42{:}09{.}720 \dashrightarrow 00{:}42{:}12{.}225$  River traversal was rather fast

NOTE Confidence: 0.76944727

 $00{:}42{:}12.225 \dashrightarrow 00{:}42{:}14.730$  within within 660 minutes in

 $00:42:14.814 \longrightarrow 00:42:16.954$  apixaban 100% patients have

NOTE Confidence: 0.76944727

 $00:42:16.954 \longrightarrow 00:42:19.589$  been reversed to the target.

NOTE Confidence: 0.76944727

 $00{:}42{:}19{.}590 \dashrightarrow 00{:}42{:}22{.}075$  Of less than 10% of baseline for

NOTE Confidence: 0.76944727

 $00{:}42{:}22.075 \dashrightarrow 00{:}42{:}24.375$  a whole bottle of whole blood

NOTE Confidence: 0.76944727

 $00{:}42{:}24.375 \dashrightarrow 00{:}42{:}26.685$  clotting time and in Russia ban

NOTE Confidence: 0.76944727

 $00{:}42{:}26.685 \dashrightarrow 00{:}42{:}29.118$  even even faster in 30 minutes.

NOTE Confidence: 0.76944727

 $00{:}42{:}29{.}120 \dashrightarrow 00{:}42{:}31{.}922$  So it's an interesting concept is

NOTE Confidence: 0.76944727

 $00:42:31.922 \rightarrow 00:42:34.328$  interesting new molecule which product

NOTE Confidence: 0.76944727

00:42:34.328 --> 00:42:36.628 which is undergoing studies like

NOTE Confidence: 0.76944727

 $00{:}42{:}36.628 \dashrightarrow 00{:}42{:}39.199$  phase two and probably would be.

NOTE Confidence: 0.76944727

 $00:42:39.200 \longrightarrow 00:42:41.984$  Can soon enter phase three with

NOTE Confidence: 0.76944727

 $00:42:41.984 \longrightarrow 00:42:43.840$  a very exciting profile.

NOTE Confidence: 0.76944727

00:42:43.840 --> 00:42:46.368 There's no prothrombotic signal,

NOTE Confidence: 0.76944727

 $00{:}42{:}46{.}368 \dashrightarrow 00{:}42{:}50{.}734$  no evidence to promote it signaled they

NOTE Confidence: 0.76944727

 $00{:}42{:}50{.}734 \dashrightarrow 00{:}42{:}54{.}038$  actually looked at the D dimer and.

NOTE Confidence: 0.76944727

 $00:42:54.040 \longrightarrow 00:42:57.340$  Uh, and that was not affected.

- NOTE Confidence: 0.76944727
- $00:42:57.340 \longrightarrow 00:42:58.526$  There's potential.
- NOTE Confidence: 0.76944727
- $00{:}42{:}58{.}526 \dashrightarrow 00{:}43{:}01{.}491$  The interesting question that could
- NOTE Confidence: 0.76944727
- $00{:}43{:}01{.}491 \dashrightarrow 00{:}43{:}04{.}603$  be raised that whether magnesium
- NOTE Confidence: 0.76944727
- $00{:}43{:}04{.}603 \dashrightarrow 00{:}43{:}07{.}522$  and calcium in Vivo could could
- NOTE Confidence: 0.76944727
- $00{:}43{:}07{.}522 \dashrightarrow 00{:}43{:}10{.}613$  have any effect on sort of pulling
- NOTE Confidence: 0.76944727
- 00:43:10.613 --> 00:43:13.038 setup Ramtek out of the.
- NOTE Confidence: 0.76944727
- $00{:}43{:}13.040 \dashrightarrow 00{:}43{:}16.365$  Interaction with the aid with the agents.
- NOTE Confidence: 0.76944727
- $00{:}43{:}16{.}370 \dashrightarrow 00{:}43{:}18{.}218$  Anticoagulation agents but it
- NOTE Confidence: 0.76944727
- $00:43:18.218 \rightarrow 00:43:20.066$  probably in molar concentration
- NOTE Confidence: 0.76944727
- $00:43:20.066 \rightarrow 00:43:22.498$  such that probably not really
- NOTE Confidence: 0.76944727
- $00:43:22.498 \longrightarrow 00:43:24.422$  likely an interesting concept
- NOTE Confidence: 0.76944727
- $00{:}43{:}24{.}422 \dashrightarrow 00{:}43{:}25{.}865$  that an anticoagulation,
- NOTE Confidence: 0.76944727
- $00{:}43{:}25{.}870 \dashrightarrow 00{:}43{:}29{.}342$  if necessary can be re stored and re
- NOTE Confidence: 0.76944727
- $00{:}43{:}29{.}342 \dashrightarrow 00{:}43{:}32{.}519$  established 24 hour reversal without any.
- NOTE Confidence: 0.8165076
- $00{:}43{:}35{.}300 \dashrightarrow 00{:}43{:}37{.}715$  In effect cost, of course the issue,
- NOTE Confidence: 0.8165076

 $00:43:37.720 \longrightarrow 00:43:39.604$  and I'm sure George some point

NOTE Confidence: 0.8165076

 $00{:}43{:}39{.}604 \dashrightarrow 00{:}43{:}41{.}530$  will do the cost analysis.

NOTE Confidence: 0.8165076

 $00:43:41.530 \longrightarrow 00:43:45.122$  I hope if that comes to that and

NOTE Confidence: 0.8165076

 $00{:}43{:}45{.}122 \dashrightarrow 00{:}43{:}48{.}057$  then with that I'll move to.

NOTE Confidence: 0.8165076

 $00{:}43{:}48.060 \dashrightarrow 00{:}43{:}52.556$  To our to my final discussion of the

NOTE Confidence: 0.8165076

 $00:43:52.556 \rightarrow 00:43:57.589$  work that we sort of we presented at ASH.

NOTE Confidence: 0.8165076

 $00:43:57.590 \longrightarrow 00:44:00.360$  That in form has been

NOTE Confidence: 0.8165076

00:44:00.360 --> 00:44:02.576 informing us beyond COVID-19,

NOTE Confidence: 0.8165076

 $00{:}44{:}02{.}580 \dashrightarrow 00{:}44{:}05{.}350$  which is quite interesting discussion.

NOTE Confidence: 0.8165076

 $00{:}44{:}05{.}350 \dashrightarrow 00{:}44{:}09{.}110$  So what we wanted to.

NOTE Confidence: 0.8165076

 $00:44:09.110 \longrightarrow 00:44:12.870$  Look at is a weather items test 13.

NOTE Confidence: 0.8165076

00:44:12.870 --> 00:44:15.985 Another imbalance of atoms TS 13 an

NOTE Confidence: 0.8165076

 $00:44:15.985 \longrightarrow 00:44:18.275$  Fonville burn factor could potentially

NOTE Confidence: 0.8165076

00:44:18.275 --> 00:44:20.897 serve as a marker of uniform

NOTE Confidence: 0.8165076

 $00:44:20.897 \longrightarrow 00:44:23.679$  doses in patients with COVID-19,

NOTE Confidence: 0.8165076

 $00:44:23.680 \longrightarrow 00:44:26.030$  that was our initial goal,

- NOTE Confidence: 0.8165076
- $00:44:26.030 \longrightarrow 00:44:30.118$  so we last year we right in the
- NOTE Confidence: 0.8165076
- 00:44:30.118 --> 00:44:33.636 beginning of pandemic we sort of
- NOTE Confidence: 0.8165076
- $00:44:33.636 \longrightarrow 00:44:37.660$  have this lack of having number of.
- NOTE Confidence: 0.8165076
- 00:44:37.660 --> 00:44:39.922 Great researchers working,
- NOTE Confidence: 0.8165076
- $00:44:39.922 \rightarrow 00:44:43.692$  collaborating with George Washago shoe
- NOTE Confidence: 0.8165076
- $00{:}44{:}43.692 \dashrightarrow 00{:}44{:}48.236$  and Enchong after deadly and math mileage.
- NOTE Confidence: 0.8165076
- $00{:}44{:}48{.}240 \dashrightarrow 00{:}44{:}49{.}650$  And we.
- NOTE Confidence: 0.77607673
- $00{:}44{:}51{.}860 \dashrightarrow 00{:}44{:}53{.}432$  Show that one from
- NOTE Confidence: 0.77607673
- $00:44:53.432 \longrightarrow 00:44:55.004$  building factor, of course.
- NOTE Confidence: 0.77607673
- 00:44:55.004 00:44:57.356 It's been shown since then many,
- NOTE Confidence: 0.77607673
- $00{:}44{:}57{.}360 \dashrightarrow 00{:}44{:}59{.}325$  many times is quite elevated
- NOTE Confidence: 0.77607673
- $00:44:59.325 \longrightarrow 00:45:01.290$  in patients with coded 19,
- NOTE Confidence: 0.77607673
- $00:45:01.290 \rightarrow 00:45:03.576$  and this specifically much more elevated
- NOTE Confidence: 0.77607673
- $00{:}45{:}03.576 \dashrightarrow 00{:}45{:}05.620$  in patients with critical disease.
- NOTE Confidence: 0.77607673
- $00{:}45{:}05{.}620 \dashrightarrow 00{:}45{:}07{.}828$  We also know from other studies
- NOTE Confidence: 0.77607673
$00{:}45{:}07.828 \dashrightarrow 00{:}45{:}10.216$  from studies so far not related

NOTE Confidence: 0.77607673

 $00:45:10.216 \longrightarrow 00:45:11.900$  to coordinating at all,

NOTE Confidence: 0.77607673

 $00:45:11.900 \longrightarrow 00:45:13.480$  that Adams TS13 deficiency.

NOTE Confidence: 0.68871737

 $00{:}45{:}16.470 \dashrightarrow 00{:}45{:}18.924$ 13 is reduced in inflammatory states

NOTE Confidence: 0.68871737

 $00{:}45{:}18{.}924 \dashrightarrow 00{:}45{:}21{.}120$  like cancer stroke and sepsis.

NOTE Confidence: 0.68871737

00:45:21.120 --> 00:45:21.968 Interestingly enough,

NOTE Confidence: 0.68871737

 $00{:}45{:}21.968 \dashrightarrow 00{:}45{:}23.662$  in animal models, Adams,

NOTE Confidence: 0.68871737

 $00:45:23.662 \dashrightarrow 00:45:25.350$  tutti and efficiency increases.

NOTE Confidence: 0.68871737

 $00{:}45{:}25{.}350 \dashrightarrow 00{:}45{:}27{.}658$  Release of from building

NOTE Confidence: 0.68871737

 $00:45:27.658 \longrightarrow 00:45:29.966$  factor from from platelets.

NOTE Confidence: 0.68871737

 $00{:}45{:}29{.}970 \dashrightarrow 00{:}45{:}34{.}518$  It increases increases adhesion to white.

NOTE Confidence: 0.68871737

00:45:34.520 --> 00:45:34.864 Neutrophils,

NOTE Confidence: 0.68871737

 $00{:}45{:}34{.}864 \dashrightarrow 00{:}45{:}37{.}272$  white count white cells to the civilian

NOTE Confidence: 0.68871737

 $00:45:37.272 \rightarrow 00:45:39.340$  and enhances neutrophil extravasation.

NOTE Confidence: 0.68871737

 $00{:}45{:}39{.}340 \dashrightarrow 00{:}45{:}42{.}220$  So what we then looked we going back

NOTE Confidence: 0.68871737

 $00:45:42.220 \longrightarrow 00:45:45.131$  to the to the cohort to our data

- NOTE Confidence: 0.68871737
- $00{:}45{:}45{.}131 \dashrightarrow 00{:}45{:}48{.}534$  and we will look at what kind of

00:45:48.534 --> 00:45:50.919 relationship exists between Adams test

NOTE Confidence: 0.68871737

 $00:45:50.919 \rightarrow 00:45:53.818$  13 an from villain factor antigen activity.

NOTE Confidence: 0.68871737

 $00:45:53.820 \longrightarrow 00:45:56.988$  We found that indeed.

NOTE Confidence: 0.68871737

 $00:45:56.990 \longrightarrow 00:45:59.200$  In critical disease in patients

NOTE Confidence: 0.68871737

 $00:45:59.200 \longrightarrow 00:46:00.526$  with critical disease,

NOTE Confidence: 0.68871737

 $00:46:00.530 \longrightarrow 00:46:02.249$  it's indeed lower.

NOTE Confidence: 0.68871737

 $00:46:02.249 \rightarrow 00:46:07.330$  The balance is such that this ratio is lower.

NOTE Confidence: 0.68871737

 $00{:}46{:}07{.}330 \dashrightarrow 00{:}46{:}09{.}832$  We also showed earlier this year

NOTE Confidence: 0.68871737

 $00:46:09.832 \longrightarrow 00:46:11.500$  that there's several markers

NOTE Confidence: 0.68871737

 $00{:}46{:}11.575 \dashrightarrow 00{:}46{:}13.459$  of neutrophil activation that

NOTE Confidence: 0.68871737

 $00{:}46{:}13.459 \dashrightarrow 00{:}46{:}15.814$  been associated with ICU status,

NOTE Confidence: 0.68871737

00:46:15.820 --> 00:46:18.502 and we collaborate with this with

NOTE Confidence: 0.68871737

00:46:18.502 --> 00:46:20.290 adjacency Cheyenne David Friend.

NOTE Confidence: 0.65678453

00:46:22.400 --> 00:46:24.717 \*\*\*\* and what we can infer that

 $00:46:24.717 \longrightarrow 00:46:27.257$  we show that at the absolute

NOTE Confidence: 0.65678453

 $00:46:27.257 \rightarrow 00:46:29.702$  neutrophil count and image resized

NOTE Confidence: 0.65678453

 $00{:}46{:}29.702 \dashrightarrow 00{:}46{:}32.230$  to neutrophils have been associated NOTE Confidence: 0.65678453

 $00{:}46{:}32{.}230 \dashrightarrow 00{:}46{:}34{.}675$  and could discriminate mortality and

NOTE Confidence: 0.65678453

00:46:34.675 --> 00:46:38.988 we used our Dom Kodiaks database.

NOTE Confidence: 0.65678453

 $00{:}46{:}38{.}990 \dashrightarrow 00{:}46{:}42{.}482$  For that so then when we went to Adams NOTE Confidence: 0.65678453

00:46:42.482 --> 00:46:45.670 just watching from Wilburton ratio,

NOTE Confidence: 0.65678453

 $00:46:45.670 \longrightarrow 00:46:48.806$  we also showed that that he had

NOTE Confidence: 0.65678453

 $00{:}46{:}48.806$  -->  $00{:}46{:}51.241$  actually inversely related to neutrophil NOTE Confidence: 0.65678453

00:46:51.241 --> 00:46:53.776 and initial to lymphocyte ratio,

NOTE Confidence: 0.65678453

 $00{:}46{:}53.780 \dashrightarrow 00{:}46{:}56.874$  and Furthermore we when we looked at NOTE Confidence: 0.65678453

 $00{:}46{:}56{.}874$  -->  $00{:}46{:}59{.}296$  whether this disbalance also associated NOTE Confidence: 0.65678453

 $00:46:59.296 \rightarrow 00:47:01.836$  with the neutrophil markers

NOTE Confidence: 0.65678453

 $00:47:01.836 \rightarrow 00:47:03.907$  markers of neutrophil activation

NOTE Confidence: 0.65678453

00:47:03.907 --> 00:47:06.691 is GF resistant Lipo Callanan I'll

NOTE Confidence: 0.65678453

 $00:47:06.691 \rightarrow 00:47:10.235$  eight that indeed we found that.

- NOTE Confidence: 0.65678453
- $00{:}47{:}10.235 \dashrightarrow 00{:}47{:}13.810$  All those markers were associated

 $00:47:13.810 \longrightarrow 00:47:15.240$  with worsening.

NOTE Confidence: 0.65678453

 $00:47:15.240 \rightarrow 00:47:18.166$  Reducing the rate reduce the ratio for

NOTE Confidence: 0.65678453

00:47:18.166 --> 00:47:21.289 Adams Tester team to fund building factor,

NOTE Confidence: 0.65678453

 $00{:}47{:}21.290 \dashrightarrow 00{:}47{:}23.445$  which again could indicate the

NOTE Confidence: 0.65678453

 $00{:}47{:}23.445 \dashrightarrow 00{:}47{:}24.738$  potential prothrombotic process.

NOTE Confidence: 0.65678453

00:47:24.740 --> 00:47:25.320 Furthermore,

NOTE Confidence: 0.65678453

 $00{:}47{:}25{.}320 \dashrightarrow 00{:}47{:}30{.}540$  we also looked at the same exact idea about.

NOTE Confidence: 0.65678453

00:47:30.540 --> 00:47:33.220 L Association with the ratio

NOTE Confidence: 0.65678453

 $00:47:33.220 \longrightarrow 00:47:34.828$  with Taiwan with.

NOTE Confidence: 0.65678453

 $00{:}47{:}34.830 \dashrightarrow 00{:}47{:}37.890$  Fabulous inhibitor and again the

NOTE Confidence: 0.65678453

 $00{:}47{:}37.890 \dashrightarrow 00{:}47{:}41.545$  same situation with where Adams just

NOTE Confidence: 0.65678453

 $00:47:41.545 \longrightarrow 00:47:44.497$  looking for the ratio is lower.

NOTE Confidence: 0.65678453

 $00{:}47{:}44.500 \dashrightarrow 00{:}47{:}46.831$  So overall we show that lower so

NOTE Confidence: 0.65678453

 $00{:}47{:}46.831 \dashrightarrow 00{:}47{:}49.327$  Adam Sistine Info Bill from building

 $00:47:49.327 \longrightarrow 00:47:50.758$  factor Disbalance exist.

NOTE Confidence: 0.65678453

 $00{:}47{:}50.760 \dashrightarrow 00{:}47{:}53.100$  So shaded with inhibitor for lysis,

NOTE Confidence: 0.65678453

 $00{:}47{:}53.100 \dashrightarrow 00{:}47{:}54.552$  markers of neutrophil activation

NOTE Confidence: 0.65678453

 $00:47:54.552 \rightarrow 00:47:56.730$  and there are four its potential

NOTE Confidence: 0.65678453

 $00{:}47{:}56.787 \dashrightarrow 00{:}47{:}58.862$  email some body in uniform biotic

NOTE Confidence: 0.65678453

 $00{:}47{:}58.862 \dashrightarrow 00{:}48{:}00.522$  market for eign botic complication.

NOTE Confidence: 0.65678453

 $00:48:00.530 \rightarrow 00:48:02.140$  What's really interesting now is

NOTE Confidence: 0.65678453

 $00:48:02.140 \longrightarrow 00:48:05.020$  that what we do now is actually we're

NOTE Confidence: 0.65678453

00:48:05.020 --> 00:48:07.030 looking specifically at people at

NOTE Confidence: 0.65678453

 $00{:}48{:}07{.}030 \dashrightarrow 00{:}48{:}09{.}224$  patients with COVID-19 and without

NOTE Confidence: 0.65678453

 $00:48:09.224 \rightarrow 00:48:11.864$  coordinating but who had actual thrombosis.

NOTE Confidence: 0.65678453

 $00:48:11.870 \longrightarrow 00:48:15.198$  So now we actually will be able to.

NOTE Confidence: 0.65678453

 $00:48:15.200 \longrightarrow 00:48:17.230$  Tying this with this ratio

NOTE Confidence: 0.65678453

 $00:48:17.230 \longrightarrow 00:48:18.448$  with thrombosis itself,

NOTE Confidence: 0.65678453

00:48:18.450 --> 00:48:20.880 and of course going beyond COVID-19,

NOTE Confidence: 0.65678453

 $00:48:20.880 \longrightarrow 00:48:22.504$  all of it applies.

- NOTE Confidence: 0.65678453
- $00:48:22.504 \longrightarrow 00:48:24.940$  This platform can be scaled up.
- NOTE Confidence: 0.65678453
- $00:48:24.940 \longrightarrow 00:48:27.579$  This idea can be scaled up to
- NOTE Confidence: 0.65678453
- 00:48:27.579 --> 00:48:29.819 basically any uniform body disorder,
- NOTE Confidence: 0.65678453
- $00:48:29.820 \rightarrow 00:48:31.624$  an also synthetic malignancies,
- NOTE Confidence: 0.65678453
- $00:48:31.624 \rightarrow 00:48:35.096$  which we would like to explore as well
- NOTE Confidence: 0.65678453
- $00:48:35.096 \rightarrow 00:48:37.525$  and with that will yield the floor.
- NOTE Confidence: 0.89763653
- 00:48:42.980 --> 00:48:46.286 Thank you so much, Alex and.
- NOTE Confidence: 0.89763653
- $00:48:46.290 \longrightarrow 00:48:48.929$  For the last part of the talk.
- NOTE Confidence: 0.89763653
- 00:48:48.930 --> 00:48:51.072 I am going to talk about other
- NOTE Confidence: 0.89763653
- 00:48:51.072 --> 00:48:52.670 topics in classical mythology.
- NOTE Confidence: 0.89763653
- 00:48:52.670 -> 00:48:53.702 Good afternoon everybody.
- NOTE Confidence: 0.89763653
- 00:48:53.702 --> 00:48:56.110 My name is George Joshua and one
- NOTE Confidence: 0.89763653
- $00{:}48{:}56{.}174 \dashrightarrow 00{:}48{:}58{.}834$  of the senior fellows in the Yale
- NOTE Confidence: 0.89763653
- 00:48:58.834 --> 00:49:00.510 Hematology Oncology Fellowship program.
- NOTE Confidence: 0.89763653
- $00:49:00.510 \longrightarrow 00:49:02.472$  And it is a pleasure to
- NOTE Confidence: 0.89763653

 $00:49:02.472 \longrightarrow 00:49:04.340$  be talking to you today.

NOTE Confidence: 0.89763653

 $00{:}49{:}04{.}340 \dashrightarrow 00{:}49{:}05{.}730$  I have no disclosures.

NOTE Confidence: 0.89763653

 $00{:}49{:}05{.}730 \dashrightarrow 00{:}49{:}08{.}035$  There are four apps we're going to

NOTE Confidence: 0.89763653

 $00:49:08.035 \rightarrow 00:49:10.599$  cover and I will speak through this,

NOTE Confidence: 0.89763653

 $00{:}49{:}10.600 \dashrightarrow 00{:}49{:}12.777$  so we finish on time and we're

NOTE Confidence: 0.89763653

 $00{:}49{:}12.777 \dashrightarrow 00{:}49{:}15.129$  going to talk about gene editing.

NOTE Confidence: 0.89763653

 $00:49:15.130 \longrightarrow 00:49:17.212$  And we're going to talk about

NOTE Confidence: 0.89763653

00:49:17.212 --> 00:49:18.253 complement system performance,

NOTE Confidence: 0.89763653

 $00{:}49{:}18.260 \dashrightarrow 00{:}49{:}19.541$  health outcomes, research.

NOTE Confidence: 0.89763653

 $00:49:19.541 \longrightarrow 00:49:22.103$  And a little bit of coping.

NOTE Confidence: 0.89763653

 $00{:}49{:}22.110 \dashrightarrow 00{:}49{:}23.720$  19 So to start off.

NOTE Confidence: 0.89763653

00:49:23.720 --> 00:49:25.514 First abstract #4 entitled CRISPR CAS

NOTE Confidence: 0.89763653

 $00{:}49{:}25{.}514 \dashrightarrow 00{:}49{:}27{.}804$ 9 gene editing for sickle cell disease

NOTE Confidence: 0.89763653

 $00{:}49{:}27.804 \dashrightarrow 00{:}49{:}29.539$  and beta thal assemia by doctors.

NOTE Confidence: 0.89763653

 $00:49:29.540 \rightarrow 00:49:30.344$  Frangou and colleagues.

NOTE Confidence: 0.89763653

 $00:49:30.344 \rightarrow 00:49:31.952$  Miss was a plenary talk and

- NOTE Confidence: 0.89763653
- $00{:}49{:}31{.}952 \dashrightarrow 00{:}49{:}33{.}081$  also simultaneously published
- NOTE Confidence: 0.89763653
- 00:49:33.081 --> 00:49:34.705 in human Journal Medicine.
- NOTE Confidence: 0.89763653
- $00{:}49{:}34{.}710 \dashrightarrow 00{:}49{:}36{.}325$  For context to the reason
- NOTE Confidence: 0.89763653
- $00:49:36.325 \longrightarrow 00:49:37.940$  why the study is important.
- NOTE Confidence: 0.095846444
- 00:49:40.090 --> 00:49:41.450 Football.
- NOTE Confidence: 0.409799
- 00:49:44.520 --> 00:49:44.910 Emma.
- NOTE Confidence: 0.15843415
- $00:49:46.940 \longrightarrow 00:49:50.830$  Bo team. Both.
- NOTE Confidence: 0.51197803
- $00{:}49{:}53{.}540 \dashrightarrow 00{:}49{:}57{.}290$  Valve should have.
- NOTE Confidence: 0.51197803
- $00:49:57.290 \longrightarrow 00:50:03.299$  What is speed? Your line is.
- NOTE Confidence: 0.51197803
- $00:50:03.300 \longrightarrow 00:50:09.050$  Is script more than one?
- NOTE Confidence: 0.51197803
- $00:50:09.050 \longrightarrow 00:50:10.349$  For the intervention,
- NOTE Confidence: 0.51197803
- $00{:}50{:}10{.}349 \dashrightarrow 00{:}50{:}12{.}514$  here is analogous selling 001,
- NOTE Confidence: 0.51197803
- $00:50:12.520 \longrightarrow 00:50:14.260$  and it is edited.
- NOTE Confidence: 0.6017649
- $00{:}50{:}19{.}190 \dashrightarrow 00{:}50{:}19{.}570$  Speak.
- NOTE Confidence: 0.81746113
- $00{:}50{:}31.180 \dashrightarrow 00{:}50{:}34.936$  OK, I suppose we disconnected there.
- NOTE Confidence: 0.81746113

- 00:50:34.940 --> 00:50:37.543 Alright. Alright,
- NOTE Confidence: 0.81746113
- $00:50:37.543 \rightarrow 00:50:40.810$  so back to the figure as it was saying.
- NOTE Confidence: 0.81746113
- $00:50:40.810 \longrightarrow 00:50:42.922$  So this is crisper cast 9
- NOTE Confidence: 0.81746113
- $00:50:42.922 \longrightarrow 00:50:44.800$  technology on the X axis.
- NOTE Confidence: 0.81746113
- $00{:}50{:}44{.}800 \dashrightarrow 00{:}50{:}46{.}642$  You see months before birth and
- NOTE Confidence: 0.81746113
- $00{:}50{:}46.642 \dashrightarrow 00{:}50{:}49.503$  after birth and on the Y axis globin
- NOTE Confidence: 0.81746113
- $00{:}50{:}49{.}503 \dashrightarrow 00{:}50{:}51{.}075$  synthesis and percentage fetal
- NOTE Confidence: 0.81746113
- $00:50:51.075 \rightarrow 00:50:53.149$  hemoglobin goes to adult hemoglobin.
- NOTE Confidence: 0.81746113
- 00:50:53.150 --> 00:50:55.530 BCL 11 is an important
- NOTE Confidence: 0.81746113
- $00{:}50{:}55{.}530 \dashrightarrow 00{:}50{:}56{.}958$  transcription factor so.
- NOTE Confidence: 0.81746113
- $00:50:56.960 \longrightarrow 00:50:59.996$  If you take a look at.
- NOTE Confidence: 0.81746113
- $00:51:00.000 \rightarrow 00:51:01.878$  The nucleus and the guide RNA.
- NOTE Confidence: 0.81746113
- 00:51:01.880 --> 00:51:03.902 The target is in the Erythroid
- NOTE Confidence: 0.81746113
- $00:51:03.902 \rightarrow 00:51:05.704$  Enhancer region and by disrupting
- NOTE Confidence: 0.81746113
- $00:51:05.704 \longrightarrow 00:51:08.032$  that with gene editing we can
- NOTE Confidence: 0.81746113
- $00:51:08.032 \rightarrow 00:51:09.959$  alter the expression of BCL 11A.

00:51:09.960 --> 00:51:13.749 Effectively shutting down.

NOTE Confidence: 0.81746113

 $00{:}51{:}13.750 \dashrightarrow 00{:}51{:}16.015$  The production of globin and

NOTE Confidence: 0.81746113

00:51:16.015 --> 00:51:17.374 increasing fetal hemoglobin.

NOTE Confidence: 0.81746113

 $00{:}51{:}17{.}380 \dashrightarrow 00{:}51{:}19{.}364$  So you will see the results here in

NOTE Confidence: 0.81746113

 $00:51:19.364 \longrightarrow 00:51:21.272$  the first 2 patients presented by

NOTE Confidence: 0.81746113

 $00{:}51{:}21{.}272 \dashrightarrow 00{:}51{:}22{.}957$  Doctor Strangle and colleagues on

NOTE Confidence: 0.81746113

 $00{:}51{:}22{.}957 \dashrightarrow 00{:}51{:}25{.}088$  the left you have a patient with data

NOTE Confidence: 0.81746113

 $00{:}51{:}25.088 \dashrightarrow 00{:}51{:}27.250$  file on the X axis you have months.

NOTE Confidence: 0.81746113

00:51:27.250 --> 00:51:28.096 After CTX user,

NOTE Confidence: 0.81746113

00:51:28.096 --> 00:51:29.788 one infusion on the Y axis,

NOTE Confidence: 0.81746113

00:51:29.790 --> 00:51:31.332 hemoglobin in grams per deciliter and

NOTE Confidence: 0.81746113

 $00{:}51{:}31{.}332 \dashrightarrow 00{:}51{:}33{.}631$  on the and on the right panel you

NOTE Confidence: 0.81746113

 $00{:}51{:}33{.}631 \dashrightarrow 00{:}51{:}35{.}146$  have patients sickle cell disease.

NOTE Confidence: 0.81746113

00:51:35.150 --> 00:51:36.949 Pay attention to the areas in the

NOTE Confidence: 0.81746113

 $00:51:36.949 \longrightarrow 00:51:38.689$  blue as they expand that's fetal

 $00:51:38.689 \rightarrow 00:51:40.501$  hemoglobin and you see that in

NOTE Confidence: 0.81746113

00:51:40.501 -> 00:51:42.509 the case of beta Thal the last

NOTE Confidence: 0.81746113

 $00:51:42.509 \longrightarrow 00:51:43.870$  transfusion was at one month.

NOTE Confidence: 0.81746113

00:51:43.870 --> 00:51:45.950 Prior Post 2 CTX 01 infusion and in

NOTE Confidence: 0.81746113

 $00{:}51{:}45{.}950 \dashrightarrow 00{:}51{:}48{.}135$  the case of sickle cell disease the

NOTE Confidence: 0.81746113

 $00:51:48.135 \longrightarrow 00:51:49.889$  last transfusion was at 19 days.

NOTE Confidence: 0.81746113

 $00{:}51{:}49{.}890 \dashrightarrow 00{:}51{:}53{.}208$  Status Post ETF 001 infusion the

NOTE Confidence: 0.81746113

 $00{:}51{:}53.208 \dashrightarrow 00{:}51{:}55.987$  adverse events are listed here

NOTE Confidence: 0.81746113

 $00{:}51{:}55{.}987 \dashrightarrow 00{:}51{:}58{.}765$  and all of them were treated.

NOTE Confidence: 0.81746113

00:51:58.770 --> 00:52:00.450 Abstract number 445 is entitled very

NOTE Confidence: 0.81746113

 $00{:}52{:}00{.}450 \dashrightarrow 00{:}52{:}01{.}983$  inherited defects of the complement

NOTE Confidence: 0.81746113

 $00:52:01.983 \rightarrow 00:52:03.419$  system and poor performance.

NOTE Confidence: 0.81746113

 $00{:}52{:}03{.}420 \dashrightarrow 00{:}52{:}05{.}232$  This was presented by Doctor Bendapudi

NOTE Confidence: 0.81746113

 $00:52:05.232 \rightarrow 00:52:07.450$  and colleagues out of the Harvard system.

NOTE Confidence: 0.81746113

 $00{:}52{:}07{.}450 \dashrightarrow 00{:}52{:}09{.}925$  The context here is that PF is on the

NOTE Confidence: 0.81746113

 $00:52:09.925 \rightarrow 00:52:12.409$  extreme thrombotic end of the GIC spectrum,

- NOTE Confidence: 0.81746113
- $00:52:12.410 \rightarrow 00:52:14.100$  and elucidating PF quite gladly
- NOTE Confidence: 0.81746113
- $00{:}52{:}14.100 \dashrightarrow 00{:}52{:}16.724$  may pave the way for a better
- NOTE Confidence: 0.81746113
- 00:52:16.724 --> 00:52:18.456 understanding of DIC including.
- NOTE Confidence: 0.81746113
- $00:52:18.460 \longrightarrow 00:52:22.258$  Are you asking in this subset?
- NOTE Confidence: 0.81746113
- 00:52:22.260 --> 00:52:29.340 Peach boss Richmond Cody, their competitor.
- NOTE Confidence: 0.81746113
- $00{:}52{:}29{.}340 \dashrightarrow 00{:}52{:}32{.}679$  This with this from the NHL VR.
- NOTE Confidence: 0.70531815
- 00:52:34.980 --> 00:52:37.038 And you will see violin plots
- NOTE Confidence: 0.70531815
- $00:52:37.038 \longrightarrow 00:52:39.640$  on the left and the right on
- NOTE Confidence: 0.70531815
- $00:52:39.640 \longrightarrow 00:52:41.550$  the left is the compliment.
- NOTE Confidence: 0.70531815
- $00{:}52{:}41{.}550 \dashrightarrow 00{:}52{:}43{.}888$  You can set the enrichment in PFS
- NOTE Confidence: 0.70531815
- $00{:}52{:}43.888 \dashrightarrow 00{:}52{:}45.765$  compared to an slips patients
- NOTE Confidence: 0.70531815
- $00:52:45.765 \longrightarrow 00:52:47.755$  and on the right quality.
- NOTE Confidence: 0.774716963478261
- $00:52:50.430 \longrightarrow 00:52:52.010$  At the doctor \*\*\*\*\*\*.
- NOTE Confidence: 0.774716963478261
- $00{:}52{:}52{.}010 \dashrightarrow 00{:}52{:}54{.}380$  Global in the slides looking at
- NOTE Confidence: 0.774716963478261
- $00{:}52{:}54{.}461 \dashrightarrow 00{:}52{:}57{.}053$  all the unique variants that the
- NOTE Confidence: 0.774716963478261

 $00:52:57.053 \rightarrow 00:52:59.758$  researchers have found so far to date,

NOTE Confidence: 0.774716963478261

00:52:59.760 --> 00:53:01.788 but let me summarize it here.

NOTE Confidence: 0.774716963478261

 $00{:}53{:}01{.}790 \dashrightarrow 00{:}53{:}04{.}149$  26 out of have one or more

NOTE Confidence: 0.774716963478261

 $00:53:04.149 \longrightarrow 00:53:05.160$  rare putatively delete,

NOTE Confidence: 0.774716963478261

 $00:53:05.160 \longrightarrow 00:53:06.168$  delete serious mutations.

NOTE Confidence: 0.8488677

 $00{:}53{:}18{.}990 \dashrightarrow 00{:}53{:}20{.}974$  Sorry for the audio difficulties.

NOTE Confidence: 0.8488677

00:53:20.974 --> 00:53:22.558 I think George you

NOTE Confidence: 0.8488677

 $00:53:22.560 \dashrightarrow 00:53:24.945$  might wanna like hide your camera.

NOTE Confidence: 0.8488677

 $00:53:24.945 \rightarrow 00:53:27.716$  Maybe that will help the audio connection.

NOTE Confidence: 0.8488677

 $00:53:27.720 \dashrightarrow 00:53:30.108$  It might be a connectivity issue.

NOTE Confidence: 0.72921765

00:53:30.940 --> 00:53:32.505 Um, I wouldn't having connectivity

NOTE Confidence: 0.72921765

 $00{:}53{:}32{.}505 \dashrightarrow 00{:}53{:}34{.}799$  issues at all and all prior talks.

NOTE Confidence: 0.72921765

00:53:34.800 --> 00:53:37.054 Can you see this summer right now?

NOTE Confidence: 0.8479782

00:53:39.080 --> 00:53:41.050 Or no, we can. We see you,

NOTE Confidence: 0.8479782

 $00{:}53{:}41{.}050 \dashrightarrow 00{:}53{:}43{.}010$  but it keeps freezing, yet it keeps

NOTE Confidence: 0.8568507

00:53:43.010 - 00:53:46.598 freezing. Not quite. Sorry bout that.

- NOTE Confidence: 0.8568507
- $00:53:46.600 \rightarrow 00:53:49.410$  Um? Let me try this again.

 $00{:}53{:}54{.}520 \dashrightarrow 00{:}53{:}55{.}700$  Can you see this here?

NOTE Confidence: 0.845912

 $00:53:58.080 \rightarrow 00:54:00.798$  Yeah, we can see, but probably better if you

NOTE Confidence: 0.845912

 $00:54:00.798 \rightarrow 00:54:03.380$  hide your camera so that it flows nicely.

NOTE Confidence: 0.85032344

00:54:06.730 --> 00:54:08.627 Sorry, I'm not sure what you mean

NOTE Confidence: 0.85032344

 $00{:}54{:}08{.}627 \dashrightarrow 00{:}54{:}10{.}688$  by hide the camera 'cause all I'm

NOTE Confidence: 0.85032344

 $00:54:10.688 \rightarrow 00:54:12.950$  seeing is the screen on the screen.

NOTE Confidence: 0.85032344

 $00:54:12.950 \longrightarrow 00:54:14.670$  Let's see here OK.

NOTE Confidence: 0.8047364

00:54:18.500 --> 00:54:21.076 Alright, just let me know if we get

NOTE Confidence: 0.8047364

 $00{:}54{:}21.080 \dashrightarrow 00{:}54{:}23.330$  disconnected again. You can go ahead. I

NOTE Confidence: 0.8047364

 $00:54:23.330 \longrightarrow 00:54:24.618$  think we're good now.

NOTE Confidence: 0.8047364

 $00{:}54{:}24{.}618 \dashrightarrow 00{:}54{:}26{.}280$  OK, sounds good. Thank you.

NOTE Confidence: 0.8047364

 $00{:}54{:}26{.}280 \dashrightarrow 00{:}54{:}27{.}955$  So with regards to the

NOTE Confidence: 0.8047364

00:54:27.955 --> 00:54:29.129 bendapudi at all study,

NOTE Confidence: 0.8047364

 $00:54:29.130 \longrightarrow 00:54:31.130$  they found that six of the 8 CR

 $00:54:31.130 \longrightarrow 00:54:33.305$  3 variants were loss of function

NOTE Confidence: 0.8047364

00:54:33.305 - 00:54:34.913 and these are anti-inflammatory,

NOTE Confidence: 0.8047364

 $00{:}54{:}34{.}920 \dashrightarrow 00{:}54{:}36{.}750$  while three of seven CR 4

NOTE Confidence: 0.8047364

00:54:36.750 --> 00:54:37.970 variants are gaining function

NOTE Confidence: 0.8047364

 $00:54:38.029 \rightarrow 00:54:39.749$  and these are pro inflammatory.

NOTE Confidence: 0.8047364

 $00:54:39.750 \longrightarrow 00:54:41.742$  So overall supporting very

NOTE Confidence: 0.8047364

 $00:54:41.742 \rightarrow 00:54:44.232$  inflammatory milieu in these patients.

NOTE Confidence: 0.8047364

00:54:44.240 --> 00:54:45.548 Abstract 47 cost effectiveness

NOTE Confidence: 0.8047364

 $00{:}54{:}45{.}548 \dashrightarrow 00{:}54{:}47{.}183$  of capitalism had been acquired.

NOTE Confidence: 0.8047364

 $00:54:47.190 \longrightarrow 00:54:48.498$  Thrombotic thrombocytopenia purpura was

NOTE Confidence: 0.8047364

 $00:54:48.498 \rightarrow 00:54:50.133$  presented by Joshua and colleagues.

NOTE Confidence: 0.8047364

 $00{:}54{:}50{.}140 \dashrightarrow 00{:}54{:}51{.}886$  The context for this study is

NOTE Confidence: 0.8047364

 $00{:}54{:}51{.}886 \dashrightarrow 00{:}54{:}53{.}893$  that complexes map is the first

NOTE Confidence: 0.8047364

00:54:53.893 --> 00:54:55.716 FDA approved medication. In TTP.

NOTE Confidence: 0.8047364

 $00{:}54{:}55{.}716$  -->  $00{:}54{:}57{.}356$  It's endorsed in ITP guidelines,

NOTE Confidence: 0.8047364

 $00:54:57.360 \rightarrow 00:54:59.496$  recently approved in the context of

- NOTE Confidence: 0.8047364
- $00:54:59.496 \rightarrow 00:55:00.920$  confidential patient access schemes

 $00:55:00.979 \rightarrow 00:55:02.939$  for use in the National Health Service,

NOTE Confidence: 0.8047364

 $00{:}55{:}02{.}940 \dashrightarrow 00{:}55{:}04{.}705$  both discomfort in England has

NOTE Confidence: 0.8047364

 $00:55:04.705 \rightarrow 00:55:06.948$  a high list price of 270,000

NOTE Confidence: 0.8047364

00:55:06.948 --> 00:55:08.968 US dollars per TCP episode.

NOTE Confidence: 0.8047364

 $00{:}55{:}08{.}970 \dashrightarrow 00{:}55{:}10{.}692$  Here is a cartoon schematic on

NOTE Confidence: 0.8047364

 $00:55:10.692 \rightarrow 00:55:12.394$  the bottom you see the summary

NOTE Confidence: 0.8047364

 $00:55:12.394 \longrightarrow 00:55:14.362$  of the two of the phase two in

NOTE Confidence: 0.8047364

 $00{:}55{:}14.424 \dashrightarrow 00{:}55{:}16.299$  the Phase three clinical trials.

NOTE Confidence: 0.8047364

 $00{:}55{:}16{.}300 \dashrightarrow 00{:}55{:}18{.}636$  You have a patient with the disease state,

NOTE Confidence: 0.8047364

 $00:55:18.640 \longrightarrow 00:55:19.928$  the hospitalization for TCP,

NOTE Confidence: 0.8047364

 $00{:}55{:}19{.}928 \dashrightarrow 00{:}55{:}21{.}538$  who then receive treatment with

NOTE Confidence: 0.8047364

 $00{:}55{:}21{.}538 \dashrightarrow 00{:}55{:}22{.}746$  their capitalism admin standard

NOTE Confidence: 0.8047364

 $00:55:22.746 \longrightarrow 00:55:24.692$  of care labeled as a or place bo

NOTE Confidence: 0.8047364

 $00{:}55{:}24.744 \dashrightarrow 00{:}55{:}26.352$  standard care labeled as B and

 $00:55:26.352 \rightarrow 00:55:28.014$  they can either progress to death

NOTE Confidence: 0.8047364

 $00{:}55{:}28.014 \dashrightarrow 00{:}55{:}29.766$  or they can go into remission.

NOTE Confidence: 0.8047364

 $00:55:29.770 \longrightarrow 00:55:31.814$  Once in remission they can again relapse.

NOTE Confidence: 0.8047364

 $00:55:31.820 \longrightarrow 00:55:33.843$  The total cost for each arm are

NOTE Confidence: 0.8047364

 $00:55:33.843 \rightarrow 00:55:35.634$  in front of you, 324 thousand.

NOTE Confidence: 0.8047364

 $00{:}55{:}35{.}634 \dashrightarrow 00{:}55{:}37{.}386$  For the campuses in my bar,

NOTE Confidence: 0.8047364

 $00:55:37.390 \longrightarrow 00:55:41.030$  84,000 for the standard of care arm.

NOTE Confidence: 0.8047364

 $00:55:41.030 \rightarrow 00:55:43.406$  The five year time Horizon incremental

NOTE Confidence: 0.8047364

00:55:43.406 --> 00:55:45.638 cost effectiveness ratio here was 1.5

NOTE Confidence: 0.8047364

 $00{:}55{:}45{.}638 \dashrightarrow 00{:}55{:}47{.}384$  million for the use of capitalism

NOTE Confidence: 0.8047364

 $00{:}55{:}47{.}384 \dashrightarrow 00{:}55{:}49{.}143$  have in addition to the standard

NOTE Confidence: 0.8047364

 $00{:}55{:}49{.}143 \dashrightarrow 00{:}55{:}50{.}868$  of care with a 95% confidence

NOTE Confidence: 0.8047364

 $00{:}55{:}50{.}868 \dashrightarrow 00{:}55{:}53{.}125$  interval of 1.3 to \$1.7 million.

NOTE Confidence: 0.8047364

 $00:55:53.125 \rightarrow 00:55:54.085$  Of note,

NOTE Confidence: 0.8047364

 $00{:}55{:}54.085 \dashrightarrow 00{:}55{:}56.500$  this is the sensitivity analysis and I'll

NOTE Confidence: 0.8047364

 $00:55:56.500 \rightarrow 00:55:58.529$  just highlight one specific area here.

- NOTE Confidence: 0.8047364
- $00{:}55{:}58{.}530 \dashrightarrow 00{:}55{:}59{.}898$  Researchers looked at parameters

 $00{:}55{:}59{.}898 \dashrightarrow 00{:}56{:}01{.}950$  that affect the icier for capitalism,

NOTE Confidence: 0.8047364

 $00{:}56{:}01{.}950 \dashrightarrow 00{:}56{:}04{.}742$  AB and the one that affected the most

NOTE Confidence: 0.8047364

 $00:56:04.742 \rightarrow 00:56:07.986$  by far is capitalism that cost itself.

NOTE Confidence: 0.8047364

00:56:07.990 --> 00:56:08.451 Finally,

NOTE Confidence: 0.8047364

00:56:08.451 --> 00:56:10.756 abstract 529 entitled intermediate dose

NOTE Confidence: 0.8047364

 $00{:}56{:}10.756 \dashrightarrow 00{:}56{:}12.600$  anticoagulation and a spirin COVID-19

NOTE Confidence: 0.8047364

 $00{:}56{:}12.655 \dashrightarrow 00{:}56{:}14.280$  and Propensity Score match analysis

NOTE Confidence: 0.8047364

 $00{:}56{:}14.280 \dashrightarrow 00{:}56{:}16.560$  by not this mindless and colleagues.

NOTE Confidence: 0.8047364

 $00{:}56{:}16{.}560 \dashrightarrow 00{:}56{:}19{.}241$  The context here is the current active

NOTE Confidence: 0.8047364

 $00{:}56{:}19{.}241 \dashrightarrow 00{:}56{:}20{.}894$  for preliminary an unadjudicated

NOTE Confidence: 0.8047364

 $00{:}56{:}20{.}894 \dashrightarrow 00{:}56{:}23{.}486$  data which shows 2 main things.

NOTE Confidence: 0.8047364

 $00{:}56{:}23{.}490 \dashrightarrow 00{:}56{:}25{.}530$  One that the rapeutic versus prophylactic

NOTE Confidence: 0.8047364

 $00:56:25.530 \rightarrow 00:56:27.570$  dose anticoagulation in severely ill,

NOTE Confidence: 0.8047364

 $00{:}56{:}27{.}570 \dashrightarrow 00{:}56{:}27{.}940$  i.e.

00:56:27.940 --> 00:56:29.790 Critically ill patients was halted

NOTE Confidence: 0.8047364

 $00:56:29.790 \rightarrow 00:56:32.170$  utility in December and then January

NOTE Confidence: 0.8047364

00:56:32.170 --> 00:56:33.838 pre specified security boundary

NOTE Confidence: 0.8047364

 $00:56:33.838 \dashrightarrow 00:56:36.419$  was achieved in moderately elii non

NOTE Confidence: 0.8047364

 $00{:}56{:}36{.}419 \dashrightarrow 00{:}56{:}38{.}534$  critically ill patients on the rapeutic

NOTE Confidence: 0.8047364

 $00:56:38.534 \rightarrow 00:56:40.134$  versus prophylactic dose anticoagulation.

NOTE Confidence: 0.8047364

 $00{:}56{:}40{.}134 \dashrightarrow 00{:}56{:}42{.}402$  So it is in this background that

NOTE Confidence: 0.8047364

 $00:56:42.402 \rightarrow 00:56:43.688$  optimization colleagues published their

NOTE Confidence: 0.8047364

 $00{:}56{:}43.688 \dashrightarrow 00{:}56{:}45.760$  study in the American Journal of Hematology.

NOTE Confidence: 0.8047364

00:56:45.760 - 00:56:47.404 This is an observation ULL study

NOTE Confidence: 0.8047364

 $00:56:47.404 \longrightarrow 00:56:48.860$  looking at about 2800 patients

NOTE Confidence: 0.8047364

 $00:56:48.860 \rightarrow 00:56:50.660$  with the primary outcome being time

NOTE Confidence: 0.8047364

 $00:56:50.660 \longrightarrow 00:56:51.920$  to in hospital death.

NOTE Confidence: 0.8047364

 $00:56:51.920 \dashrightarrow 00:56:53.380$  The competing risk of discharge.

NOTE Confidence: 0.8047364

 $00{:}56{:}53{.}380 \dashrightarrow 00{:}56{:}55{.}092$  I'm showing only a portion of the Yale

NOTE Confidence: 0.8047364

 $00:56:55.092 \rightarrow 00:56:56.109$  guidelines for thromboprophylaxis

- NOTE Confidence: 0.8047364
- $00:56:56.109 \rightarrow 00:56:57.189$  for hospitalizations.

 $00{:}56{:}57{.}190 \dashrightarrow 00{:}56{:}58{.}660$  COVID-19 on the top right,

NOTE Confidence: 0.8047364

 $00{:}56{:}58{.}660 \dashrightarrow 00{:}57{:}01{.}228$  and you see that there was a D

NOTE Confidence: 0.8047364

 $00:57:01.228 \longrightarrow 00:57:03.728$  dimer cut off that was utilized.

NOTE Confidence: 0.8047364

 $00{:}57{:}03{.}730 \dashrightarrow 00{:}57{:}05{.}879$  This is the overall study design in

NOTE Confidence: 0.8047364

 $00{:}57{:}05{.}879 \dashrightarrow 00{:}57{:}07{.}960$  over all cohort of some 2800 patients.

NOTE Confidence: 0.8047364

 $00{:}57{:}07{.}960 \dashrightarrow 00{:}57{:}09{.}328$  Researchers identified risk factors

NOTE Confidence: 0.8047364

 $00:57:09.328 \longrightarrow 00:57:11.380$  for in hospital death and then

NOTE Confidence: 0.8047364

00:57:11.435 --> 00:57:13.457 created two nested cohorts on the

NOTE Confidence: 0.8047364

 $00{:}57{:}13.457 \dashrightarrow 00{:}57{:}14.805$  left anticoagulation court that

NOTE Confidence: 0.7165097

 $00:57:14.858 \rightarrow 00:57:16.568$  were Ben City scored matched for

NOTE Confidence: 0.7165097

 $00{:}57{:}16.568 \dashrightarrow 00{:}57{:}18.685$  those risk factors and on the right.

NOTE Confidence: 0.7165097

00:57:18.685 --> 00:57:19.660 Aspirin versus NASCAR,

NOTE Confidence: 0.7165097

 $00{:}57{:}19.660 \dashrightarrow 00{:}57{:}21.610$  notably on patients who were not

NOTE Confidence: 0.7165097

 $00{:}57{:}21.610 \dashrightarrow 00{:}57{:}22.910$  on home antiplate let therapy.

 $00{:}57{:}22{.}910$  -->  $00{:}57{:}25{.}016$  And finally the results of the

NOTE Confidence: 0.7165097

 $00{:}57{:}25.016 \dashrightarrow 00{:}57{:}26.069$  multiple analysis following

NOTE Confidence: 0.7165097

 $00:57:26.069 \rightarrow 00:57:27.958$  the propensity score matching.

NOTE Confidence: 0.7165097

 $00{:}57{:}27{.}960 \dashrightarrow 00{:}57{:}30{.}540$  You will see the hazard ratio for

NOTE Confidence: 0.7165097

 $00{:}57{:}30{.}540 \dashrightarrow 00{:}57{:}32{.}988$  death for the use of intermediate

NOTE Confidence: 0.7165097

00:57:32.988 --> 00:57:34.620 dose anticoagulation as compared

NOTE Confidence: 0.7165097

 $00{:}57{:}34{.}684 \dashrightarrow 00{:}57{:}36{.}610$  to prophylactic is .5 two and

NOTE Confidence: 0.7165097

 $00{:}57{:}36{.}610 \dashrightarrow 00{:}57{:}37{.}894$  again for in hospital.

NOTE Confidence: 0.7165097

 $00{:}57{:}37{.}900 \dashrightarrow 00{:}57{:}39{.}368$  Aspirin compared to and

NOTE Confidence: 0.7165097

00:57:39.368 --> 00:57:41.203 no aspirin again .5 two.

NOTE Confidence: 0.7165097

 $00{:}57{:}41.210 \dashrightarrow 00{:}57{:}43.779$  So take homes gene editing in Dallas,

NOTE Confidence: 0.7165097

00:57:43.780 --> 00:57:45.620 EMEA and sickle cell disease

NOTE Confidence: 0.7165097

 $00{:}57{:}45{.}620 \dashrightarrow 00{:}57{:}49{.}270$  can alter the disease scorers.

NOTE Confidence: 0.7165097

 $00{:}57{:}49{.}270 \dashrightarrow 00{:}57{:}50{.}694$  Target gene discoveries facility

NOTE Confidence: 0.7165097

 $00{:}57{:}50.694 \dashrightarrow 00{:}57{:}52.118$  genomic studies of breakfast

NOTE Confidence: 0.7165097

 $00:57:52.118 \rightarrow 00:57:53.769$  acquisition by bending colleagues,

- NOTE Confidence: 0.7165097
- $00:57:53.770 \longrightarrow 00:57:54.895$  capitalism, app costs,

00:57:54.895 - 00:57:56.770 and ATP is quite expensive.

NOTE Confidence: 0.7165097

 $00{:}57{:}56{.}770 \dashrightarrow 00{:}57{:}58{.}924$  And finally we randomized trial data

NOTE Confidence: 0.7165097

 $00:57:58.924 \rightarrow 00:58:00.360$  on intermediate dose anticoagulation

NOTE Confidence: 0.7165097

 $00:58:00.418 \longrightarrow 00:58:01.648$  and antiplatelet therapy.

NOTE Confidence: 0.7165097

 $00:58:01.650 \longrightarrow 00:58:02.786$  Thank you.

NOTE Confidence: 0.7165097

 $00:58:02.786 \rightarrow 00:58:06.194$  Look forward to taking your questions.

NOTE Confidence: 0.7165097

 $00:58:06.200 \rightarrow 00:58:06.660$  Yeah,

NOTE Confidence: 0.8676868

00:58:06.660 --> 00:58:08.970 thank you so much George,

NOTE Confidence: 0.8676868

 $00:58:08.970 \longrightarrow 00:58:11.730$  and apologies about the

NOTE Confidence: 0.8676868

 $00:58:11.730 \longrightarrow 00:58:13.110$  technical difficulties.

NOTE Confidence: 0.8676868

 $00{:}58{:}13.110 \dashrightarrow 00{:}58{:}15.130$  For the next 10 minutes,

NOTE Confidence: 0.8676868

 $00:58:15.130 \rightarrow 00:58:17.728$  doctor Bone and hopefully will moderate

NOTE Confidence: 0.8676868

 $00{:}58{:}17.728 \dashrightarrow 00{:}58{:}20.788$  questions for those of you have to leave.

NOTE Confidence: 0.8676868

 $00:58:20.790 \rightarrow 00:58:23.226$  As mentioned, this will be recorded

 $00:58:23.226 \longrightarrow 00:58:25.303$  and should be available for

NOTE Confidence: 0.8676868

 $00{:}58{:}25{.}303 \dashrightarrow 00{:}58{:}27{.}250$  you for subsequent full option.

NOTE Confidence: 0.8676868

 $00{:}58{:}27{.}250 \dashrightarrow 00{:}58{:}28{.}870$  Doctor Bone and Alfred.

NOTE Confidence: 0.8386467

00:58:30.500 --> 00:58:32.200 Great, thank you everybody.

NOTE Confidence: 0.91464174

 $00:58:37.690 \longrightarrow 00:58:39.410$  So maybe I can start with a

NOTE Confidence: 0.91464174

 $00{:}58{:}39{.}410 \dashrightarrow 00{:}58{:}41{.}996$  question that came in through the.

NOTE Confidence: 0.91464174

 $00{:}58{:}42.000 \dashrightarrow 00{:}58{:}45.590$  Through the chat room so you Sabrina.

NOTE Confidence: 0.91464174

00:58:45.590 --> 00:58:48.605 How robust or how good do you feel

NOTE Confidence: 0.91464174

 $00{:}58{:}48.605 \dashrightarrow 00{:}58{:}50.900$  about the mycophenolate? In addition to

NOTE Confidence: 0.876151

 $00:58:50.900 \longrightarrow 00:58:51.908$  corticosteroids that it

NOTE Confidence: 0.876151

 $00:58:51.910 \longrightarrow 00:58:52.930$  might begin to

NOTE Confidence: 0.876151

00:58:52.930 --> 00:58:55.640 alter practice at this point. Yeah,

NOTE Confidence: 0.7826892

 $00{:}58{:}55{.}640 \dashrightarrow 00{:}58{:}58{.}377$  you know, I I I have pause.

NOTE Confidence: 0.7826892

 $00:58:58.380 \longrightarrow 00:59:00.335$  I don't think it's practice

NOTE Confidence: 0.7826892

 $00{:}59{:}00{.}335 \dashrightarrow 00{:}59{:}01{.}899$  changing at this point.

NOTE Confidence: 0.7826892

00:59:01.900 --> 00:59:04.270 You know, I think it's interesting

- NOTE Confidence: 0.7826892
- $00:59:04.270 \rightarrow 00:59:06.677$  that there were some decrease in

00:59:06.677 - 00:59:08.939 quality of life in the mpharm.

NOTE Confidence: 0.7826892

 $00:59:08.940 \longrightarrow 00:59:11.836$  I think it's important to kind of recognize

NOTE Confidence: 0.7826892

 $00{:}59{:}11.836 \dashrightarrow 00{:}59{:}14.692$  that clinical response and kind of patient

NOTE Confidence: 0.7826892

 $00:59:14.692 \rightarrow 00:59:16.757$  experience may not always correlate.

NOTE Confidence: 0.7826892

00:59:16.760 --> 00:59:18.715 You know, the this steroid

NOTE Confidence: 0.7826892

 $00:59:18.715 \longrightarrow 00:59:20.670$  alone arm more than 50%?

NOTE Confidence: 0.7826892

00:59:20.670 --> 00:59:22.795 About 56% of patients actually

NOTE Confidence: 0.7826892

 $00:59:22.795 \longrightarrow 00:59:25.260$  at the end of follow up.

NOTE Confidence: 0.7826892

 $00:59:25.260 \rightarrow 00:59:26.700$  Which was about two years,

NOTE Confidence: 0.7826892

 $00{:}59{:}26.700 \dashrightarrow 00{:}59{:}28.416$  had not required second line treatment,

NOTE Confidence: 0.7826892

 $00{:}59{:}28{.}420 \dashrightarrow 00{:}59{:}30{.}240$  so they did well as in addition

NOTE Confidence: 0.7826892

 $00{:}59{:}30{.}240 \dashrightarrow 00{:}59{:}31{.}859$  and better than prior studies.

NOTE Confidence: 0.7826892

00:59:31.860 --> 00:59:33.869 So you know, I think it's interesting,

NOTE Confidence: 0.7826892

 $00{:}59{:}33{.}870 \dashrightarrow 00{:}59{:}36{.}078$  but I I think we need more data

 $00{:}59{:}36{.}078 \dashrightarrow 00{:}59{:}38{.}457$  before we move it to the first line.

NOTE Confidence: 0.7826892

00:59:39.400 --> 00:59:39.870 Thank you.

NOTE Confidence: 0.78495073

 $00:59:42.110 \longrightarrow 00:59:44.005$  To be a payment, go ahead.

NOTE Confidence: 0.78495073

00:59:44.005 --> 00:59:46.210 At the Harford, I figured we could.

NOTE Confidence: 0.78495073

 $00:59:46.210 \longrightarrow 00:59:47.470$  We could like pick,

NOTE Confidence: 0.78495073

 $00{:}59{:}47{.}470 \dashrightarrow 00{:}59{:}49{.}042$  introduce some of the questions

NOTE Confidence: 0.78495073

 $00:59:49.042 \longrightarrow 00:59:50.926$  that are are added in there.

NOTE Confidence: 0.78495073

00:59:50.930 --> 00:59:52.825 Sabrina. Can you also talk a

NOTE Confidence: 0.78495073

00:59:52.825 --> 00:59:54.712 bit about tranexamic acid in he

NOTE Confidence: 0.78495073

 $00:59:54.712 \rightarrow 00:59:55.660$  malignancy's and thrombocytopenia?

NOTE Confidence: 0.78495073

 $00:59:55.660 \dashrightarrow 00:59:58.486$  You know there is positive data for its use.

NOTE Confidence: 0.78495073

 $00:59:58.490 \rightarrow 01:00:00.433$  It's been completely lifesaving in trauma.

NOTE Confidence: 0.78495073

01:00:00.433 --> 01:00:01.426 In postpartum hemorrhage,

NOTE Confidence: 0.78495073

01:00:01.430 --> 01:00:02.686 particularly in Third World

NOTE Confidence: 0.78495073

 $01:00:02.686 \rightarrow 01:00:04.256$  countries and under resourced areas,

NOTE Confidence: 0.78495073

 $01:00:04.260 \rightarrow 01:00:07.095$  do any comments on why you think it didn't

- NOTE Confidence: 0.78495073
- $01{:}00{:}07{.}095 \dashrightarrow 01{:}00{:}08{.}985$  work in the setting of hematologic,

 $01{:}00{:}08{.}990 \dashrightarrow 01{:}00{:}09{.}932$  malignancy, and thrombocytopenia?

NOTE Confidence: 0.78495073

01:00:09.932 --> 01:00:11.190 Yeah things, but I

NOTE Confidence: 0.82867736

 $01{:}00{:}11{.}190 \dashrightarrow 01{:}00{:}13{.}694$  think that's a great question and a

NOTE Confidence: 0.82867736

 $01:00:13.694 \rightarrow 01:00:15.916$  question that came up for the presenters.

NOTE Confidence: 0.82867736

 $01:00:15.920 \longrightarrow 01:00:17.180$  The authors as well.

NOTE Confidence: 0.82867736

01:00:17.180 --> 01:00:20.008 You know, I think what they they spoke to,

NOTE Confidence: 0.82867736

 $01{:}00{:}20.010 \dashrightarrow 01{:}00{:}21.590$  which makes sense to me,

NOTE Confidence: 0.82867736

 $01:00:21.590 \longrightarrow 01:00:23.414$  is kind of the complexity of

NOTE Confidence: 0.82867736

 $01{:}00{:}23.414 \dashrightarrow 01{:}00{:}25.050$  microvascular and India theal damage.

NOTE Confidence: 0.82867736

 $01:00:25.050 \rightarrow 01:00:27.255$  That happens as a rolls result of

NOTE Confidence: 0.82867736

01:00:27.255 --> 01:00:29.142 chemotherapy, 'cause all of these

NOTE Confidence: 0.82867736

 $01{:}00{:}29{.}142 \dashrightarrow 01{:}00{:}30{.}714$  patients were getting treatment.

NOTE Confidence: 0.82867736

 $01{:}00{:}30.720 \dashrightarrow 01{:}00{:}33.380$  You know, we know that while prophylactic

NOTE Confidence: 0.82867736

 $01{:}00{:}33{.}380 \dashrightarrow 01{:}00{:}34{.}914$  platelet transfusions has helped

01:00:34.914 --> 01:00:36.906 in terms of of bleeding incidents,

NOTE Confidence: 0.82867736

 $01{:}00{:}36{.}910 \dashrightarrow 01{:}00{:}38{.}950$  there are still a good proportion

NOTE Confidence: 0.82867736

 $01:00:38.950 \longrightarrow 01:00:41.280$  of patients that do have bleeding.

NOTE Confidence: 0.82867736

01:00:41.280 --> 01:00:42.153 So you know,

NOTE Confidence: 0.82867736

01:00:42.153 --> 01:00:44.719 I think there may just be more complex

NOTE Confidence: 0.82867736

 $01{:}00{:}44.719$  -->  $01{:}00{:}47.443$  pathophysiology in terms of why these NOTE Confidence: 0.82867736

 $01:00:47.443 \rightarrow 01:00:50.330$  patients believe that is beyond low

NOTE Confidence: 0.82867736

 $01:00:50.330 \rightarrow 01:00:52.266$  platelets and impaired fibrinolysis.

NOTE Confidence: 0.82867736

01:00:52.270 --> 01:00:54.654 But I agree that I think there are

NOTE Confidence: 0.82867736

01:00:54.654 --> 01:00:56.080 definitely rules and you know,

NOTE Confidence: 0.82867736

 $01:00:56.080 \rightarrow 01:00:57.838$  I think even within this population,

NOTE Confidence: 0.82867736

 $01:00:57.840 \longrightarrow 01:00:59.840$  there may be a role for this in

NOTE Confidence: 0.82867736

 $01{:}00{:}59{.}840 \dashrightarrow 01{:}01{:}01{.}883$  patients who are bleeding or who need

NOTE Confidence: 0.82867736

01:01:01.883 --> 01:01:03.990 procedures or other kind of subgroups.

NOTE Confidence: 0.77241987

01:01:05.400 --> 01:01:06.856 Great Bob, do you want to just sort of NOTE Confidence: 0.77241987

 $01:01:06.856 \rightarrow 01:01:09.210$  tag team back and forth? Uh, sure, in

- NOTE Confidence: 0.83646846
- 01:01:09.210 --> 01:01:10.500 less anyone in the audience
- NOTE Confidence: 0.83646846
- 01:01:10.500 --> 01:01:12.051 has a question, you could raise
- NOTE Confidence: 0.83646846
- 01:01:12.051 --> 01:01:13.600 your hand and will unmute you.
- NOTE Confidence: 0.8548884
- $01:01:15.760 \longrightarrow 01:01:17.520$  But still waiting for
- NOTE Confidence: 0.8548884
- 01:01:17.520 $\operatorname{-->}$ 01:01:21.040 that. I I had a question for Alex.
- NOTE Confidence: 0.8548884
- $01{:}01{:}21{.}040 \dashrightarrow 01{:}01{:}24{.}120$  So Alex, the data on Adams 13
- NOTE Confidence: 0.8548884
- $01:01:24.120 \longrightarrow 01:01:26.760$  and BWF levels. Do you think
- NOTE Confidence: 0.8548884
- $01:01:26.760 \longrightarrow 01:01:29.400$  that could be the basis for
- NOTE Confidence: 0.8548884
- $01{:}01{:}29{.}400 \dashrightarrow 01{:}01{:}31{.}600$  identifying high risk patients who
- NOTE Confidence: 0.8548884
- 01:01:31.600 --> 01:01:34.922 then might be part of a randomized
- NOTE Confidence: 0.8548884
- $01:01:34.922 \rightarrow 01:01:39.014$  control trial of anticoagulation or not?
- NOTE Confidence: 0.8548884
- $01:01:39.020 \longrightarrow 01:01:41.660$  In in COVID-19 and perhaps other
- NOTE Confidence: 0.8548884
- $01:01:41.660 \rightarrow 01:01:43.860$  people who are severely infected.
- NOTE Confidence: 0.77955836
- 01:01:45.670 --> 01:01:47.462 Yes, but thank you.
- NOTE Confidence: 0.77955836
- $01{:}01{:}47.462 \dashrightarrow 01{:}01{:}49.259$  Thanks for question. Indeed.
- NOTE Confidence: 0.77955836

 $01:01:49.259 \rightarrow 01:01:51.504$  I actually have great hopes

NOTE Confidence: 0.77955836

01:01:51.504 --> 01:01:53.300 until data shows otherwise,

NOTE Confidence: 0.77955836

 $01{:}01{:}53{.}300 \dashrightarrow 01{:}01{:}56{.}191$  but I have great hopes that this

NOTE Confidence: 0.77955836

01:01:56.191 --> 01:01:58.490 imbalance Adams just routine for

NOTE Confidence: 0.77955836

 $01:01:58.490 \longrightarrow 01:02:00.940$  Willebrand factor in balance is,

NOTE Confidence: 0.77955836

 $01:02:00.940 \longrightarrow 01:02:04.076$  you know for the lack of a better

NOTE Confidence: 0.77955836

 $01{:}02{:}04.076 \dashrightarrow 01{:}02{:}07.669$  word may be fundamental to Infosys it.

NOTE Confidence: 0.77955836

 $01:02:07.670 \longrightarrow 01:02:11.254$  Whether it is a marker or A cause,

NOTE Confidence: 0.77955836

 $01{:}02{:}11{.}260 \dashrightarrow 01{:}02{:}15{.}124$  that's I think it remains to be.

NOTE Confidence: 0.77955836

 $01{:}02{:}15{.}130 \dashrightarrow 01{:}02{:}17{.}470$  Is to be seen.

NOTE Confidence: 0.77955836

 $01{:}02{:}17{.}470 \dashrightarrow 01{:}02{:}19{.}290$  But from from Pathophysiologic

NOTE Confidence: 0.77955836

 $01:02:19.290 \rightarrow 01:02:21.565$  understanding of how Infosys happens,

NOTE Confidence: 0.77955836

 $01{:}02{:}21{.}570 \dashrightarrow 01{:}02{:}25{.}371$  I think this two markers would be

NOTE Confidence: 0.77955836

 $01:02:25.371 \rightarrow 01:02:28.095$  potentially could have that that

NOTE Confidence: 0.77955836

 $01:02:28.095 \longrightarrow 01:02:31.077$  could have that fill that role.

NOTE Confidence: 0.77955836

 $01:02:31.080 \longrightarrow 01:02:31.550$  Thank you.

- NOTE Confidence: 0.8076803
- 01:02:34.200 --> 01:02:36.016 Another question for you Alex again,

 $01{:}02{:}36.016 \dashrightarrow 01{:}02{:}37.204$  great session, great summaries.

NOTE Confidence: 0.8076803

01:02:37.204 --> 01:02:38.956 All of you guys you know

NOTE Confidence: 0.8076803

 $01:02:38.956 \longrightarrow 01:02:39.960$  for predicting cancer,

NOTE Confidence: 0.8076803

 $01:02:39.960 \longrightarrow 01:02:40.562$  associated thrombosis.

NOTE Confidence: 0.8076803

 $01{:}02{:}40.562 \dashrightarrow 01{:}02{:}42.985$  You kind of mentioned this that you know

NOTE Confidence: 0.8076803

 $01{:}02{:}42.985 \dashrightarrow 01{:}02{:}45.108$  the Corona score has been around a while.

NOTE Confidence: 0.8076803

 $01:02:45.108 \longrightarrow 01:02:46.316$  There been other scores.

NOTE Confidence: 0.8076803

 $01:02:46.320 \longrightarrow 01:02:48.136$  There's been positive data to support

NOTE Confidence: 0.8076803

 $01:02:48.136 \rightarrow 01:02:49.652$  the use of prophylactic integration

NOTE Confidence: 0.8076803

 $01:02:49.652 \longrightarrow 01:02:51.470$  for years and years and years,

NOTE Confidence: 0.8076803

 $01{:}02{:}51{.}470 \dashrightarrow 01{:}02{:}53{.}591$  but an even most recently with doacs

NOTE Confidence: 0.8076803

 $01{:}02{:}53{.}591$  -->  $01{:}02{:}55{.}714$  and yet no major consensus group has NOTE Confidence: 0.8076803

 $01:02:55.714 \rightarrow 01:02:57.526$  come down to support that practice.

NOTE Confidence: 0.8076803

 $01:02:57.530 \longrightarrow 01:02:59.954$  So so do you feel that this machine

 $01:02:59.954 \rightarrow 01:03:01.169$  learning algorithm will change

NOTE Confidence: 0.8076803

 $01:03:01.170 \longrightarrow 01:03:02.680$  clinical practice in that regard?

NOTE Confidence: 0.8076803

 $01:03:02.680 \longrightarrow 01:03:05.176$  Or do you still feel that we need? NOTE Confidence: 0.8076803

01:03:05.180 --> 01:03:08.042 Better tools to predict who will

NOTE Confidence: 0.8076803

 $01:03:08.042 \dashrightarrow 01:03:09.950$  actually get cancer thrombosis.

NOTE Confidence: 0.8076803

01:03:09.950 --> 01:03:12.918 So I'm a big believer in machine NOTE Confidence: 0.8076803

01:03:12.918 --> 01:03:15.175 learning just because it make it

NOTE Confidence: 0.8076803

 $01:03:15.175 \longrightarrow 01:03:17.740$  can crunch a lot of data in that.

NOTE Confidence: 0.8076803

 $01:03:17.740 \longrightarrow 01:03:18.607$  From that perspective,

NOTE Confidence: 0.8076803

01:03:18.607 --> 01:03:20.630 I think as a data generator and

NOTE Confidence: 0.8076803

01:03:20.688 --> 01:03:22.940 hypothesis generator generating technique,

NOTE Confidence: 0.8076803

 $01:03:22.940 \longrightarrow 01:03:25.280$  I think it's very important tool

NOTE Confidence: 0.8076803

 $01{:}03{:}25{.}280 \dashrightarrow 01{:}03{:}27{.}958$  in we should not shy from it

NOTE Confidence: 0.8076803

 $01{:}03{:}27{.}958 \dashrightarrow 01{:}03{:}30{.}359$  and utilized as much as we can.

NOTE Confidence: 0.8076803

 $01:03:30.360 \longrightarrow 01:03:32.520$  The question becomes sort of whether

NOTE Confidence: 0.8076803

 $01:03:32.520 \longrightarrow 01:03:34.776$  it's become sort of garbage in

- NOTE Confidence: 0.8076803
- 01:03:34.776 --> 01:03:36.656 garbage out kind of situation.

 $01:03:36.660 \rightarrow 01:03:40.164$  If we feed something that biased to this.

NOTE Confidence: 0.8076803

 $01{:}03{:}40{.}170 \dashrightarrow 01{:}03{:}41{.}750$  So the machine learning algorithms

NOTE Confidence: 0.8076803

 $01:03:41.750 \rightarrow 01:03:43.330$  algorithms we're going to get

NOTE Confidence: 0.8076803

 $01:03:43.384 \longrightarrow 01:03:44.668$  something totally useless,

NOTE Confidence: 0.8076803

 $01{:}03{:}44.670 \dashrightarrow 01{:}03{:}46.934$  so we have to be very careful about

NOTE Confidence: 0.8076803

 $01:03:46.934 \rightarrow 01:03:49.178$  what we really feed these algorithms

NOTE Confidence: 0.8076803

 $01:03:49.178 \rightarrow 01:03:51.590$  and how we use these algorithms.

NOTE Confidence: 0.8076803

 $01{:}03{:}51{.}590 \dashrightarrow 01{:}03{:}53{.}529$  And I think we need to collaborate

NOTE Confidence: 0.8076803

 $01:03:53.529 \rightarrow 01:03:56.088$  with a lot of artificial intelligence,

NOTE Confidence: 0.8076803

 $01:03:56.090 \longrightarrow 01:03:57.845$  machine learning people to to

NOTE Confidence: 0.8076803

 $01:03:57.845 \longrightarrow 01:03:59.890$  get the best out of it.

NOTE Confidence: 0.8076803

01:03:59.890 --> 01:04:01.286 But yes, I agree,

NOTE Confidence: 0.8076803

 $01{:}04{:}01{.}286 \dashrightarrow 01{:}04{:}02.682$  that's actually could be

NOTE Confidence: 0.8076803

 $01{:}04{:}02.682 \dashrightarrow 01{:}04{:}03.700$  absolutely indispensable tool.

01:04:06.730 --> 01:04:10.730 So George question for you if I may.

NOTE Confidence: 0.8678143

 $01:04:12.380 \longrightarrow 01:04:16.240$  Do you think that the data for complement

NOTE Confidence: 0.8678143

 $01:04:16.240 \rightarrow 01:04:18.660$  abnormalities in purpura fulminans has,

NOTE Confidence: 0.8678143

 $01:04:18.660 \rightarrow 01:04:21.560$  or will have any the rapeutic implications?

NOTE Confidence: 0.8234763

01:04:25.040 --> 01:04:28.604 Thank you Bob, really fascinating question.

NOTE Confidence: 0.8234763

 $01:04:28.604 \longrightarrow 01:04:30.980$  Really hard question too,

NOTE Confidence: 0.8234763

 $01:04:30.980 \longrightarrow 01:04:34.140$  especially because we worry about

NOTE Confidence: 0.8234763

 $01:04:34.140 \longrightarrow 01:04:38.130$  performance often in the infectious setting.

NOTE Confidence: 0.8234763

01:04:38.130 --> 01:04:40.517 One of the first patients that this

NOTE Confidence: 0.8234763

 $01{:}04{:}40{.}517 \dashrightarrow 01{:}04{:}43{.}790$  study was based off of was a patient

NOTE Confidence: 0.8234763

 $01{:}04{:}43.790 \dashrightarrow 01{:}04{:}45.095$  with Capnocytophaga bacteremia,

NOTE Confidence: 0.8234763

 $01:04:45.100 \rightarrow 01:04:48.188$  who ended up having purple foam and ends.

NOTE Confidence: 0.8234763

01:04:48.190 --> 01:04:50.125 So I think that that's

NOTE Confidence: 0.8234763

 $01{:}04{:}50{.}125 \dashrightarrow 01{:}04{:}51{.}673$  that's that stuff.

NOTE Confidence: 0.8234763

 $01:04:51.680 \rightarrow 01:04:54.464$  At the same time we have utilized compliment

NOTE Confidence: 0.8234763

 $01:04:54.464 \rightarrow 01:04:57.479$  in vision therapy when necessary in patients,

- NOTE Confidence: 0.8234763
- $01:04:57.480 \rightarrow 01:04:59.420$  for example, with catastrophic APS.
- NOTE Confidence: 0.8234763
- 01:04:59.420 --> 01:05:00.968 The difficulty, of course,
- NOTE Confidence: 0.8234763
- $01{:}05{:}00.968 \dashrightarrow 01{:}05{:}03.290$  because when there's a common infection,
- NOTE Confidence: 0.8234763
- $01{:}05{:}03.290 \dashrightarrow 01{:}05{:}05.408$  so I think that becomes a
- NOTE Confidence: 0.8234763
- 01:05:05.408 --> 01:05:07.540 discussion of risks and benefits,
- NOTE Confidence: 0.8234763
- $01{:}05{:}07{.}540 \dashrightarrow 01{:}05{:}09{.}220$  including with our infectious
- NOTE Confidence: 0.8234763
- $01:05:09.220 \rightarrow 01:05:10.060$  disease specialists.
- NOTE Confidence: 0.8234763
- 01:05:10.060 --> 01:05:10.837 Beyond of course,
- NOTE Confidence: 0.8234763
- 01:05:10.837 --> 01:05:12.132 the vaccination and the use
- NOTE Confidence: 0.8234763
- 01:05:12.132 --> 01:05:13.299 of amoxicillin or penicillin,
- NOTE Confidence: 0.8234763
- $01:05:13.300 \longrightarrow 01:05:15.190$  or something like that to be able
- NOTE Confidence: 0.8234763
- $01{:}05{:}15{.}190 \dashrightarrow 01{:}05{:}17{.}860$  to cover the next serial organisms.
- NOTE Confidence: 0.8234763
- $01:05:17.860 \longrightarrow 01:05:20.280$  Thank you.
- NOTE Confidence: 0.83295316
- $01{:}05{:}20{.}280 \dashrightarrow 01{:}05{:}22{.}248$  Question for Sabrina the convalescent plasma.
- NOTE Confidence: 0.83295316
- $01{:}05{:}22.250 \dashrightarrow 01{:}05{:}24.266$  The most recent recovery is a
- NOTE Confidence: 0.83295316

 $01:05:24.266 \rightarrow 01:05:25.870$  recovery truck from the UK.

NOTE Confidence: 0.83295316

01:05:25.870 --> 01:05:27.182 Was a negative study,

NOTE Confidence: 0.83295316

 $01:05:27.182 \longrightarrow 01:05:28.822$  but there's many positive ones,

NOTE Confidence: 0.83295316

 $01:05:28.830 \longrightarrow 01:05:30.480$  including our own data that

NOTE Confidence: 0.83295316

 $01{:}05{:}30{.}480 \dashrightarrow 01{:}05{:}31{.}470$  you brilliantly presented.

NOTE Confidence: 0.83295316

 $01{:}05{:}31{.}470 \dashrightarrow 01{:}05{:}33{.}438$  Can you reconcile all of this

NOTE Confidence: 0.83295316

 $01{:}05{:}33{.}438 \dashrightarrow 01{:}05{:}35{.}740$  for us and how we should think

NOTE Confidence: 0.83295316

 $01{:}05{:}35{.}740 \dashrightarrow 01{:}05{:}37{.}060$  about using convalescent plasma

NOTE Confidence: 0.83295316

 $01:05:37.060 \longrightarrow 01:05:38.050$  and COVID-19 patients?

NOTE Confidence: 0.83295316

01:05:38.050 --> 01:05:39.030 Yeah, it thank

NOTE Confidence: 0.83295316

 $01:05:39.030 \longrightarrow 01:05:40.346$  you all for that.

NOTE Confidence: 0.83295316

 $01:05:40.346 \rightarrow 01:05:42.320$  I think it's been challenging 'cause,

NOTE Confidence: 0.83295316

 $01{:}05{:}42.320 \dashrightarrow 01{:}05{:}44.665$  as you mentioned that the data has

NOTE Confidence: 0.83295316

 $01{:}05{:}44.665 \dashrightarrow 01{:}05{:}46.599$  been quite mixed and you know,

NOTE Confidence: 0.83295316

01:05:46.600 --> 01:05:48.826 I think just recently we're getting

NOTE Confidence: 0.83295316

 $01{:}05{:}48.826 \dashrightarrow 01{:}05{:}50.310$  additional information from from

 $01:05:50.372 \rightarrow 01:05:52.227$  larger and more randomized trials.

NOTE Confidence: 0.83295316

 $01{:}05{:}52{.}230 \dashrightarrow 01{:}05{:}54{.}799$  The early trials that were randomized had

NOTE Confidence: 0.83295316

 $01:05:54.799 \rightarrow 01:05:57.209$  stopped early for a number of reasons,

NOTE Confidence: 0.83295316

 $01{:}05{:}57{.}210$  -->  $01{:}05{:}59{.}695$  one being that there were patients that NOTE Confidence: 0.83295316

01:05:59.695 --> 01:06:01.874 actually actually were SERO positive at NOTE Confidence: 0.83295316

 $01:06:01.874 \rightarrow 01:06:03.974$  the time they got convalescent plasma,

NOTE Confidence: 0.83295316

 $01{:}06{:}03.980 \dashrightarrow 01{:}06{:}06.974$  and then there were issues with

NOTE Confidence: 0.83295316

01:06:06.974 --> 01:06:08.970 recruitment in other studies.

NOTE Confidence: 0.83295316

 $01{:}06{:}08{.}970 \dashrightarrow 01{:}06{:}11{.}018$  I, I think we're going to have to

NOTE Confidence: 0.83295316

01:06:11.018 --> 01:06:12.826 really kind of look through the

NOTE Confidence: 0.83295316

01:06:12.826 --> 01:06:14.366 details of what antibody titer

NOTE Confidence: 0.83295316

01:06:14.366 --> 01:06:16.372 was an neutralizing function in

NOTE Confidence: 0.83295316

 $01{:}06{:}16.372 \dashrightarrow 01{:}06{:}18.422$  the convalescent plasma with each NOTE Confidence: 0.83295316

 $01{:}06{:}18.422 \dashrightarrow 01{:}06{:}20.405$  randomized trial as well as timing NOTE Confidence: 0.83295316

 $01:06:20.405 \rightarrow 01:06:22.376$  and timing of receiving the plasma NOTE Confidence: 0.83295316
$01:06:22.376 \rightarrow 01:06:24.428$  and the severity of the disease,

NOTE Confidence: 0.83295316

 $01{:}06{:}24{.}430 \dashrightarrow 01{:}06{:}26{.}320$  because I think there has been

NOTE Confidence: 0.83295316

 $01:06:26.320 \longrightarrow 01:06:28.320$  signal for patients who get high

NOTE Confidence: 0.83295316

01:06:28.320 --> 01:06:30.025 titer plasma earlier in disease,

NOTE Confidence: 0.83295316

 $01{:}06{:}30{.}030 \dashrightarrow 01{:}06{:}31{.}998$  that there there is benefit there,

NOTE Confidence: 0.83295316

01:06:32.000 --> 01:06:32.582 you know,

NOTE Confidence: 0.83295316

 $01{:}06{:}32.582 \dashrightarrow 01{:}06{:}34.910$  and I I don't know that there the

NOTE Confidence: 0.83295316

 $01:06:34.987 \rightarrow 01:06:37.225$  details of the recovery trial have

NOTE Confidence: 0.83295316

 $01{:}06{:}37{.}225 \dashrightarrow 01{:}06{:}39{.}399$  been released yet in terms of.

NOTE Confidence: 0.83295316

 $01{:}06{:}39{.}400 \dashrightarrow 01{:}06{:}42{.}478$  The timing of convalescent plasma and

NOTE Confidence: 0.83295316

 $01{:}06{:}42.478 \dashrightarrow 01{:}06{:}44.530$  how heterogeneous the convalescent

NOTE Confidence: 0.83295316

 $01{:}06{:}44.602 \dashrightarrow 01{:}06{:}46.738$  donor plasma was at that time.

NOTE Confidence: 0.8631877

 $01:06:48.480 \longrightarrow 01:06:49.158$  Great, thank you.

NOTE Confidence: 0.796499

 $01:06:52.590 \longrightarrow 01:06:54.226$  Sabrina question about it

NOTE Confidence: 0.796499

01:06:54.226 --> 01:06:56.680 for two zaran if I could.

NOTE Confidence: 0.796499

 $01:06:56.680 \rightarrow 01:06:59.144$  So you mentioned that there

- NOTE Confidence: 0.796499
- $01:06:59.144 \longrightarrow 01:07:01.115$  were some adverse events,

NOTE Confidence: 0.796499

 $01:07:01.115 \longrightarrow 01:07:02.103$  notably thrombosis,

NOTE Confidence: 0.796499

 $01{:}07{:}02{.}103 \dashrightarrow 01{:}07{:}04{.}568$  presumably due to the sustained

NOTE Confidence: 0.796499

 $01:07:04.570 \rightarrow 01:07:07.196$  reduction in anti thrombin levels.

NOTE Confidence: 0.796499

 $01{:}07{:}07{.}196 \dashrightarrow 01{:}07{:}09{.}856$  Do you know if those individuals

NOTE Confidence: 0.796499

 $01:07:09.856 \longrightarrow 01:07:11.206$  were treated with antithrombin

NOTE Confidence: 0.796499

01:07:11.206 --> 01:07:12.558 concentrates as a as

NOTE Confidence: 0.81299037

 $01{:}07{:}12.560 \dashrightarrow 01{:}07{:}13.580$ a in in

NOTE Confidence: 0.81299037

 $01:07:13.580 \longrightarrow 01:07:14.591$  along with anticoagulation?

NOTE Confidence: 0.81299037

 $01{:}07{:}14.591 \dashrightarrow 01{:}07{:}16.613$  That's a great question but I

NOTE Confidence: 0.81299037

 $01:07:16.620 \longrightarrow 01:07:17.968$  I don't, I don't.

NOTE Confidence: 0.81299037

 $01{:}07{:}17{.}970 \dashrightarrow 01{:}07{:}20{.}458$  I didn't find any evidence that or any

NOTE Confidence: 0.81299037

 $01{:}07{:}20.458 \dashrightarrow 01{:}07{:}23.380$  data on whether or not they were treated,

NOTE Confidence: 0.81299037

 $01{:}07{:}23.380 \dashrightarrow 01{:}07{:}26.076$  so I don't know the answer to that.

NOTE Confidence: 0.81299037

 $01{:}07{:}26.080 \dashrightarrow 01{:}07{:}28.446$  I do know when dosing was paused,

NOTE Confidence: 0.81299037

 $01:07:28.450 \longrightarrow 01:07:30.613$  you know they looked at the group

NOTE Confidence: 0.81299037

 $01{:}07{:}30{.}613 \dashrightarrow 01{:}07{:}32{.}714$  and found that patients who had

NOTE Confidence: 0.81299037

 $01{:}07{:}32.714 \dashrightarrow 01{:}07{:}34.549$  an antithrombin level that was

NOTE Confidence: 0.81299037

 $01:07:34.549 \longrightarrow 01:07:37.006$  less than 20% and had the higher

NOTE Confidence: 0.81299037

 $01{:}07{:}37.006 \dashrightarrow 01{:}07{:}38.826$ risk highest risk of thrombosis.

NOTE Confidence: 0.81299037

 $01{:}07{:}38{.}830 \dashrightarrow 01{:}07{:}40{.}804$  And those patients that were greater than NOTE Confidence: 0.81299037

01:07:40.804 --> 01:07:42.510 20% actually had no thrombotic events,

NOTE Confidence: 0.81299037

 $01:07:42.510 \longrightarrow 01:07:44.372$  and so that's why the trials

NOTE Confidence: 0.81299037

 $01{:}07{:}44.372 \dashrightarrow 01{:}07{:}45.910$  have preceded with the redosing,

NOTE Confidence: 0.81299037

01:07:45.910 --> 01:07:47.772 which is initially going to start at

NOTE Confidence: 0.81299037

01:07:47.772 --> 01:07:49.589 every other month and then kind of

NOTE Confidence: 0.81299037

 $01{:}07{:}49.589 \dashrightarrow 01{:}07{:}51.423$  increased back to where they had been NOTE Confidence: 0.81299037

 $01{:}07{:}51{.}423$  -->  $01{:}07{:}53{.}403$  previously with the goal of monitoring NOTE Confidence: 0.81299037

 $01:07:53.403 \rightarrow 01:07:54.974$  and antithrombin levels closely so

NOTE Confidence: 0.81299037

 $01:07:54.974 \longrightarrow 01:07:56.983$  that they stay kind of between 15

NOTE Confidence: 0.81299037

 $01:07:56.983 \rightarrow 01:07:59.208$  and 35% is what what it's report is,

- NOTE Confidence: 0.81299037
- 01:07:59.210 --> 01:08:00.620 but I don't know about
- NOTE Confidence: 0.8318267
- $01{:}08{:}00.620 \dashrightarrow 01{:}08{:}02.040$  the concentrates. OK, great thank
- NOTE Confidence: 0.8318267
- $01:08:02.040 \dashrightarrow 01:08:03.450$  you, that's interesting, thank you.
- NOTE Confidence: 0.79507476
- 01:08:05.350 --> 01:08:07.456 Question for George. So you know,
- NOTE Confidence: 0.79507476
- $01{:}08{:}07{.}460 \dashrightarrow 01{:}08{:}09{.}916$  in the abstract that you presented on
- NOTE Confidence: 0.79507476
- $01{:}08{:}09{.}916 \dashrightarrow 01{:}08{:}12{.}720$  using CRISPR CAS to target BCL 11 A.
- NOTE Confidence: 0.79507476
- 01:08:12.720 --> 01:08:14.480 I was literally just Googling
- NOTE Confidence: 0.79507476
- $01:08:14.480 \longrightarrow 01:08:16.230$  what else detail 11/8 does.
- NOTE Confidence: 0.79507476
- $01:08:16.230 \longrightarrow 01:08:18.340$  And you know there are interesting
- NOTE Confidence: 0.79507476
- 01:08:18.340 --> 01:08:20.091 reports about it being involved
- NOTE Confidence: 0.79507476
- 01:08:20.091 --> 01:08:22.197 in metal pieces in B cell,
- NOTE Confidence: 0.79507476
- $01{:}08{:}22{.}200 \dashrightarrow 01{:}08{:}23{.}950$  lymph, Genesis and so forth.
- NOTE Confidence: 0.79507476
- $01{:}08{:}23.950 \dashrightarrow 01{:}08{:}26.410$  And so I'm just wondering if the
- NOTE Confidence: 0.79507476
- $01{:}08{:}26.410 \dashrightarrow 01{:}08{:}27.810$  investigators talked about potential,
- NOTE Confidence: 0.79507476
- 01:08:27.810 --> 01:08:28.863 you know, humans,
- NOTE Confidence: 0.79507476

 $01:08:28.863 \rightarrow 01:08:30.267$  allergic effects or immunological

NOTE Confidence: 0.79507476

 $01{:}08{:}30{.}267 \dashrightarrow 01{:}08{:}32{.}730$  effects and and the reason being that

NOTE Confidence: 0.79507476

 $01{:}08{:}32.730 \dashrightarrow 01{:}08{:}35.830$  you know there there is another set of.

NOTE Confidence: 0.79507476

 $01:08:35.830 \longrightarrow 01:08:36.095$  Essentially,

NOTE Confidence: 0.79507476

 $01{:}08{:}36.095 \dashrightarrow 01{:}08{:}37.152$  gene editing treatments that

NOTE Confidence: 0.79507476

 $01:08:37.152 \longrightarrow 01:08:38.724$  we can use in these disorders,

NOTE Confidence: 0.79507476

 $01:08:38.730 \longrightarrow 01:08:40.055$  which is stem cell transplant.

NOTE Confidence: 0.79507476

01:08:40.055 -> 01:08:41.834 So it just makes you wonder that

NOTE Confidence: 0.79507476

 $01{:}08{:}41{.}834 \dashrightarrow 01{:}08{:}43{.}310$  if there are these unknown effects

NOTE Confidence: 0.79507476

 $01:08:43.354 \rightarrow 01:08:44.538$  with these newer therapies,

NOTE Confidence: 0.79507476

 $01{:}08{:}44{.}540 \dashrightarrow 01{:}08{:}44{.}810$  then

NOTE Confidence: 0.80985254

01:08:44.810 --> 01:08:46.388 why not just go for stem

NOTE Confidence: 0.80985254

 $01:08:46.390 \longrightarrow 01:08:48.388$  cell transplant instead?

NOTE Confidence: 0.80985254

 $01:08:48.390 \longrightarrow 01:08:49.620$  Yeah, thank you.

NOTE Confidence: 0.80985254

 $01:08:49.620 \longrightarrow 01:08:51.670$  Yeah that's a great question.

NOTE Confidence: 0.80985254

01:08:51.670 - 01:08:53.495 Of course, stem cell transplant

- NOTE Confidence: 0.80985254
- $01:08:53.495 \longrightarrow 01:08:54.955$  also has adverse effects.
- NOTE Confidence: 0.80985254
- 01:08:54.960 --> 01:08:56.994 An events just like gene editing
- NOTE Confidence: 0.80985254
- $01:08:56.994 \rightarrow 01:08:59.718$  does in the in the initial study,
- NOTE Confidence: 0.80985254
- $01{:}08{:}59{.}720 \dashrightarrow 01{:}09{:}02{.}011$  so they've completed follow up in
- NOTE Confidence: 0.80985254
- 01:09:02.011 --> 01:09:04.790 at least two patients and they have NOTE Confidence: 0.80985254
- $01:09:04.876 \longrightarrow 01:09:07.652$  another I think 6 to 9 patients in
- NOTE Confidence: 0.80985254
- $01:09:07.652 \rightarrow 01:09:10.338$  in each of the 111 and STD 121.
- NOTE Confidence: 0.80985254
- $01:09:10.340 \longrightarrow 01:09:13.730$  There is nothing that I saw.
- NOTE Confidence: 0.80985254
- 01:09:13.730 $\operatorname{-->}$ 01:09:14.998 Talking about specifically human,
- NOTE Confidence: 0.80985254
- 01:09:14.998 --> 01:09:16.266 logical and immunological effects,
- NOTE Confidence: 0.80985254
- $01:09:16.270 \rightarrow 01:09:17.510$  notable things were infectious
- NOTE Confidence: 0.80985254
- $01:09:17.510 \longrightarrow 01:09:19.770$  from both of the first 2 pages,
- NOTE Confidence: 0.80985254
- $01:09:19.770 \longrightarrow 01:09:21.047$  but The thing is,
- NOTE Confidence: 0.80985254
- $01{:}09{:}21{.}047 \dashrightarrow 01{:}09{:}22{.}990$  those other patients still need at
- NOTE Confidence: 0.80985254
- $01{:}09{:}22{.}990 \dashrightarrow 01{:}09{:}25{.}300$  least another year of follow up before
- NOTE Confidence: 0.80985254

 $01:09:25.368 \rightarrow 01:09:27.398$  we can start talking about this right.

NOTE Confidence: 0.80985254

 $01:09:27.400 \longrightarrow 01:09:29.630$  And then beyond that long term too,

NOTE Confidence: 0.80985254

 $01:09:29.630 \longrightarrow 01:09:31.744$  'cause it's not just a year or

NOTE Confidence: 0.80985254

 $01:09:31.744 \rightarrow 01:09:33.760$  two that people will live right.

NOTE Confidence: 0.80985254

 $01:09:33.760 \longrightarrow 01:09:37.069$  Hopefully in that good state so.

NOTE Confidence: 0.80985254

01:09:37.070 --> 01:09:38.390 Yeah, I I don't know more.

NOTE Confidence: 0.8540588

 $01{:}09{:}42.670 \dashrightarrow 01{:}09{:}44.740$  So I have a question.

NOTE Confidence: 0.8540588

 $01:09:44.740 \longrightarrow 01:09:46.803$  Maybe for George about the

NOTE Confidence: 0.8540588

 $01{:}09{:}46.803 \dashrightarrow 01{:}09{:}48.454$  the anticoagulant. I'm sorry.

NOTE Confidence: 0.8540588

 $01:09:48.454 \longrightarrow 01:09:50.514$  Not George Alex about the

NOTE Confidence: 0.8540588

 $01:09:50.514 \longrightarrow 01:09:51.338$  anticoagulant inhibitor.

NOTE Confidence: 0.8661554

 $01{:}09{:}52{.}290 \dashrightarrow 01{:}09{:}54{.}010$  Where, where are we

NOTE Confidence: 0.8661554

 $01:09:54.010 \longrightarrow 01:09:56.590$  in 2021 in terms of first

NOTE Confidence: 0.8661554

 $01:09:56.590 \rightarrow 01:09:58.310$  line therapy for reversal,

NOTE Confidence: 0.8661554

 $01:09:58.310 \rightarrow 01:10:00.425$  bleeding for, let's say, induce?

NOTE Confidence: 0.8661554

01:10:00.425 --> 01:10:01.968 Buy a doac you think?

- NOTE Confidence: 0.8702791
- $01:10:04.180 \longrightarrow 01:10:08.468$  Well, so we do have access to both.

NOTE Confidence: 0.7811392

01:10:11.320 --> 01:10:13.216 And extra an assistant

NOTE Confidence: 0.7811392

 $01:10:13.216 \longrightarrow 01:10:15.586$  either season map I believe.

NOTE Confidence: 0.7811392

 $01:10:15.590 \rightarrow 01:10:18.428$  I personally have not used them,

NOTE Confidence: 0.7811392

 $01:10:18.430 \rightarrow 01:10:23.926$  but I know several people have used them.

NOTE Confidence: 0.7811392

 $01:10:23.930 \longrightarrow 01:10:29.400$  And, um. I believe it's costly and

NOTE Confidence: 0.7811392

 $01:10:29.400 \rightarrow 01:10:33.080$  what's interesting is that the decision,

NOTE Confidence: 0.7811392

01:10:33.080 --> 01:10:35.990 as far as I know,

NOTE Confidence: 0.7811392

 $01:10:35.990 \longrightarrow 01:10:39.511$  decision is made still on the timing

NOTE Confidence: 0.7811392

 $01{:}10{:}39{.}511 \dashrightarrow 01{:}10{:}43{.}540$  of the last those event equivalent.

NOTE Confidence: 0.7811392

 $01:10:43.540 \longrightarrow 01:10:46.548$  Furthermore, the both trial

NOTE Confidence: 0.7811392

 $01{:}10{:}46{.}548 \dashrightarrow 01{:}10{:}50{.}308$  trial so far both for.

NOTE Confidence: 0.7811392

 $01{:}10{:}50{.}310 \dashrightarrow 01{:}10{:}54{.}930$  Typical Tran and Doac and the factor

NOTE Confidence: 0.7811392

 $01{:}10{:}54{.}930 \dashrightarrow 01{:}10{:}58{.}310$  of 10 anticoagulants inhibitors.

NOTE Confidence: 0.7811392

 $01{:}10{:}58{.}310 \dashrightarrow 01{:}11{:}01{.}134$  Both those trials for the rest of the

NOTE Confidence: 0.7811392

01:11:01.134 --> 01:11:03.640 reversal agents were without control arms,

NOTE Confidence: 0.7811392

 $01:11:03.640 \longrightarrow 01:11:05.926$  so with efficacy is not really

NOTE Confidence: 0.7811392

 $01:11:05.926 \longrightarrow 01:11:07.069$  well established still,

NOTE Confidence: 0.7811392

 $01{:}11{:}07{.}070 \dashrightarrow 01{:}11{:}09{.}408$  so I think there's there's one trial

NOTE Confidence: 0.7811392

01:11:09.408 --> 01:11:11.984 right now is going on next I next

NOTE Confidence: 0.7811392

01:11:11.984 --> 01:11:14.222 one is for the internal hemorrhage

NOTE Confidence: 0.7811392

 $01{:}11{:}14.222 \dashrightarrow 01{:}11{:}16.217$  reversal of anticoagulation.

NOTE Confidence: 0.7811392

01:11:16.220 --> 01:11:18.120 People patient with intracranial hemorrhage,

NOTE Confidence: 0.7811392

 $01{:}11{:}18{.}120 \dashrightarrow 01{:}11{:}20{.}406$  which is which is randomized trial.

NOTE Confidence: 0.7811392

 $01:11:20.410 \rightarrow 01:11:24.099$  I think that's going to be informative.

NOTE Confidence: 0.7811392

01:11:24.100 --> 01:11:30.382 But I I think it's data is not super.

NOTE Confidence: 0.7811392

 $01:11:30.390 \rightarrow 01:11:33.252$  Super strong about how to reverse

NOTE Confidence: 0.7811392

 $01{:}11{:}33{.}252 \dashrightarrow 01{:}11{:}35{.}160$  and whether to wait.

NOTE Confidence: 0.7811392

01:11:35.160 --> 01:11:36.990 Just kind of, you know,

NOTE Confidence: 0.7811392

01:11:36.990 --> 01:11:38.820 hours since the last administration.

NOTE Confidence: 0.7811392

 $01:11:38.820 \longrightarrow 01:11:40.292$  So secret parent tag,

- NOTE Confidence: 0.7811392
- 01:11:40.292 --> 01:11:42.943 as far as I understand it's a
- NOTE Confidence: 0.7811392
- 01:11:42.943 --> 01:11:45.109 small market which is very easy
- NOTE Confidence: 0.7811392
- $01:11:45.109 \rightarrow 01:11:46.870$  to fairly easy to make,
- NOTE Confidence: 0.7811392
- $01:11:46.870 \rightarrow 01:11:49.396$  which probably will reduce the cost
- NOTE Confidence: 0.7811392
- $01:11:49.396 \longrightarrow 01:11:52.882$  an it's rapid and you don't need to
- NOTE Confidence: 0.7811392
- $01{:}11{:}52.882 \dashrightarrow 01{:}11{:}55.940$  necessarily think about when was the last.
- NOTE Confidence: 0.7811392
- $01{:}11{:}55{.}940 \dashrightarrow 01{:}11{:}59{.}012$  Dose I think that I would think that
- NOTE Confidence: 0.7811392
- $01:11:59.012 \rightarrow 01:12:02.148$  that might be an advantage of using it.
- NOTE Confidence: 0.7811392
- 01:12:02.150 --> 01:12:04.460 Um?
- NOTE Confidence: 0.7811392
- $01:12:04.460 \longrightarrow 01:12:07.022$  But I think the world of antic
- NOTE Confidence: 0.7811392
- $01{:}12{:}07{.}022 \dashrightarrow 01{:}12{:}09{.}238$  of reversal agents is an infancy.
- NOTE Confidence: 0.7811392
- 01:12:09.240 --> 01:12:09.608 Yeah,
- NOTE Confidence: 0.7811392
- 01:12:09.608 --> 01:12:10.344 I agree.
- NOTE Confidence: 0.7811392
- 01:12:10.344 --> 01:12:11.448 I think we're
- NOTE Confidence: 0.8041131
- $01:12:11.450 \longrightarrow 01:12:13.290$  waiting for some head to
- NOTE Confidence: 0.8041131

01:12:13.290 --> 01:12:15.130 head trials with some of

NOTE Confidence: 0.8041131

 $01:12:15.130 \rightarrow 01:12:17.340$  these drugs in the prothrombin complex

NOTE Confidence: 0.8041131

 $01:12:17.340 \longrightarrow 01:12:19.178$  concentrates as well. Thank you.

NOTE Confidence: 0.85915107

01:12:19.900 --> 01:12:21.736 Well, thank you so much everybody.

NOTE Confidence: 0.85915107

01:12:21.740 --> 01:12:23.270 Thank you Doctor Pine, Victor,

NOTE Confidence: 0.85915107

01:12:23.270 --> 01:12:24.538 Joshua and Doctor Browning,

NOTE Confidence: 0.85915107

 $01:12:24.538 \longrightarrow 01:12:26.123$  and the excellent moderation by

NOTE Confidence: 0.85915107

 $01:12:26.123 \rightarrow 01:12:27.548$  Doctor Lee and Doctor Bonner.

NOTE Confidence: 0.85915107

01:12:27.550 --> 01:12:29.200 We probably could go another hour

NOTE Confidence: 0.85915107

 $01:12:29.200 \rightarrow 01:12:31.220$  with all of these great questions.

NOTE Confidence: 0.85915107

01:12:31.220 --> 01:12:33.412 Please remember you can reach out to all NOTE Confidence: 0.85915107

 $01:12:33.412 \rightarrow 01:12:35.722$  of the speakers and the moderators by

NOTE Confidence: 0.85915107

 $01{:}12{:}35{.}722 \dashrightarrow 01{:}12{:}38{.}060$  email for any questions and there will

NOTE Confidence: 0.85915107

01:12:38.060 --> 01:12:40.396 be a recording of this session for your

NOTE Confidence: 0.85915107

01:12:40.400 --> 01:12:42.236 convenience will be posted next week.

NOTE Confidence: 0.85915107

 $01:12:42.240 \longrightarrow 01:12:43.464$  Thank you so much.

- NOTE Confidence: 0.85915107
- $01:12:43.464 \longrightarrow 01:12:44.688$  Please remember next week.
- NOTE Confidence: 0.85915107
- 01:12:44.690 --> 01:12:47.306 next Friday is the last session which will
- NOTE Confidence: 0.85915107
- $01:12:47.306 \longrightarrow 01:12:50.010$  be focused on cell therapy and bone marrow.
- NOTE Confidence: 0.85915107
- $01{:}12{:}50{.}010$  -->  $01{:}12{:}51{.}950$  A transplantation and that will
- NOTE Confidence: 0.85915107
- $01{:}12{:}51{.}950 \dashrightarrow 01{:}12{:}53{.}908$  conclude our post. As h highlights.
- NOTE Confidence: 0.85915107
- $01:12:53.908 \longrightarrow 01:12:55.484$  Thank you so much.