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Practice Harmonisation and Guidelines
Chair: Patrick Hayden, Vice-chair: Laurent Gardere
Last year, the CMWP has instituted a Practice Harmonisation and Guidelines subcommittee with the intention to produce practically clinically relevant guidelines for haematologists in the field of HSC.

First project initiated
Management of adults and children undergoing autologous CAR T-cell therapy: Recommendations of the EBMT
Following discussion at recent working party meetings, it was felt that there was a need for EBMT guidelines on CAR T-cell therapy. These recommendations are intended to be general in scope and to be applicable to any given disease or type of CAR T-cell therapy. As these guidelines will span the activities of most of the working parties, this is therefore a shared EBMT project.

Next business meetings
Monday March 25th 07:00-09:00, Illusion 2
EBMT Congress 2019, Frankfurt, Germany
Friday 4th – Sunday 6th October, 2019
Business meeting, Istanbul, Turkey

Proposed studies
Impact of high-risk genetic aberrations on outcome after salvage autohSCT in relapsed MM
This retrospective study aims at investigating the outcome of salvage autohSCT of MM patients with high-risk genetic aberrations at diagnosis. A special focus will be on salvage autohSCT before or after the approval of novel agents including IMiDs and probablyes inhibitors.

Outcomes of conditioning following addition of novel agents to high dose Melphalan during autoH SCT in MM
The aim of this study is to evaluate if intensification of conditioning following addition of novel agents to high dose Melphalan during autoH SCT in MM will improve survival outcomes of patients. The study will compare patients who received novel agents to those who did not.

Data request
AutoHSCT for relapsed MM performed with cells procured after a previous autoHSCT
This retrospective analysis covers patients who underwent - after a previous autologous hematopoietic stem cell transplantation - a remobilization of stem cells and salvage autoHSCT performed with use of these remobilized cells. The primary objective is to provide data on the feasibility of such a stem cell remobilization, as well as to provide data on the short- and long-term efficacy and safety of salvage autoHSCT performed with cells remobilized after a previous autoHSCT.

Oral Session 12: Multiple Myeloma
Wednesday March 27th 09:00-10:30, Conclusion 1 + 2
09:11-09:22 OS12-2: Impact of high-risk cytogenetics in newly diagnosed multiple myeloma undergoing upfront stem cell transplantation: a study from the EBMT Chronic Malignancies Working Party – Non Graft

Recently published articles
Outcomes of Hematopoietic Transplantation in Patients with Relapsed Multiple Myeloma: An EBMT CMWP Review

Impact of Extraordinary Disease in Patients with Newly Diagnosed Multiple Myeloma Undergoing Autologous Stem Cell Transplantation: A Study from the EBMT Chronic Malignancies Working Party

Proposed studies
AlloHSCT for CLL in the context of Venetoclax treatment
Venetoclax is used as salvage after BTKI failure. We aim to retrospectively study Venetoclax use either as a bridge to alloHSCT and/or as a post alloHSCT strategy. The focus will be on the prior treatment pedigree, response status pre-alloHSCT and impact on specific outcomes (e.g. GVHD, infection).

AlloHSCT for Richter Syndrome (RS)
Richter Syndrome after both BTKI and BCL2-L1 treatments has a poor prognosis. This retrospective study aims at collecting data on alloHSCT in Richter Syndrome within the last 10 years. Documented histology will be verified before case inclusion.

AlloHSCT for B-prolymphocytic leukaemia (B-PLL)
B-PLL has a high occurrence of TP53 disruption, CMYC activation (or both) and a poor prognosis. There is no evidence that BCRI and/or BCL2-L1 can produce long term control in B-PLL. Hence, alloHSCT remains a valid option and will be evaluated in this retrospective study. For this study, centers will be asked to confirm the diagnosis of B-PLL.

Long term analysis of alloHSCT for T-prolymphocytic leukaemia (T-PLL)
The only curative strategy in T-PLL is alloHSCT. Yet, it has a high relapse rate. This long-term analysis will focus on late relapse incidence and management.

Chair: Oliver Tournilhac, Vice-chair: Michel van Gelderen
Overview of registered CLLL patients
Number of first allogeneic transplant for CLL registered by EBMT per year

EBMT Prospective Observational Study on Allogeneic Stem Cell Transplantation in T- Prolymphocytic Leukaemia (T-PLL)
Chair: Olivier Tournilhac, vice-chair: Michel van Gelderen
Overview of registered CLLL patients
Number of first allogeneic transplant for CLL registered by EBMT per year

Subcommittee Plasma Cell Disorders
Chair: Stefan Schönland, Vice-Chair: Meral Beksaç
Overview of registered MM patients
Number of first autologous transplant for MM registered by EBMT per year
Number of first allogeneic transplant for MM registered by EBMT per year

Percentage of autologous transplanted patients whose cytogenetics are registered over the years
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Subcommittee Chronic Lymphocytic Leukemia
Chair: Olivier Tournilhac, Vice-chair: Michel van Gelderen
Overview of registered CLLL patients
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09:33-09:44 OS12-4: The role of renal impairment at diagnosis in multiple myeloma undergoing autologous transplantation: a retrospective analysis of the CMWP – Christof Sched

09:44-09:55 OS12-21: Analysis of outcomes in patients with myeloma who had a second alloHSCT either for disease relapse or graft failure: an EBMT CMWP study – Patrick Hayden

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Chair: Ibrahim Yakoub-Agha, Secretary: Patrick Hayden