

# Behandlungsstrategien und Studien der SAL

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# Studienallianz Leukämie

Diese illustrative Abbildung wurde urheberrechtlichen Gründen entfernt.



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# SAL-Prinzip

- Studienplattform
- Backbone: Therapie-Handreichungen, AML-Register und –Biobank
- Flexible Studienteilnahme der beteiligten Zentren
- Kooperative Studienentwicklung und Nutzung von Register und Biobank
- Studiendurchführung über verschiedene Sponsoren innerhalb der SAL (z.B. Dresden, Heidelberg, Münster, Frankfurt, Marburg)
- AML-Studien mit zwei Zielsetzungen

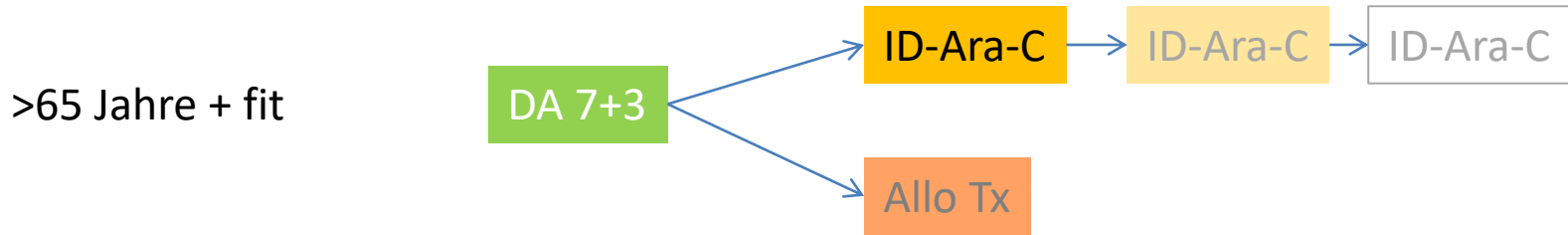
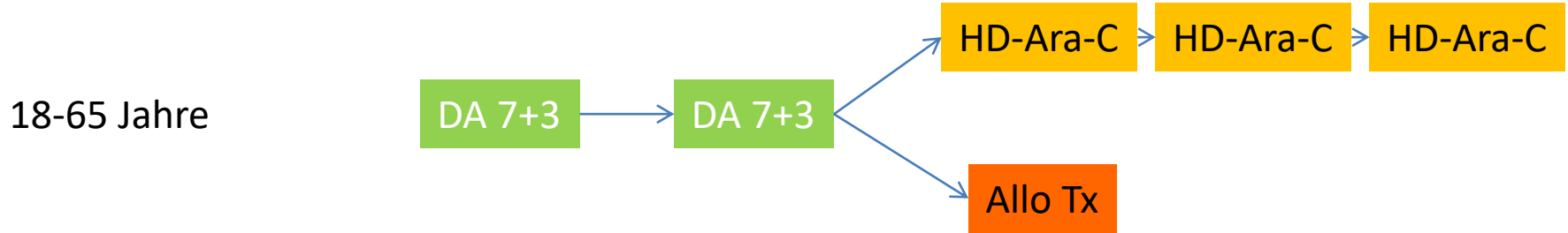


Therapieoptimierung

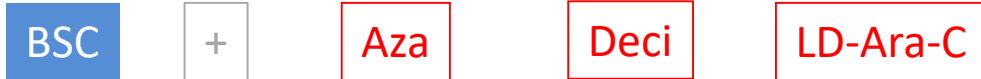


Neue Substanzen

# AML-Therapie-Prinzipien SAL



>65 Jahre + frail



### Induktion (7+3, DA)

Daunorubicin



Cytarabin



1

2

3

4

5

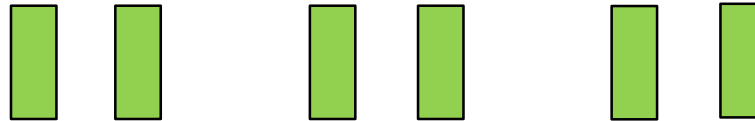
6

7

Tag

### Konsolidierung (HDAC)

Cytarabin



1

2

3

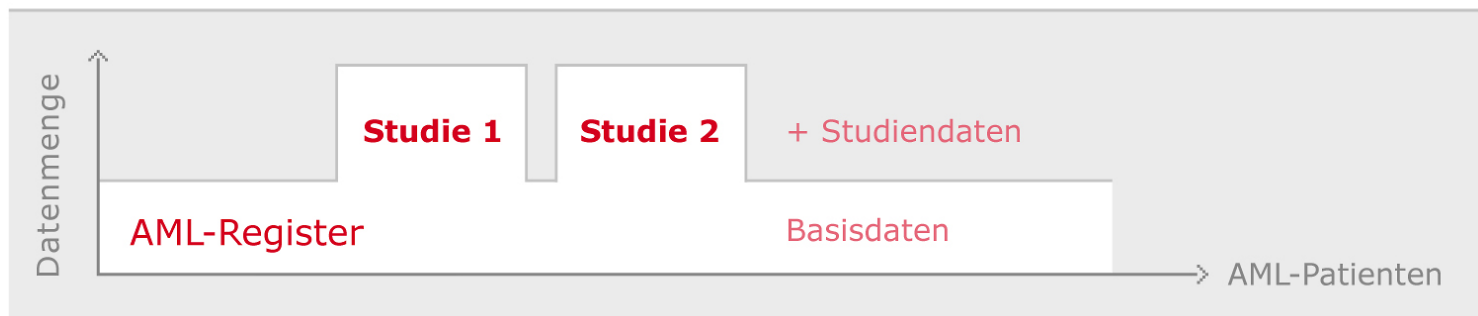
4

5

Tag

# AML-Register

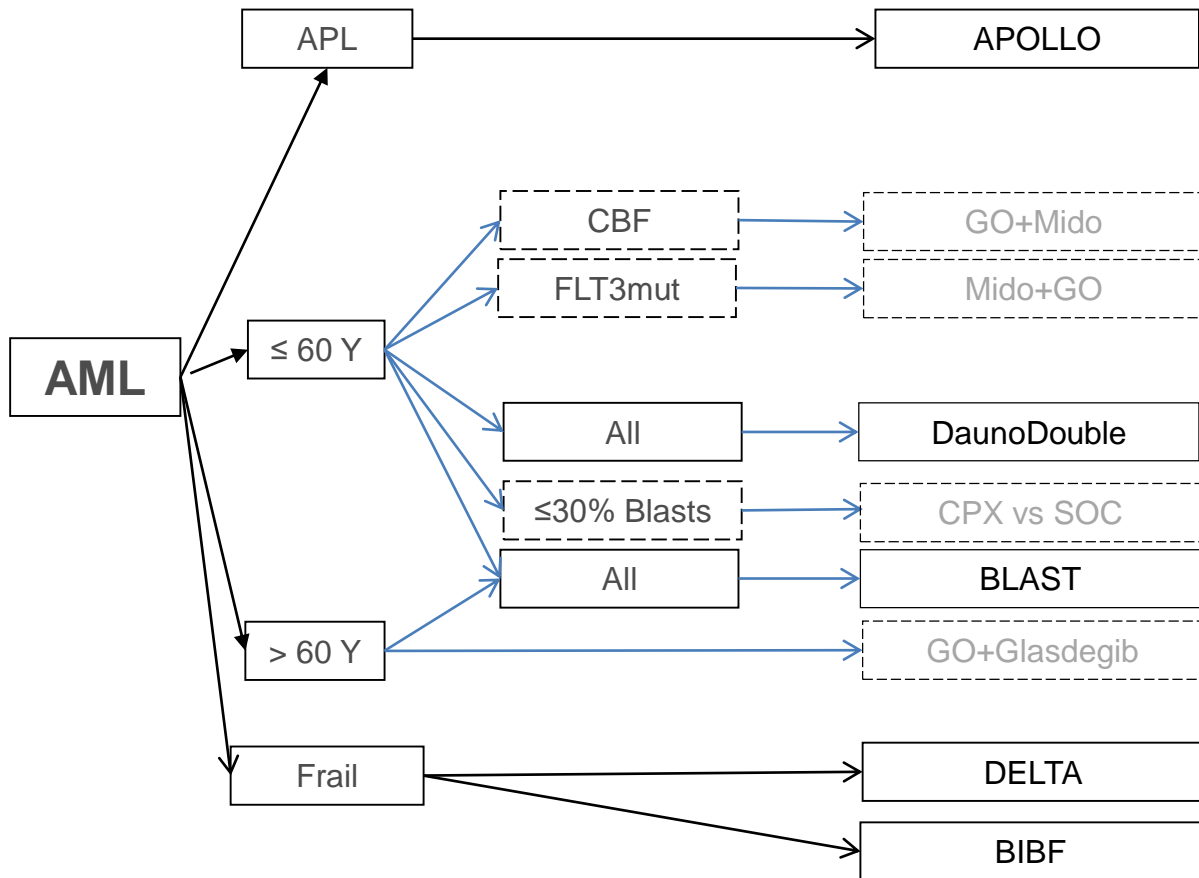
- Rekrutierungsstand per 20. März 2019
- 5529 Patienten
  - 40%  $\leq$  60 J
  - 60%  $>$  60 J



# Molekulare Diagnostik im Register

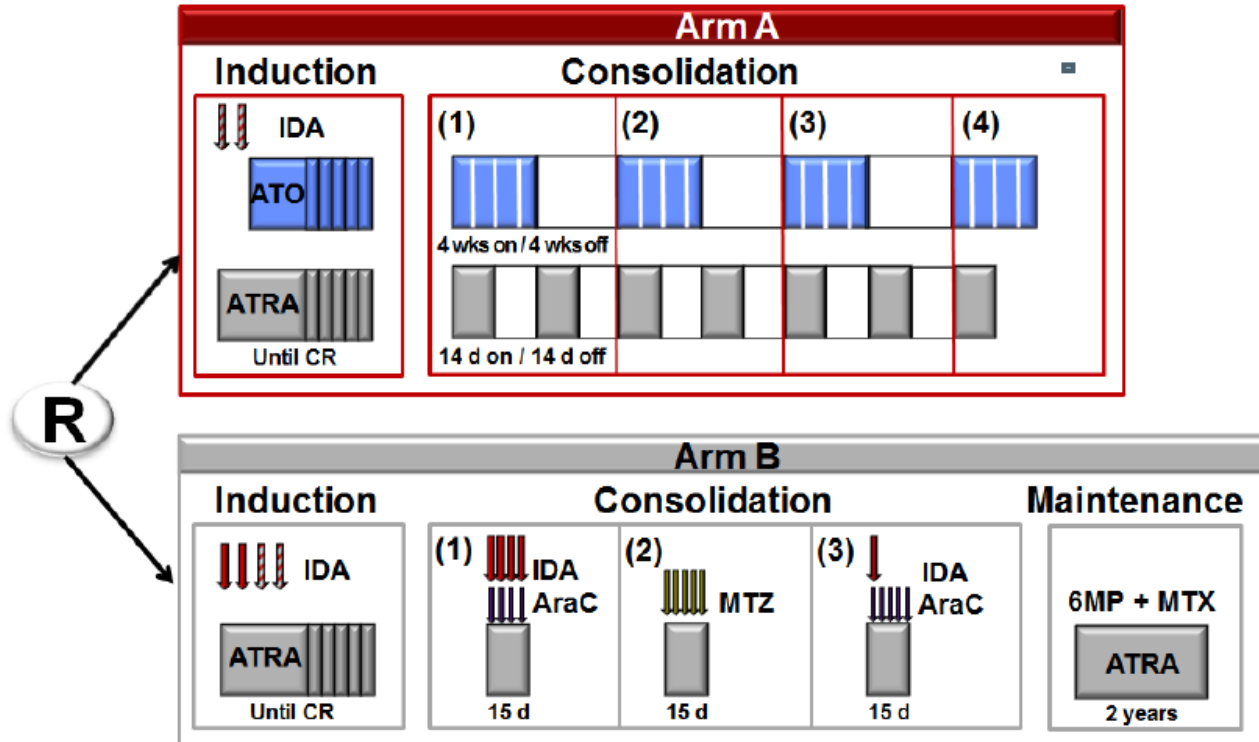
Risk category*	Genetic abnormality
Favorable	t(8;21)(q22;q22.1); <i>RUNX1-RUNX1T1</i> inv(16)(p13.1q22) or t(16;16)(p13.1;q22); <i>CBFB-MYH11</i> Mutated <i>NPM1</i> without <i>FLT3-ITD</i> or with <i>FLT3-ITD</i> <sup>low†</sup> Biallelic mutated <i>CEBPA</i>
Intermediate	Mutated <i>NPM1</i> and <i>FLT3-ITD</i> <sup>high†</sup> Wild-type <i>NPM1</i> without <i>FLT3-ITD</i> or with <i>FLT3-ITD</i> <sup>low†</sup> (without adverse-risk genetic lesions) t(9;11)(p21.3;q23.3); <i>MLLT3-KMT2A</i> ‡ Cytogenetic abnormalities not classified as favorable or adverse
Adverse	t(6;9)(p23;q34.1); <i>DEK-NUP214</i> t(v;11q23.3); <i>KMT2A</i> rearranged t(9;22)(q34.1;q11.2); <i>BCR-ABL1</i> inv(3)(q21.3q26.2) or t(3;3)(q21.3;q26.2); <i>GATA2,MECOM(EVI1)</i> -5 or del(5q); -7; -17/abn(17p) Complex karyotype,§ monosomal karyotypell Wild-type <i>NPM1</i> and <i>FLT3-ITD</i> <sup>high†</sup> Mutated <i>RUNX1</i> ¶ Mutated <i>ASXL1</i> ¶ Mutated <i>TP53</i> #

# SAL-Studien-Portfolio First-Line

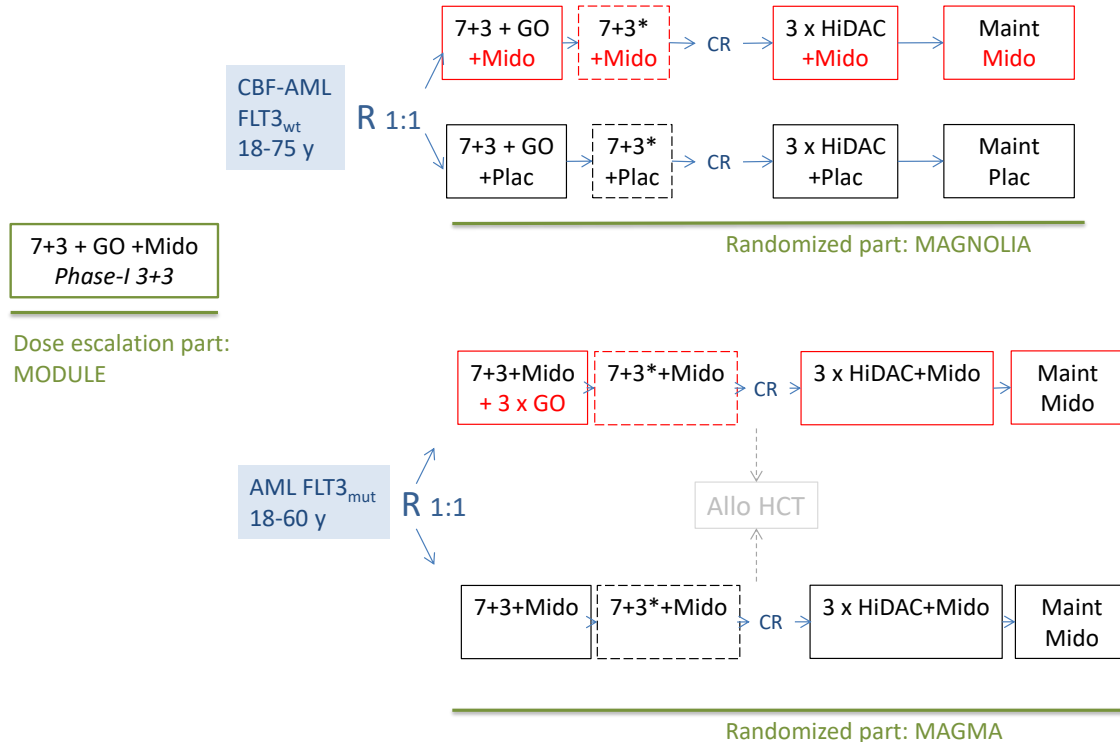




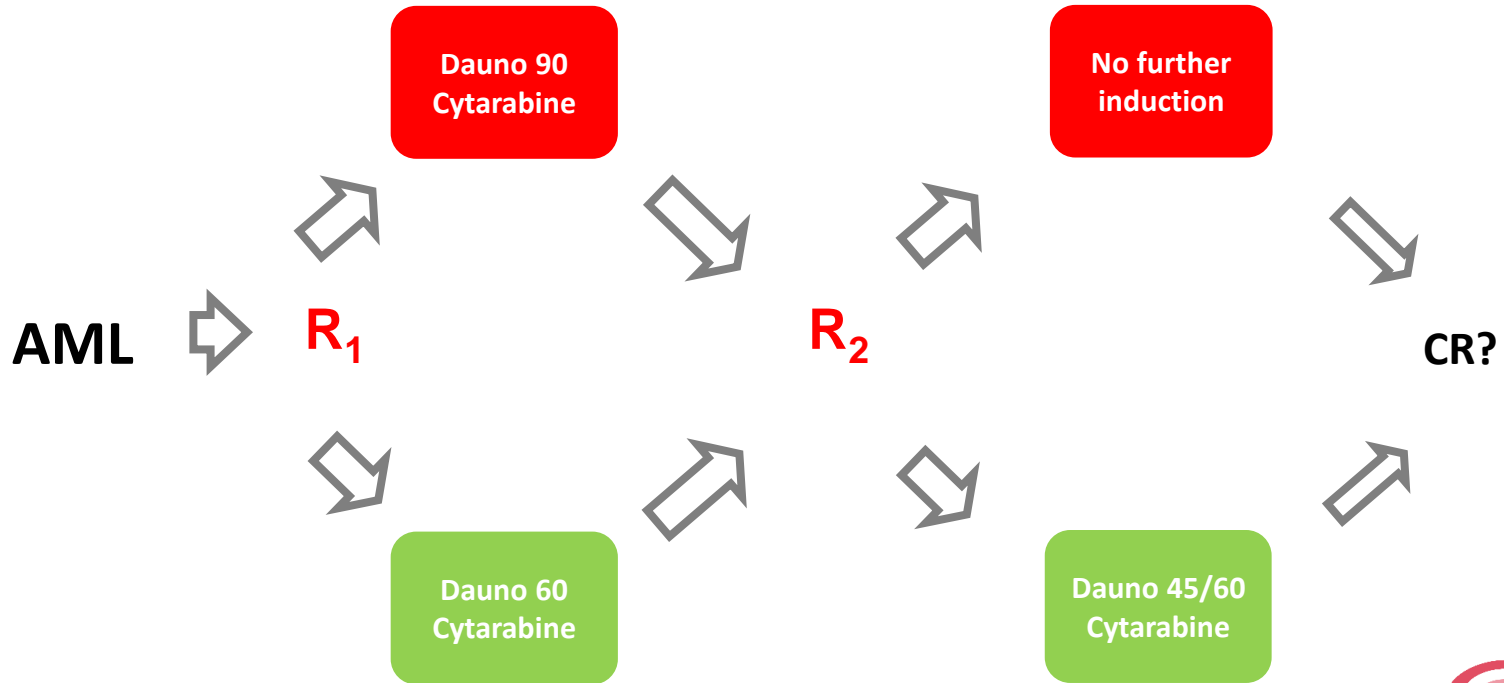
# APOLLO: Arsen versus AIDA bei Hochrisiko-APL



# Midostaurin plus GO in CBF AML und FLT3<sub>mut</sub> AML: SAL MOSAIC-Studie



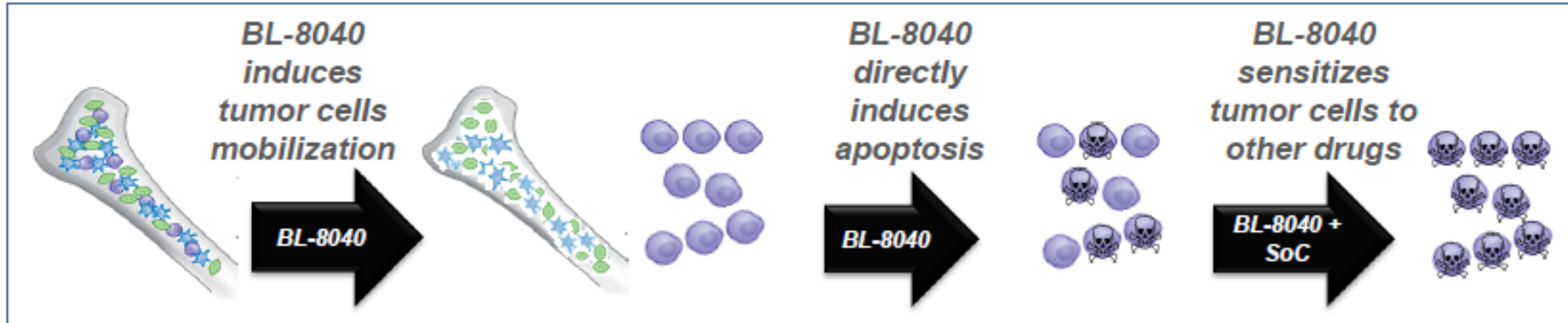
# DaunoDouble: 7+3 mit 90 oder 60 Dauno und Doppel- oder Einfach-Induktion?



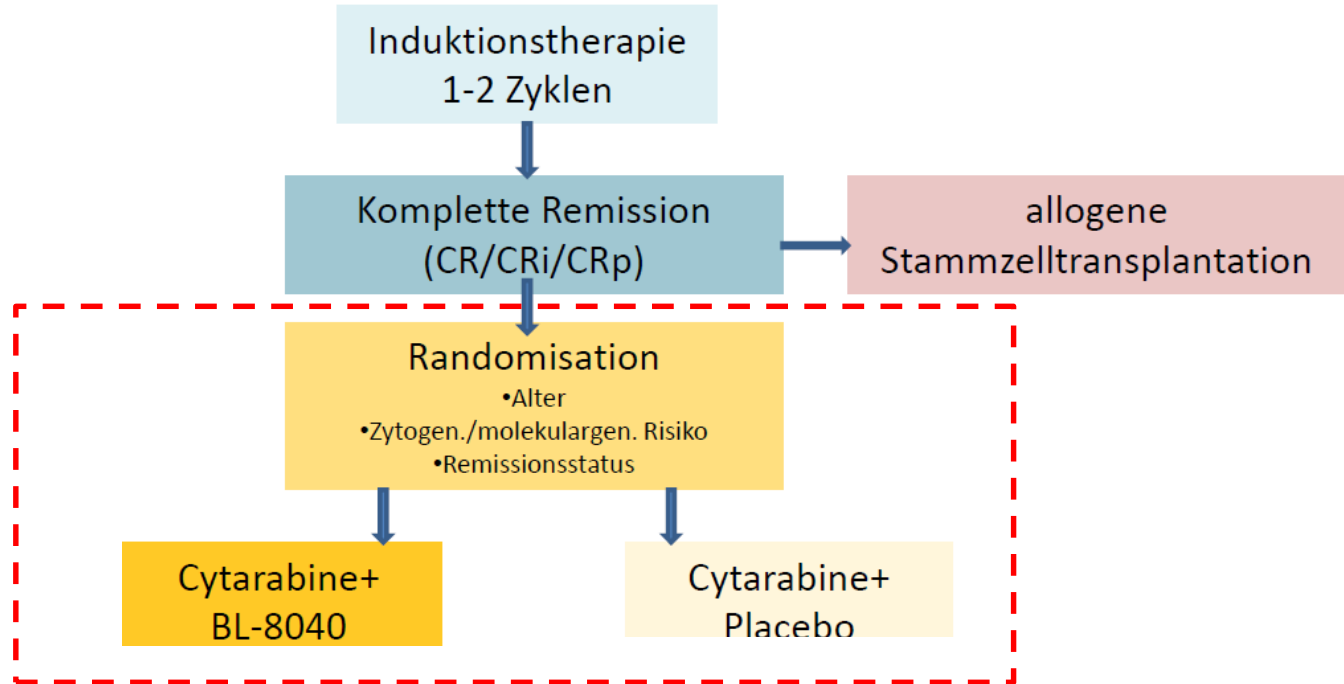
PI: C. Röllig

# Blast-Studie: CXCR4-Inhibition in Konsolidierung

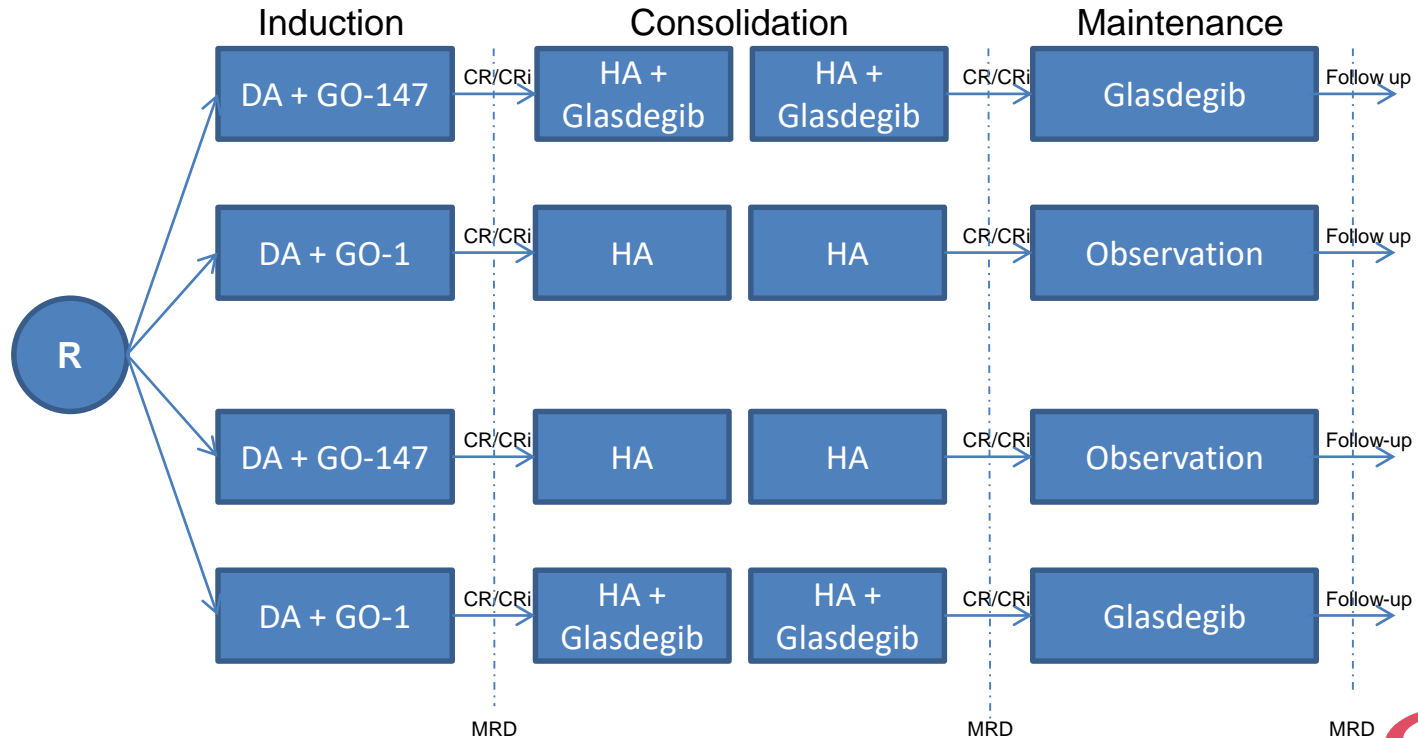
Doppelblinde, Placebo-kontrollierte, randomisierte, multizentrische Phase II Studie zur Effektivitätsbeurteilung von BL-8040 in der Konsolidierungstherapie bei AML



# Blast-Studie: CXCR4-Inhibition in Konsolidierung



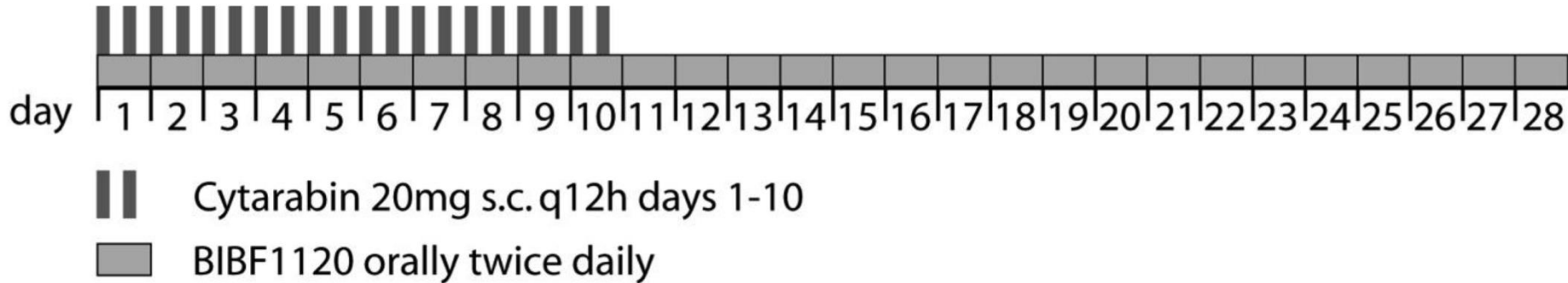
# GnG-Studie: Gemtuzumab Ozogamicin und Glasdegib in AML >60 Jahre



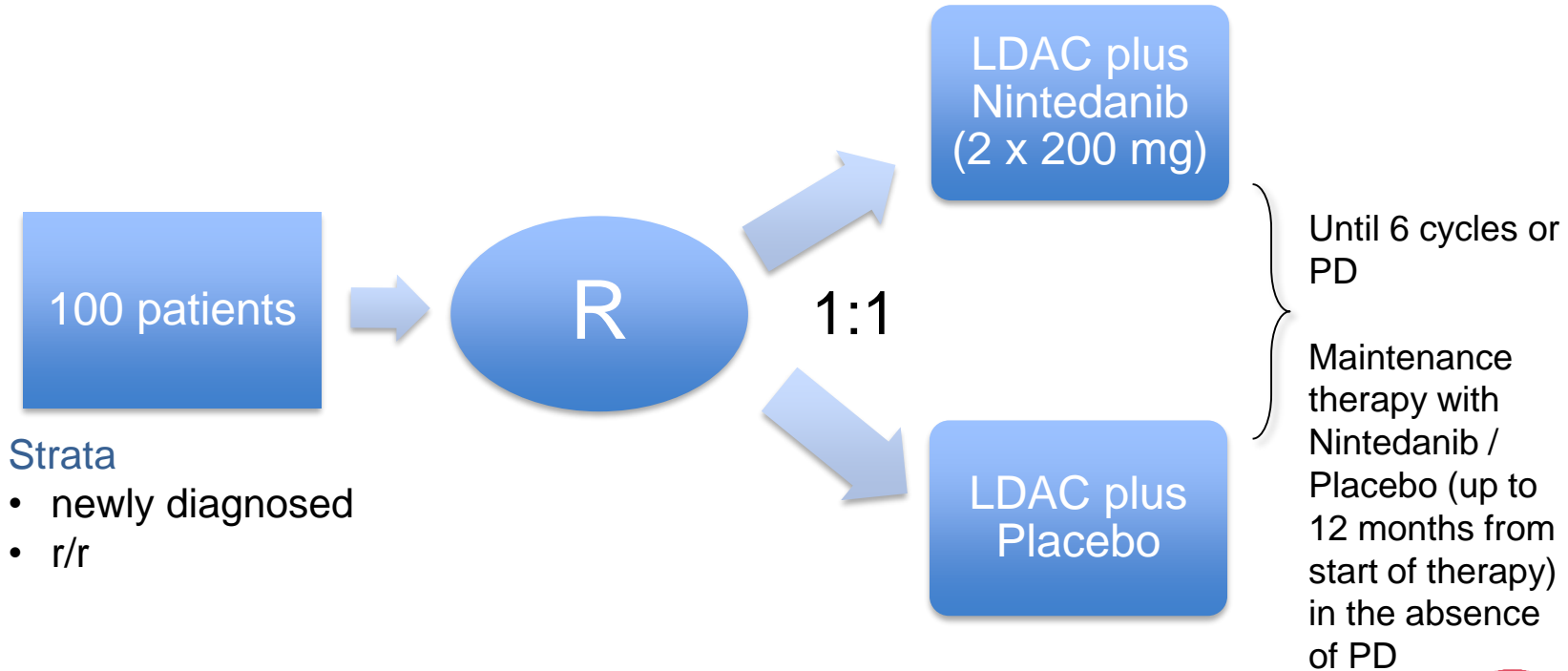
PI: C. Müller-Tidow, R. Schlenk

# Multikinase-Inhibition mit Nintedanib (BIBF1120): Antileukämisch wirksam bei AML

## Treatment Plan:



# Nintedanib + LDAC in frail AML: BIBF-Studie



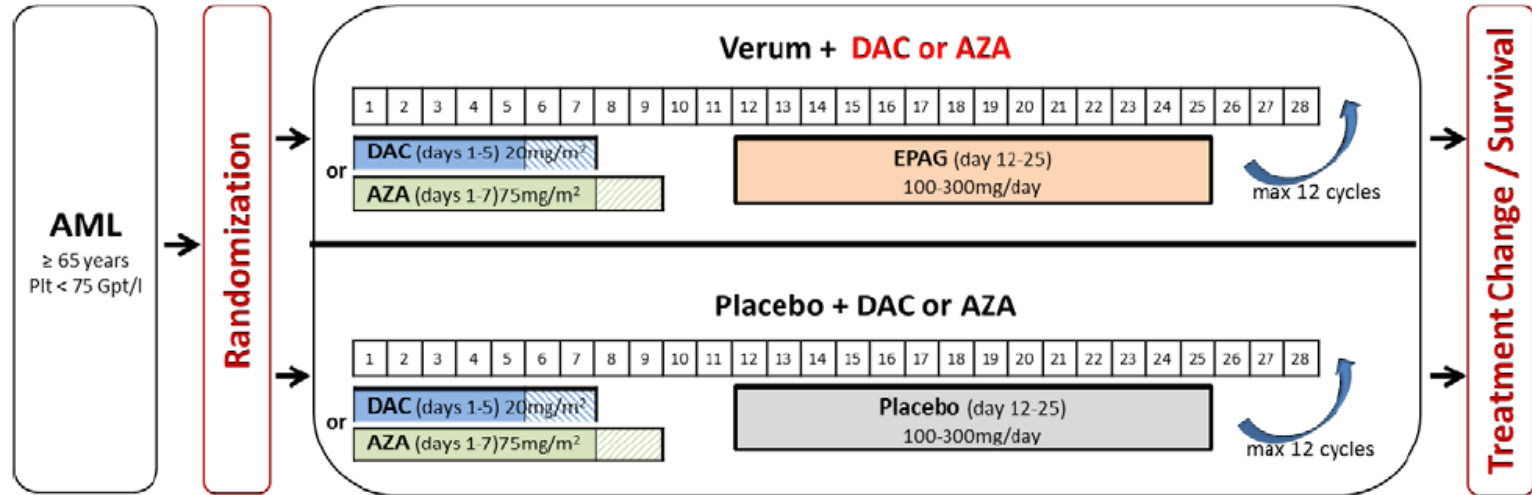
## Strata

- newly diagnosed
- r/r

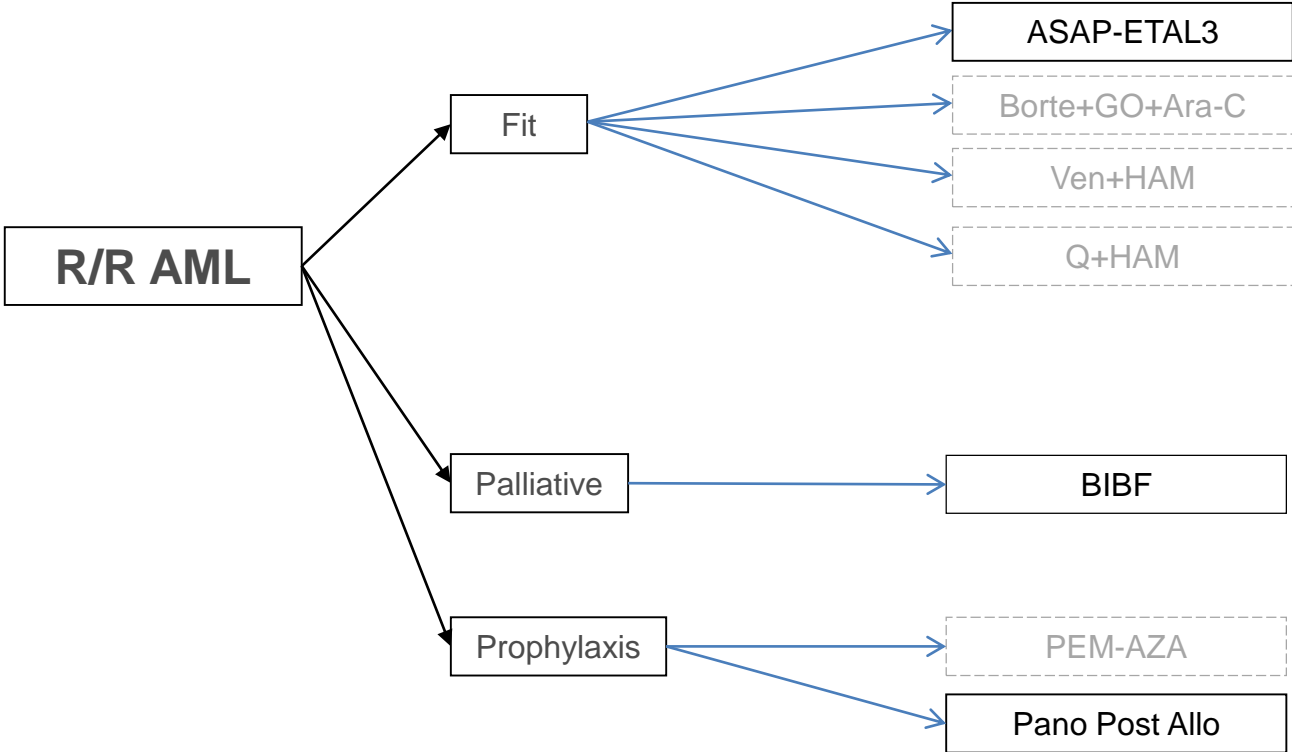
PI: C. Schliemann



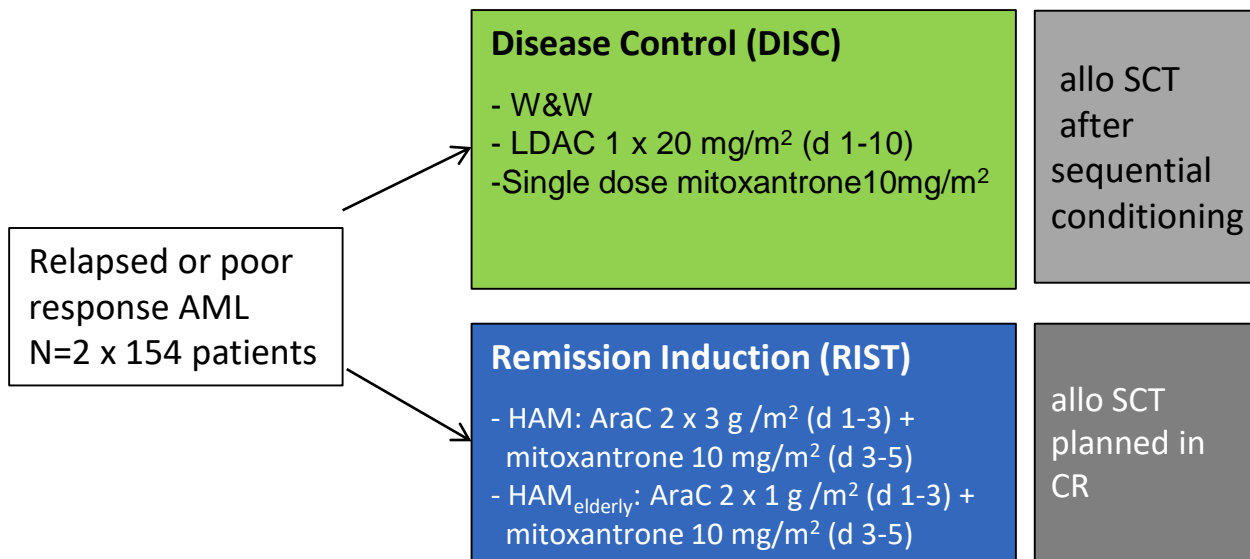
# Antileukämisch und anti-thrombopen: Elthrombopag + HMA 1L in frail AML: DELTA-Studie



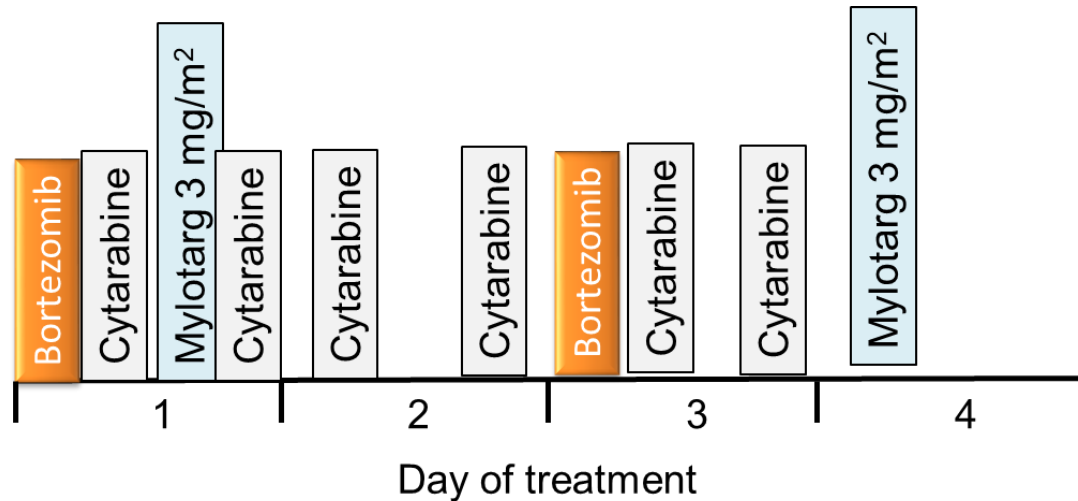
# SAL-Studien-Portfolio Rezidiv



# ASAP/ETAL-3: Schnelle allogene SZT oder vorherige Re-Induktion?

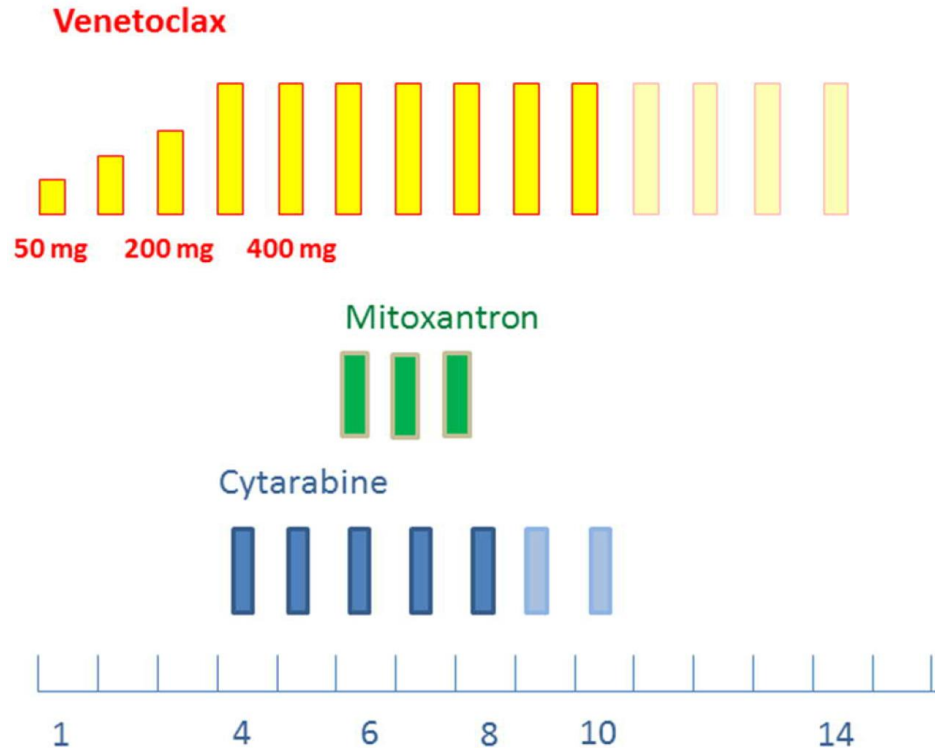


# TEAM Studie: EZH2-Hemmung mit Bortezomib plus GO und HiDAC in fitten r/r AML



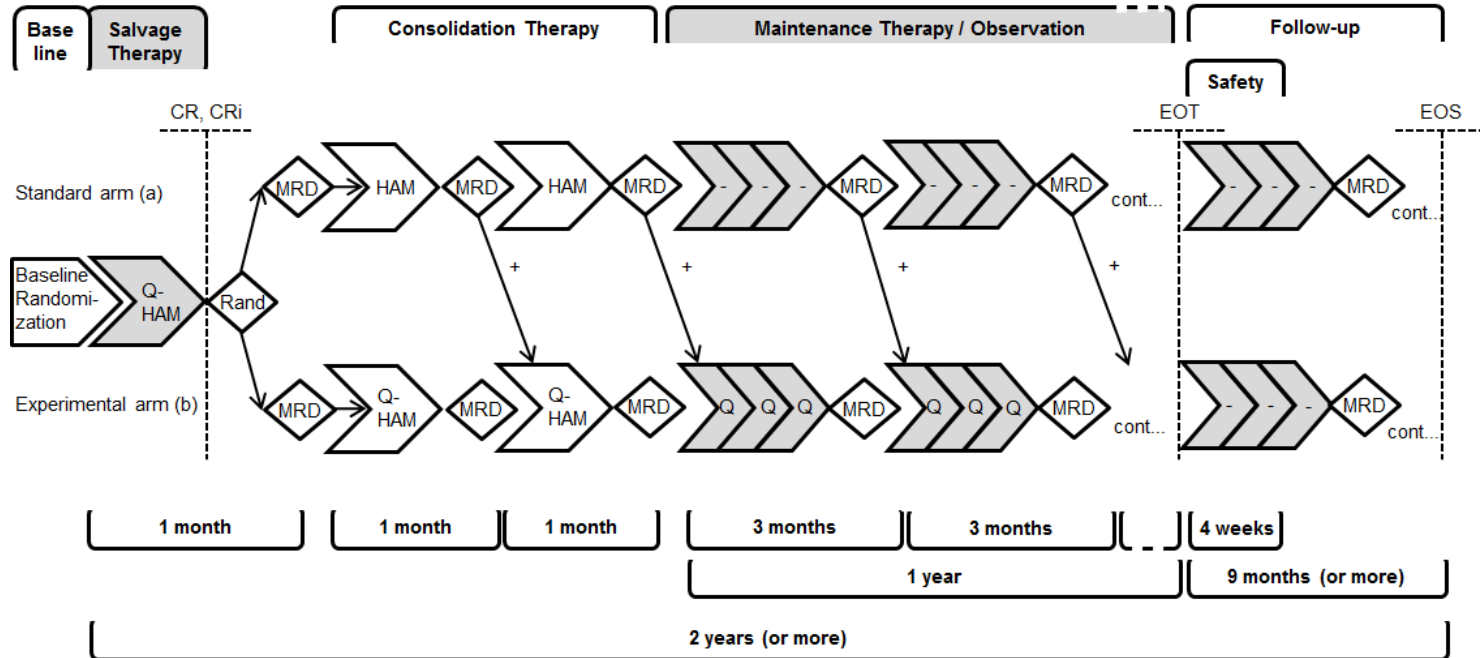
PI: C. Müller-Tidow

# RELAX-Studie: Venetoclax plus HAM in fitten r/r AML



PI: C. Röllig

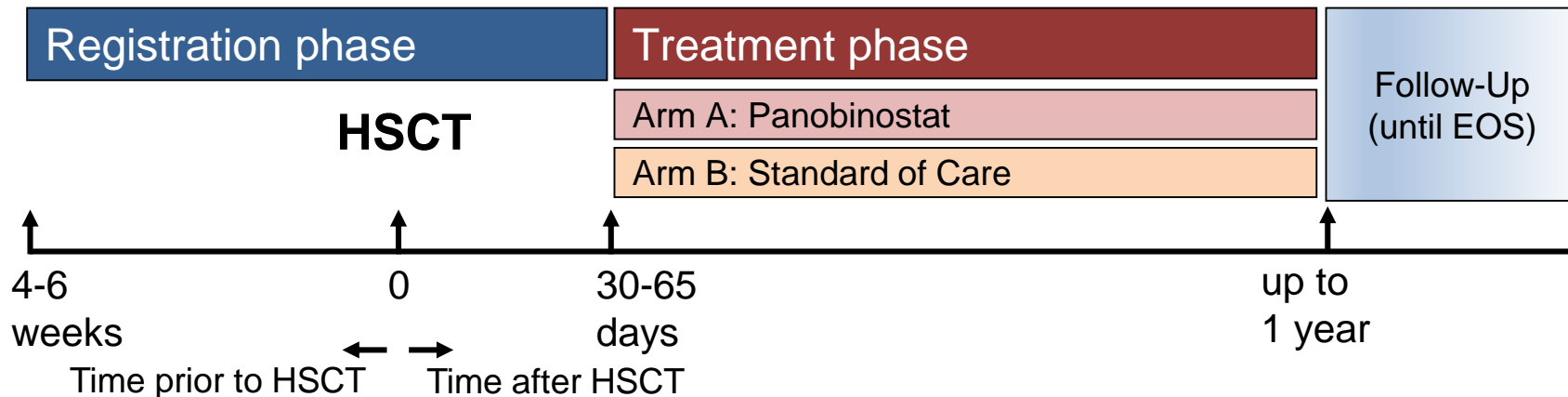
# Q-HAM Trial: Quizartinib plus HiDAC plus Mitoxantrone in FLT3-ITD AML



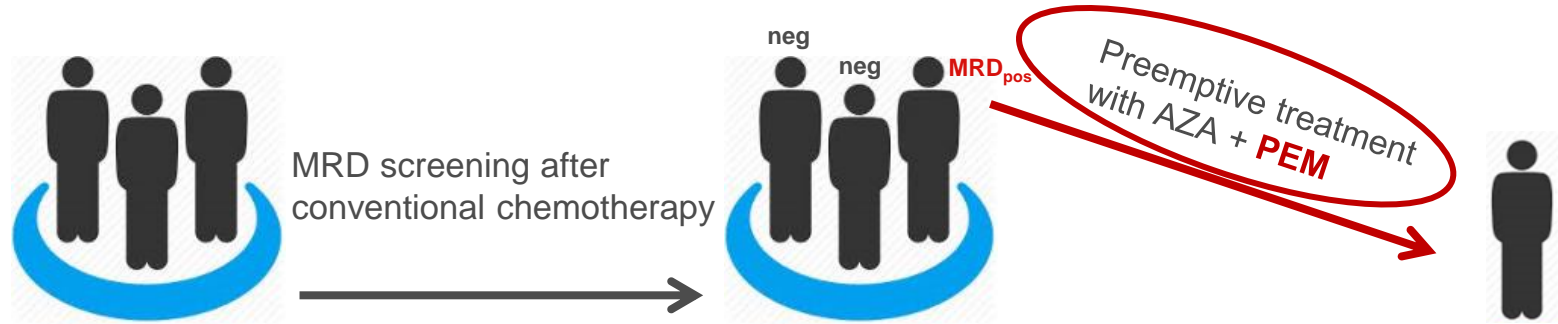
PI: C. Müller-Tidow, R. Schlenk

# ETAL-4 / HOVON-145: Panobinostat Prophylaxis post allo SCT in High-risk AML

- Patients: allo SCT in CR
- High relapse risk (e.g. adverse risk, MRD+, r/r AML)



# PemAza-Studie: Pembrolizumab plus Azacitidin als Präemptive MRD-basierte Rezidivtherapie

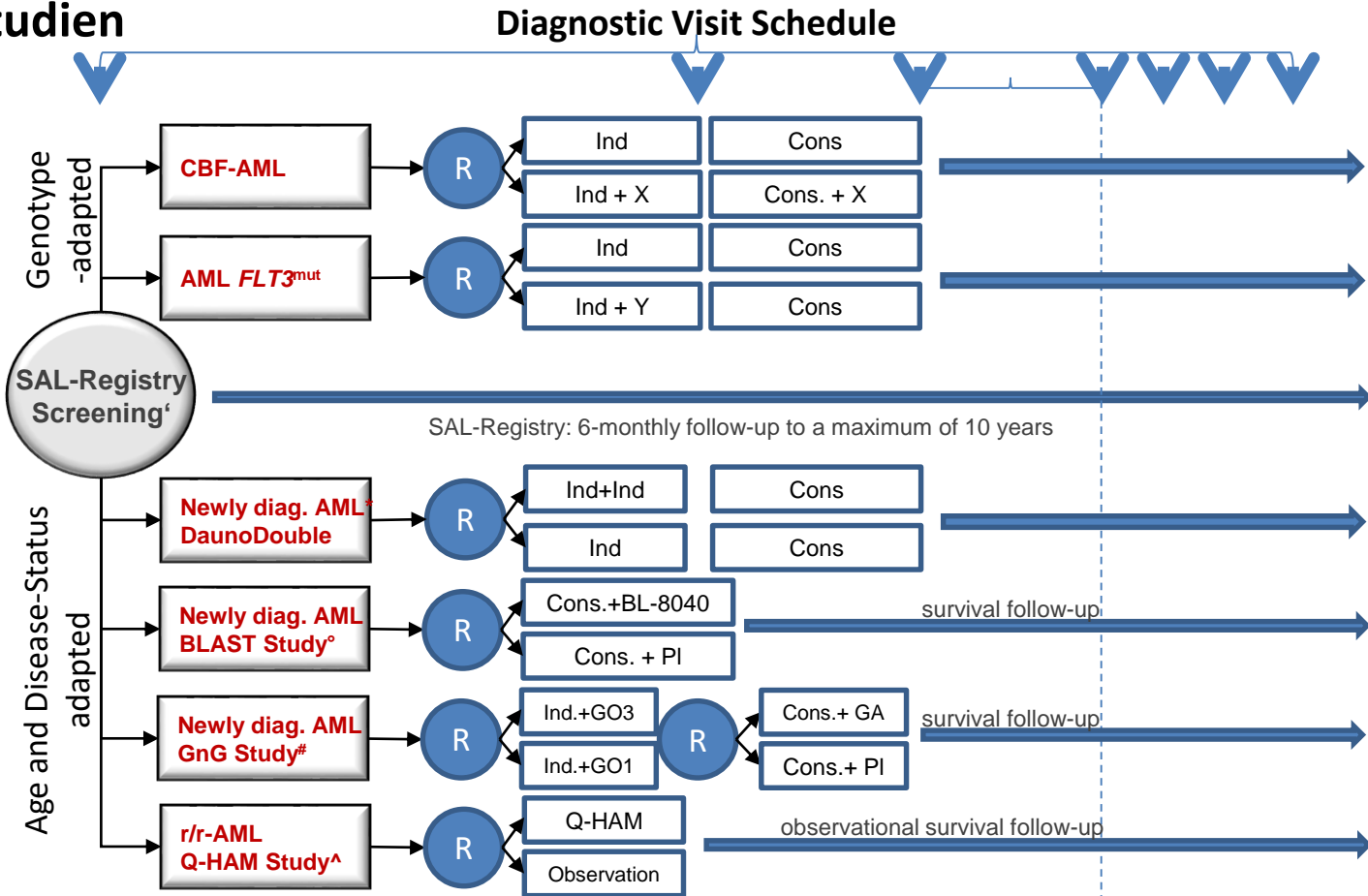


## Primary EP:

- Proportion of relapse-free patients after 24 weeks of combination treatment (after 6 cycles of AZA for 7 d (5+2) Q4W and 8 PEM infusions Q3W)



# PERDAM: Systematische Evaluation von Flow-MRD in allen randomisierten SAL-Studien





# Danke an alle Zentren!



Jena

Hradec Králové

Olomouc