

PHYSICIAN ASSISTANTS

Session Type and Date	Session Title and Description	Session Type and Date	Session Title and Description
Concurrent 1 (Wed 2/19)	<p>Essential Immunology: Back to the Basics</p> <p>The session will cover clinically relevant aspects of basic immunology with a specific focus on T cells, antigen presenting cells and tissues. It will serve as a primer for all clinicians while also providing a window into some of the exciting, potentially translational relevance of the recent advances in basic immunology.</p>	Concurrent 7 (Sat 2/22)	<p>WBMT Concurrent: International Access to HCT Drugs: Impact on Transplant Practice and Patients</p> <p>In this session the root causes of drug shortages, focusing on essential drugs for hematopoietic cell transplantation will be discussed based on a public meeting held recently by the FDA and documents of international organizations e.g. the WHO. Increasingly more frequent drug shortages have a tremendous effect on health care providers dedicated to deliver high quality patient care. We will include the viewpoint of pharmacists who need an increasing amount of time for finding adequate drug replacements to allow continuous patient treatment and will present their efforts in finding enduring solutions. An essential list of HCT drugs based on a survey amongst international HCT specialists and organizations will be discussed. Furthermore, other WBMT activities to foster international cooperation to maintain access to essential drugs in HCT will be presented and discussed with participants.</p>
Concurrent 2 (Wed 2/19)	<p>Health Economics in CAR-T: Patient, Provider, and Policy Implications of the Costs of Our Therapies</p> <p>This session will provide three different perspectives - provider, patient, and policy - on the economic changes CAR-T has brought to the health care system.</p>	Concurrent 8 (Sat 2/22)	<p>Advances in Microbiome on Transplant and Cellular Therapy Outcomes</p> <p>Microbial communities in the body can have a profound impact on outcomes after transplant and immunotherapy. This session will describe changes in gut microbial communities after hematopoietic cell transplantation and how these are linked to graft-versus-host disease, with an exploration of potential mechanisms involved in pathogenesis and a discussion of strategies to retain beneficial microbes in patients undergoing transplantation. We will also discuss the connections between the microbiome and the immune response in patients with cancer--and how this is relevant in transplantation and cancer therapy including immunotherapy--as well as strategies for altering the microbiota of patients undergoing cancer therapy with the goal of improving anti-tumor responses, reducing infections, and modulating immunity. The safety and efficacy of fecal microbiota transplantation in immunocompromised patients will be described, and the potential of newly emerging microbial therapeutics will be highlighted.</p>
Plenary 3 (Thurs 2/20)	<p>Alternative Donor Transplant</p> <p>This session will focus on the use of alternative donors for allogeneic transplantation with discussion on the pros and cons of mismatched unrelated, haploidentical and cord blood transplants. We will recognize the clinical challenges in these different fields and strategies instituted by transplant centers to improve clinical outcomes and review the early days, current advantages and challenges, and finally promising efforts to further strengthen their role as a highly desired stem cell sources in patients undergoing hematopoietic stem cell transplantation.</p>	Plenary 6 (Sun 2/23)	<p>ASTCT/CIBMTR/EBMT Joint Session: Bridging the gap in BMT and cellular therapy between North America and Europe</p> <p>This joint session organized by the ASTCT, the CIBMTR and the EBMT will review areas of strength and successful collaborations in blood and marrow transplantation and cellular therapy between North America and Europe, and will lay the foundation for future collaborative work in this area. This session will highlight differences and similarities in transplantation practices in the two geographical areas, describe their rationale and impact on patient outcomes, and identify areas where best practices could potentially be translated across countries and continents. It will also review the current landscape and penetration of CAR-T cell therapies and discuss challenges faced in the areas of clinical trials, commercial implementation and regulatory issues as well as successful practices and policies that countries in the process of starting CAR-T cell therapies can consider (economic aspects and costs included). Finally, this session will highlight areas of successful collaboration in registry research and clinical trials between the two locations in blood and marrow transplantation and cellular therapy, with discussion of opportunities for enhancing collaborative research in this area between the two continents.</p>
Concurrent 5 (Thurs 2/20)	<p>Infection after Transplant</p> <p>Infection remains a leading cause of non-relapse related mortality. New approaches to preventing and treating infection are needed. This session describes the contemporary landscape in occurrence and types of infection after HCT. How data relating to the individual's genetics, microbiome, resistome, and immune responses might be used to better characterize risk for infection will be discussed. The role of cellular therapies for prevention and treatment of serious infection will also be discussed.</p>		
Plenary 4 (Fri 2/21)	<p>ASTCT President's Symposium: Personalizing Survivorship Care in Transplant and Cell Therapy</p> <p>Late complications are a well-recognized sequelae of hematopoietic cell transplantation. Research has led to better understanding of the pathogenesis, risk factors, prevention and management of late effects. Many principles of post-transplant survivorship care can be applied to the nascent field of cell therapy. This session will review recent advances in transplantation late effects, focusing on current knowledge about biology of late complications following transplantation, the use of health technology tools to personalize survivorship care and facilitate self-management in transplant recipients, and the role of patient reported outcomes in research and clinical care. Examples of the application of these aspects of survivorship towards recipients of cellular therapies will be provided.</p>		