

## IMPORTANT DATES 2009

13-15 February, 2009 - Mandelieu, France

ESH Conference  
**HAEMATOLOGICAL ASPECTS OF AUTO-IMMUNE DISEASES**  
Chairs: D. Provan, J. Semple, A. Newland, R. Stasi

3-5 April, 2009 - Mandelieu, France

ESH-EHA Scientific Workshop  
**LEUKEMIC AND CANCER STEM CELLS**  
Chairs: C. Chomienne, D. Bonnet, P. Valent, D. Louvard

15-17 May, 2009 - Tallinn, Estonia

ESH-EHA Hematology Tutorial (Type II)  
Diagnostic Work-Up of Hematological Malignancies  
**FOCUS ON LYMPHOID MALIGNANCIES**  
Chairs: E. Laane, E. Kimby, G. Zini, R. Foà

25-29 May, 2009 - Latimer (London), United Kingdom

ESH-EBMT Training Course  
**HAEMOPOIETIC STEM CELL TRANSPLANTATION**  
Chairs: J. Apperley, E. Gluckman,  
E. Carreras, A. Gratwohl, T. Masszi

5-7 June, 2009 - Helsinki, Finland

ESH Conference  
**ANGIOGENESIS**  
Chairs: K. Alitalo, A. Birkfalvi, Ch. Betsholtz, A. Eichmann,  
A. Harris, C. Rüegg, G. Tobelem

2-4 July, 2009 - Albufeira, Portugal

ESH Conference  
**CLINICAL MANAGEMENT OF DISORDERS OF IRON METABOLISM**  
Chairs: Ph. Beris, M. Cappellini, J. Porter, A. Taher

11-13 September, 2009 - Bordeaux, France

ESH International Conference  
**CHRONIC MYELOID LEUKAEMIA-Biological Basis of Therapy**  
Organizers: J.M. Goldman, J. Cortes,  
T. Hughes, T. Holyoake, D. Perrotti, J. Reiffers

October, 2009 - Venue to be announced

ESH-EUROCORD-NETCORD International Conference  
**CORD BLOOD**  
Chairs: E. Gluckman, J. Garcia

22-25 October, 2009 - Mandelieu, France

ESH Conference  
**MYELODYSPLASTIC SYNDROMES**  
Chairs: E. Hellström-Lindberg, M. Cazzola, P. Fenaux

5-8 November, 2009 - Mandelieu, France

ESH-EHA Scientific Workshop  
**INNOVATIVE THERAPIES FOR RED CELL  
AND IRON RELATED DISORDERS**  
Organizing Committee: C. Camaschella, E. Gluckman,  
Ph. Leboulch, C. Beaumont, M. Narla, Y. Beuzard

6-8 November, 2009 - Vienna, Austria

ESH-EHA Annual Diagnostic Work-Up of  
Hematological Malignancies  
**FOCUS ON CHRONIC DISEASES**  
Chairs: B. Bain, R. Foà, G. Zini

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20<sup>TH</sup> ANNIVERSARY CELEBRATION OF  
THE FIRST CORD BLOOD TRANSPLANT

## International conference: Biology and clinical applications of cord blood cells

Chairs: J. Garcia, E. Gluckman, J. Kurtzberg, EJ. Shpall

Mandelieu, France/16-19 October, 2008

See the webcast event at: [www.esh.org](http://www.esh.org) / [www.eurocord-ed.org](http://www.eurocord-ed.org)

This year marks the 20<sup>th</sup> anniversary of the first cord blood transplantation and the 10<sup>th</sup> anniversary of Netcord International.

The international conference on the biology and clinical applications of cord blood cells held in Mandelieu, in the south of France, on October 16-19 was organized to celebrate this anniversary. The conference was a scientific tribute to the rapid development of the field. Its opening ceremony was a highly emotional experience that brought together the patients and scientists who pioneered the field of cord blood transplantation and the over 300 scientists, clinicians and corporate partners from all over the world who are now actively engaged in the field.

The first cord blood transplant was performed on October 6, 1998 and published in the New England Journal of Medicine by Gluckman E, Broxmeyer HE, Auerbach AD, et al.: *Hemopoietic reconstitution in a patient with Fanconi's anemia by means of umbilical-cord blood from an HLA-identical sibling. N Engl J Med 1989, 321:1174-1178.*

Today more than 400,000 cord blood units for unrelated allogeneic use have been collected throughout the world in more than 107 cord blood banks and more than 20,000 patients have been treated by cord blood transplant for various haematological diseases.



The role of the principal pioneers in the field of cord blood was acknowledged during the conference's opening ceremony.

The ceremony was opened by Madame Emmanuelle Prada-Bordenave, Director General of the French Biomedicine Agency, who announced a government plan to increase the number of cord blood banks in France to rapidly achieve a collection of 30,000 units.

Hal E Broxmeyer from Indiana University was the first to study haemopoietic cord blood progenitor cells and to show that a single cord blood contains enough haemopoietic progenitors to transplant a patient. Arleen D Auerbach, a geneticist at Rockefeller Institute, identified a mother pregnant with a non-affected identical sibling of a previous child born with Fanconi anaemia.

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**International conference: Biology and clinical applications of cord blood cells**



Cord blood was collected and cryopreserved at birth. Eliane Gluckman from Hôpital Saint Louis, an expert on bone marrow transplant for Fanconi anaemia, accepted to transplant this patient in Paris.

Matthew Farrow, the recipient of this first cord blood transplant, was present at the opening ceremony, proof of the importance of this therapeutic approach. Matthew is now 25 years old. He and his wife accepted to leave their child for a few days in order to be present in Mandelieu. Several other patients also attended the meeting. Among them was Guillaume, the first child to receive an unrelated cord blood transplant in the experimental cord blood bank at Hôpital Saint Louis, in 1994.



Many other pioneers were acknowledged at the ceremony for the major contributions they made to the clinical development of cord blood transplantation and banking in Europe, Japan and the USA. It was an opportunity for the 300 member audience to hear them share their souvenirs of the first explorations and attempts to develop cord blood transplantation.

The conference itself began with a session on cord blood banking, with the description of the Netcord organisation (Joan Garcia, Barcelona) and of the international exchanges between Netcord and the National Marrow Donor Program (Michael Boo, Minneapolis).

The activities of unrelated cord blood banks in Japan, Mexico and London were reported, and Bertram Lubin (Oakland) presented the activity of the American sibling cord blood bank. Collecting cord blood for autologous use is controversial; diverse opinions were presented and although no real consensus was reached, there was general agreement on the need for

strictly applied regulations for the use of cord blood in the autologous setting. These should include the same high quality standards that are used for accreditation of allogeneic banks, transparency of inventory and activities, and absence of false or misleading publicity.

A major issue for future clinical applications of cord blood in the field of regenerative medicine is the ability to isolate stem cells other than haemopoietic stem cells, from cord blood or the placenta. Several speakers showed that they were able to isolate embryonic-like stem cells from cord blood and that these cells were able to regenerate cells in the three foetal layers: endoderm, mesoderm and ectoderm. These cells can be cultivated and manipulated to give rise to several tissues such as brain, liver, pancreas, muscle, vessels, heart etc. Mesenchymal stem cells can also be isolated from cord, Wharton jelly and placenta. Further studies, for example on techniques of collection and preservation in GMP conditions, functional properties and potential teratogenesis are needed before entering into clinical trials. All of these aspects were covered in this session where Mervin C Yoder (Indianapolis) redefined human circulating endothelial progenitor cells, Peter Wernet (Düsseldorf) gave a talk on neuronal progenitors and Joanne Kurtzberg (Durham) presented the basis of the first clinical trial for infants born with brain injury.

It is well known that the immune system is immature at birth. This property gives an advantage to cord blood cells as compared to bone marrow cells because the use of cord blood 1) decreases the risk of graft versus host disease after allogeneic related and unrelated cord blood transplant and 2) authorizes the use of partially mismatched transplants, thus increasing the probability of finding an appropriate donor.

Many questions remain. The immunological properties of cord blood were compared to those of adult cells by Fred Falkenburg (Leiden). Interestingly, two talks were presented on the use of cord blood-derived T cells expressing chimeric antigen receptor to target B cell malignancies (Gianpietro Dotti, Houston) and to derive virus specific T cell lines (Catherine

Bollard, Houston). Both studies underscore the possibility of freezing an aliquot of cord blood lymphocytes to generate cell lines targeting viruses or tumours.

Criteria of donor choice for allogeneic unrelated cord blood transplants were discussed extensively. Most authors agree that the major criteria for choice is a high number of CD34+ cells in the transplant; but the role of HLA in engraftment and severe GVH is increasingly evident. This effect is partially abolished when the transplant is indicated for a malignant disease because an increased number of HLA mismatches decreases the risk of leukaemic relapse resulting in improved survival. This is not the case in non malignant diseases where a high number of cells are required with the best possible HLA matching. In leukaemia, it seems that mismatching for KIR in the GVH direction decreases the risk of relapse (Roel Willemze, Leiden).

Many questions remain regarding the required level of resolution of HLA typing. Is matching for HLA class I more important than class II? Is it important to perform HLA-C typing? Is one HLA mismatched unrelated bone marrow donor better than a one HLA mismatched unrelated cord blood donor?



*E. Prada-Bordenave, (Director General of the French Biomedicine Agency), E. Gluckman*



Many of these questions will be answered in the future, thanks to the international collaboration between Eurocord, Netcord, CIBMTR and NMDP. The principal clinical studies reported at the meeting showed that results of cord blood transplant in children and adults compare favourably with matched unrelated bone marrow or related haplo mismatched peripheral or bone marrow transplants in various indications. Results of the family cord blood bank in Oakland show that it is feasible to collect cord blood in families with a child affected by a haematological disease; the best indications were haemoglobinopathies, including sickle cell disease and thalassaemia. New protocols to facilitate engraftment were also presented. Notch signalling was shown to interfere with haemopoietic stem cell differentiation and preliminary clinical results showed very interesting findings (Irwin Bernstein, Seattle).

Encouraging preliminary results were shown with other new techniques including ex vivo expansion, double cord blood transplant, intra bone infusion. Most were based on research on homing and mechanisms of engraftment elegantly described by Hal E Broxmeyer (Indianapolis) and Tsvee Lapidot (Rehovot).

The conference was attended by participants from 40 countries in the beautiful setting of the French Riviera. It was supported by unrestricted educational grants from Biosafe, Cord Blood Registry, StemCyte, Cord:Use, GE Healthcare, Air Liquide, Cryo-Save, MacoPharma, SituGen, ThermoGenesis.

### Comments from the speakers

*The meeting was fabulous. Thank you very much for the invitation and hospitality.*  
**Hal Broxmeyer**

*It was great. Thanks again to everyone.*  
**John Wagner**

*Thank you for the wonderful celebration and thank you for organizing a most interesting program.*  
*Above all, thank you for being our ELIANE!*  
**Pablo Rubinstein**

*Back home I want to thank you for a great meeting. It was really excellent, I learned a lot and it was wonderful to see so many old friends.*  
*All the best and à bientôt.*  
**Jon Van Rood**

*Congratulations on an excellent cord blood conference! The scientific program and the facilities were both excellent and being in the South of France didn't hurt either.*  
**Larry Petz**



From left to right  
Front row: J. Kurtzberg, M. Farrow, A. Auerbach, E. Gluckman, G. Billiard  
Middle row: S. Kato, H. Broxmeyer, M. Contreras  
Back row: J. Wagner, P. Rebulla, J.J. Van Rood, P. Wernet, P. Rubinstein

## A NEW EUROPEAN COMMISSION PROJECT

### EUROCORD-ED: A On-Line CME programme in Cord Blood Technology and Transplantation

The European Commission has awarded a grant to support the development of a multilingual on-line continuing training programme for all the actors involved in the field of cord blood technology and transplantation.

The EUROCORD-ED Network aims to develop a focused, interdisciplinary, multilingual, on-line curriculum on the scientific, technical, clinical, regulatory and ethical aspects of cord blood - easily accessible at a time, place and language (initially English, Spanish, French, Italian) convenient to the user. It will be a cost-effective tool to pool knowledge and share experience between the field's vocational actors.

Visit the new EUROCORD-ED website: [www.eurocord-ed.org](http://www.eurocord-ed.org)

When babies are born, the umbilical cord is generally discarded. This is because pregnant women and many of their doctors are unaware that science has demonstrated that cord blood cells have immense therapeutic value. Today, they save many lives. Cord blood is a safe, painless and ethical source of stem cells. The EUROCORD-ED project aims to inform and educate scientists, doctors and all the vocational actors involved in the field. It also aims to inform future parents, and to support health policy decision-makers.

Recent progress has revealed umbilical cord blood as a unique, safe and ethical source of stem cells for therapeutic use in many clinical settings of socio-economic importance. Cord blood technology is evolving rapidly.

This scientific innovation underscores the need for training and increased communication between the actors involved in this multidisciplinary field: laboratory scientists, technicians, clinicians, transplant physicians, obstetricians, midwives and biotechnology companies involved in banking, research, clinical analysis of cord blood and ICT (internet communication technology).

In addition, the area has quickly become highly regulated on a par with the pharmaceutical industry. Directive 2004/23/EC established stringent standards for the donation, procurement, testing, processing, preservation, storage and distribution of umbilical cord blood. Directive 2006/17/EC laid down additional technical requirements and Directive 2006/86/EC laid down traceability

requirements, notification of serious adverse reactions and events and certain technical requirements for the coding, processing, preservation, storage and distribution of umbilical cord blood. All establishments involved in cord blood processing now need to be licensed and people need to be trained in the requirements of the Directives and Good Manufacturing Practice (GMP).

Training is important to ensure pan-European harmonization of knowledge and skills and to guarantee the uniform implementation of quality control standards and EU directives. This project will build on previous European Commission grants related to training, mobility and quality control in the healthcare setting. It will also contribute to enhance the implementation of the EU Directives on Tissue and Cells.



**Partner 1**  
Eliane Gluckman  
Eurocord, Paris, France

**Partner 2**  
Didi Jasmin  
ESH, Paris, France

**Partner 3**  
Dietger Niederwieser  
EBMT, Barcelona, Spain

**Partner 4**  
Willem E. Fibbe  
EHA, Rotterdam, The Netherlands

**Partner 5**  
Joan Garcia  
Netcord, Barcelona, Spain

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George Uzan  
Inserm, Villejuif, France

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**Partner 10**  
Tamas Masszi  
MHTT, Budapest, Hungary

**Partner 11**  
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Isabelle Rodde Astier  
Macoproductions, Tourcoing, France

**Partner 15**  
Vanessa Hanifa  
Alcimed, Paris, France



## A NEW EUROPEAN COMMISSION PROJECT

### EUROCORD-ED aims to:

- Connect and provide comprehensive, interdisciplinary training for the many actors involved in the field of cord blood technology
- Facilitate access to high-level training at a time, place and language convenient to the User
- Train trainers and provide European academic institutions with training tools for use within their own institutions
- Improve the understanding and implementation of ethical and regulatory issues, including the European Tissue Directive
- Spread best practice to all European centres through the dissemination of information on quality standards, quality control and accreditation procedures (JACIE/NETCORD, Good Manufacturing Practice)
- Promote the development of accredited continuing education through EHA-CME
- Contribute to pan-European harmonization of professional competence in the field of cord blood technology and transplantation
- Promote professional mobility in the field throughout the European Union and its associated states
- Contribute to accelerate translational research, in the interest of patients
- Support the development of the European biotechnology industry
- Inform regional/national/European policy decision-makers
- Develop a reliable source of information for the general public
- Impact on the quality and international visibility of the European education and research areas.

## ANOTHER NEW EUROPEAN COMMISSION PROJECT

### THE EUROPEAN NETWORK FOR RARE AND CONGENITAL ANAEMIAS

**Patricia Aguilar Martinez,**  
CHU de Montpellier, France

**Joan Lluís Vives Corrons**  
Hospital Clinic i Provincial de Barcelona, Spain

**ENERCA** is the first **E**uropean **N**etwork for studying **R**are and **C**ongenital **A**naemias. The project is co-funded by the European Commission (DG-SANCO program) and focuses on the epidemiology of infrequent or rare anaemias. Rare anaemias form part of the so-called "rare diseases" which incidence in the population is less than 5 cases per 10,000 births. The main aim of this project is to contribute to a better knowledge, diagnosis, treatment and prevention of rare anaemias (RAs) in Europe.

The ENERCA project is coordinated by the Hospital Clinic i Provincial of Barcelona (Pr Joan Luis Vives Corrons). It was launched on October 2002 (ENERCA 1) and will enter into its third phase (ENERCA 3), following a new Grant Approval from the European Commission's DG SANCO Health Programme 2008-2010. **ENERCA 3** constitutes a European network with the participation of 50 experts from 14 European Union member states.

An ENERCA **website** ([www.enerca.org](http://www.enerca.org)) was created to provide relevant information for both professional and the public, covering a detailed list of centres specialized in these disorders, definitions of most of the uncommon anaemias, information for patients, support organizations listed by countries, on-line forum (conversation platform) to exchange experiences with other people in the same situation, newsletters.

**The ENERCA website provides information on rare anaemias for both, health professionals and the public.**

In the new phase of the project, **Education and Training** will be a major objective, with a specific working package (WP) devoted to the promotion of the knowledge on rare anaemias for health professionals and for the patients and the public. Main partners of this WP, include patients associations (Thalassemia International Federation), the World Health Organization, The European Hematology Association (red cell working group) and the European School of Hematology (ESH). ESH will play a major part in the organization of European courses for Health professionals. These courses will aim to provide the state of

the art for the clinical and biological diagnoses of the different forms of rare anaemias. These include haemoglobin disorders, red cell membrane pathologies, red cell enzyme deficiencies and other rare diseases among which inherited anaemia associated with disorders of iron metabolism. Experts from all parts of the world will be invited to participate to specialized courses on each field.

This project may serve as a model and could help to improve the health status of patients affected with rare anaemias worldwide.

**Email:** [enerca@enerca.org](mailto:enerca@enerca.org)

**Web:** [www.enerca.org](http://www.enerca.org)

The screenshot shows the ENERCA website homepage. At the top, there's a header with the date 'Tuesday, December 02, 2008' and a search bar. Below the header, the ENERCA logo is prominently displayed. The main content area is divided into several sections: 'Public' with links to 'About ENERCA', 'About Anaemia', and 'ENERCA Services'; 'Professionals' with links to 'ENERCA Experts', 'Diagnosis Flowchart', 'On-line Forum', 'Database/Registry', 'Guidelines/Recommendations', 'Education and Training', 'Quality Assurance', and 'MAC'; and 'Contact' with a 'Partners' link. A central text block welcomes visitors and explains the website's purpose. On the right side, there's a sidebar with 'Events' and a featured event titled 'II Jornada sobre Hemoglobinopatías y Talasemias en España'. At the bottom right, there's a banner for 'EARCR 2009 17th International Symposium'.

## ESH Travels to Boston

### 10<sup>th</sup> Annual Conference

#### CHRONIC MYELOID LEUKAEMIA/Biological Basis of Therapy

Organizers:

**J.M. Goldman and J. Cortes**

Co-Organizers:

**A.M. Carella, G.Q. Daley, C. Gambacorti,  
F. Guilhot, R. Hehlmann, T. Holyoake,  
M. Horowitz, T. Hughes, J.V. Melo, G. Saglio,  
C. Schiffer, P. Valent, R. Van Etten**

The 10<sup>th</sup> ESH conference on Chronic Myeloid Leukaemia took place in Boston in September 2008, under the scientific direction of John Goldman and Jorge Cortes. The meeting brought together 470 participants from all over the world, including a faculty of 80 leaders in the field. The speakers presented data on a wide range of topics related to CML, many of which may well prove to be of great biological and clinical importance.

**FREELY AVAILABLE WEBCASTS:** The conference lectures will be freely available on the **ESH website (www.esh.org)** in January 2009. We invite you to log in.



**John M. Goldman and Jorge Cortes, Chairmen**



**If you are interested in CML you may also want to plan on being with us for the next conference.**

**Bordeaux**

### 11<sup>th</sup> Annual Conference

#### CHRONIC MYELOID LEUKAEMIA / Biological Basis of Therapy

**Bordeaux, France / 11-13 September 2009**

Organizers:

**J.M. Goldman, J. Cortes, T. Hughes, T. Holyoake, D. Perrotti, J. Reiffers**

Scientific Advisory Committee:

**A.M. Carella, G.Q. Daley, C. Gambacorti, F. Guilhot, R. Hehlmann, F.-X. Mahon,  
J.V. Melo, G. Saglio, C. Schiffer, P. Valent, R. Van Etten**

***For further information and to register:***

**<http://www.esh.org/agenda09.htm>**



## The ESH meeting “Haematological Aspects of Auto-Immune Diseases”

Mandelieu, France/13-15 February, 2009

The clinical management of autoimmune disease is a major challenge in haematology and other medical specialties. Within haematology, disorders such as immune thrombocytopenic purpura, haemolytic anaemia, immune neutropenia, aplastic anaemia, acquired haemophilia and other diseases are often difficult to diagnose and treat. Until recently, the whole field has suffered from a lack of basic research, and practices based on very limited evidence. However, there has been an exponential increase in our level of understanding of these diseases through ongoing research programmes. In particular, recent insights into the pathophysiology of ITP has led to the development of new therapies which will greatly assist in the treatment of this disorder.

The ESH meeting “Haematological Aspects of Auto-Immune Diseases” to be held in Mandelieu



*Drew Provan*

(France) on 13-15 February, 2009 will bring together expert clinicians and scientists to discuss current research, guidelines and treatment developments across the whole spectrum of autoimmune haematological disorders. It is anticipated that by a sharing of ideas and clinical experience will help foster collaborative research internationally, in addition to promoting best practice for the care of patients with these diseases.

The meeting will be held over three days, and will comprise a mixture of seminars, free communications, breakout groups and breakfast meetings. We are keen to encourage active participation throughout the programme, and delegates are encouraged to submit abstracts in order that we can ensure broad coverage of all aspects of autoimmune haematology.

## THE ESH WEBSITE

Between January and October 2008, the ESH website received 130,000 visits and over 1,5 million page visits !

### For free access to:

- Webcasted conferences
- Powerpoint presentations
- Other on-line training tools

### To order your:

- ESH-EBMT Handbook on Haematopoietic Stem Cell Transplantation 2008
- ESH-Club du Globule Rouge et du Fer Handbook on Disorders of Iron Homeostasis, Erythrocytes, Erythropoiesis

### And to

- Register on-line for the ESH conference of your choice.

**VISIT US AT: [www.esh.org](http://www.esh.org)**

## THE ESH-EBMT HANDBOOK 2008 REVISED EDITION

Thank you very much for posting the ESH-EBMT handbook. Text books are quite expensive in this part of the world and I will be able to use this book for teaching of undergraduates and post graduate students. We in this part of the world do tend to get isolated and it is good to keep in touch and learn what else is happening in the wider world of haematology. Thank you very much again.

*Dr Senani Williams*

Faculty of Medicine, University of Kelaniya  
Ragama, Sri Lanka



Dear European School of Haematology,  
I'm an attending physician of BMT from Beijing China. I've got the wonderful ESH-EBMT handbook (5<sup>th</sup> edition) of Haematopoietic Stem Cell Transplantation from the 2008 EHA meeting. This handbook is very useful and I always keep it in my surroundings during clinical work. Our hospital - Beijing Dao-Pei Hospital - is a haematology special hospital and has 18 laminar air rooms. More than 170 allo-HSCTs were performed last year. There are almost 30 doctors and half of them specialize in HSCT. We found the 5<sup>th</sup> edition of the handbook very useful.

*Yanli Zhao*

Beijing, China



## Announcing MIDIS

### A New Survey to Unlock the Barriers to Iron Overload Detection in MDS

We are pleased to announce the upcoming launch of **MIDIS (MDS Iron-Overload Detection Insight Survey)** – a European survey among haematologists and other specialists about the detection and management of iron toxicity in patients with myelodysplastic syndromes (MDS).

**MIDIS** is a joint initiative by the **European School of Haematology**, the **Myelodysplastic Syndromes (MDS) Foundation** and **Novartis Oncology**. We have established this partnership with the objective of gaining a better understanding of the myriad barriers to detection and management of iron overload in MDS patients. We hope that the results of this survey will help us to understand ways in which we can promote optimal detection and management of iron overload in patients with MDS.

The MIDIS survey, which will be available on-line, will be launched at this year's meeting of the American Society of Haematology. Haematologists and other specialists working with MDS patients from across Europe are invited to complete a questionnaire which can be accessed from either the MDS Foundation or European School of Haematology websites:

<http://www.mds-foundation.org/> or <http://www.esh.org/>

The survey will be available in several languages (English, Dutch, French, German, Italian, Spanish and Swedish). It will include questions that cover a range of issues related to iron overload, including the monitoring and detection of iron overload in MDS patients, as well as treatment.

The MIDIS survey partners will ensure that the survey findings are disseminated as widely as possible through presentations at leading haematology meetings and a publication in a peer-reviewed journal.

"An initiative such as MIDIS can provide greater understanding of the challenges faced by haematologists and other specialists in daily practice," said Didi Jasmin, Director of the European School of Haematology. "By gaining insights from haematologists and other specialists all over Europe, we hope to find consensus of opinion on what the current key barriers are to detecting iron overload in MDS patients and how we can help to overcome these."

It is widely acknowledged that there is significant under-detection and treatment of iron overload in MDS, but the reasons for this are not well understood. It is hoped that MIDIS will not only help to uncover the key barriers to optimal detection and management of iron overload in MDS, but also help to raise professional and public awareness about this subject and subsequently help to put actions in place which will assist in overcoming the barriers. The ESH, MDS Foundation and Novartis Oncology are committed to this objective and, in addition to the survey, will be developing a range of educational initiatives aimed at improving the detection and management of iron overload in MDS.

"We hope this survey will provide valuable insights and reflect the opinions and attitudes of physicians currently working in this area across Europe," said Kathy Heptinstall, Operating Director of the MDS Foundation. "The MDS Foundation strongly believes that international cooperation can accelerate the process leading to the control and cure of these diseases and this survey certainly reflects that goal. We hope the conclusions of the MIDIS survey will help to influence future directions in the field and ultimately better outcomes for patients."

**Be a part of MIDIS online at <http://www.mds-foundation.org/> or <http://www.esh.org/>**

The MIDIS initiative is a collaboration between the **European School of Haematology**, the **MDS Foundation** and **Novartis Oncology**.

## ESH CORPORATE PARTNERS



### ESH, INSTITUT DE RECHERCHE SUR LES MALADIES DU SANG

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