WEBVTT

NOTE duration:"00:58:49" NOTE recognizability:0.922

NOTE language:en-us

NOTE Confidence: 0.924190047058824

00:00:00.000 --> 00:00:03.227 All right. It is my great pleasure

NOTE Confidence: 0.924190047058824

 $00{:}00{:}03.227 \dashrightarrow 00{:}00{:}05.677$ to introduce Doctor Abner Lucent

NOTE Confidence: 0.924190047058824

00:00:05.677 --> 00:00:08.117 for our grand rounds today.

NOTE Confidence: 0.924190047058824

 $00:00:08.120 \longrightarrow 00:00:10.185$ Doctor Lucent is a hematopathologist

NOTE Confidence: 0.924190047058824

 $00:00:10.185 \longrightarrow 00:00:12.250$ at MGH and associate professor

NOTE Confidence: 0.924190047058824

00:00:12.316 --> 00:00:13.920 at Harvard Medical School.

NOTE Confidence: 0.924190047058824

00:00:13.920 --> 00:00:16.160 Upon graduating from college at Wash U,

NOTE Confidence: 0.924190047058824

 $00:00:16.160 \longrightarrow 00:00:18.338$ he went to Cornell for his MDPHD,

NOTE Confidence: 0.924190047058824

 $00:00:18.338 \longrightarrow 00:00:20.846$ followed by a PCP residency and

NOTE Confidence: 0.924190047058824

 $00:00:20.846 \dashrightarrow 00:00:23.599$ then Heme Path Fellowship at MGH.

NOTE Confidence: 0.924190047058824

 $00:00:23.600 \longrightarrow 00:00:24.440$ He has since been there,

NOTE Confidence: 0.924190047058824

 $00{:}00{:}24.440 \to 00{:}00{:}26.274$ rising to the rank of associate professor.

NOTE Confidence: 0.924190047058824

 $00:00:26.280 \longrightarrow 00:00:28.304$ He is currently director

 $00:00:28.304 \longrightarrow 00:00:30.328$ of the Hematology Lab.

NOTE Confidence: 0.924190047058824

 $00:00:30.330 \longrightarrow 00:00:32.980$ As well as the nascent

NOTE Confidence: 0.924190047058824

00:00:32.980 --> 00:00:35.034 lymphoma tissue repository, Dr.

NOTE Confidence: 0.924190047058824

 $00:00:35.034 \longrightarrow 00:00:36.890$ Luson has characterized novel

NOTE Confidence: 0.924190047058824

 $00:00:36.890 \longrightarrow 00:00:38.746$ subtypes of follicular lymphoma

NOTE Confidence: 0.924190047058824

 $00:00:38.746 \longrightarrow 00:00:41.237$ such as pediatric type follicular

NOTE Confidence: 0.924190047058824

 $00:00:41.237 \longrightarrow 00:00:43.530$ lymphoma and has defined the genetic

NOTE Confidence: 0.924190047058824

 $00:00:43.530 \longrightarrow 00:00:44.970$ underpinnings of these tumors.

NOTE Confidence: 0.924190047058824

00:00:44.970 --> 00:00:45.866 So specifically,

NOTE Confidence: 0.924190047058824

 $00:00:45.866 \longrightarrow 00:00:48.106$ his initial study in blood

NOTE Confidence: 0.924190047058824

 $00{:}00{:}48.106 \dashrightarrow 00{:}00{:}50.250$ demonstrated the genomic differences

NOTE Confidence: 0.924190047058824

 $00:00:50.250 \longrightarrow 00:00:52.575$ between pediatric type and the

NOTE Confidence: 0.924190047058824

 $00:00:52.575 \longrightarrow 00:00:53.970$ traditional follicular lymphoma,

NOTE Confidence: 0.924190047058824

 $00:00:53.970 \longrightarrow 00:00:55.614$ representing a major advancement

NOTE Confidence: 0.92419004705882400:00:55.614 --> 00:00:56.847 in the field. NOTE Confidence: 0.924190047058824

 $00:00:56.850 \longrightarrow 00:00:58.518$ On the basis of this work

 $00:00:58.518 \longrightarrow 00:01:00.200$ and also follow up studies.

NOTE Confidence: 0.924190047058824

 $00:01:00.200 \longrightarrow 00:01:01.855$ PD type molecular lymphoma is

NOTE Confidence: 0.924190047058824

 $00:01:01.855 \longrightarrow 00:01:04.142$ now a distinct entity in The Who.

NOTE Confidence: 0.924190047058824

 $00:01:04.142 \longrightarrow 00:01:04.906$ More recently,

NOTE Confidence: 0.924190047058824

 $00:01:04.906 \longrightarrow 00:01:06.816$ he has characterized the genetic

NOTE Confidence: 0.924190047058824

 $00:01:06.816 \longrightarrow 00:01:08.764$ landscape of additional lymphoma

NOTE Confidence: 0.924190047058824

00:01:08.764 --> 00:01:10.441 subtypes including primary

NOTE Confidence: 0.924190047058824

 $00{:}01{:}10.441 \dashrightarrow 00{:}01{:}12.118$ duodenal follicular lymphoma,

NOTE Confidence: 0.924190047058824

00:01:12.120 --> 00:01:13.479 primary cutaneous follicle

NOTE Confidence: 0.924190047058824

 $00:01:13.479 \longrightarrow 00:01:14.838$ center cell lymphoma,

NOTE Confidence: 0.924190047058824

 $00:01:14.840 \longrightarrow 00:01:16.495$ primary cutaneous gamma delta T

NOTE Confidence: 0.924190047058824

 $00:01:16.495 \longrightarrow 00:01:18.944$ cell lymphoma, as well as DLBCL.

NOTE Confidence: 0.924190047058824

 $00{:}01{:}18.944 \dashrightarrow 00{:}01{:}21.276$ Leg type Doctor Lusan's lab has

NOTE Confidence: 0.924190047058824

 $00:01:21.276 \longrightarrow 00:01:23.071$ established the first ever PDX

NOTE Confidence: 0.924190047058824

 $00:01:23.071 \longrightarrow 00:01:24.889$ model of follicular lymphoma.

 $00:01:24.890 \longrightarrow 00:01:26.732$ He is currently an author for

NOTE Confidence: 0.924190047058824

 $00{:}01{:}26.732 \dashrightarrow 00{:}01{:}28.360$ five chapters of the upcoming

NOTE Confidence: 0.924190047058824

 $00:01:28.360 \longrightarrow 00:01:30.821$ 5th edition of The Who and lead

NOTE Confidence: 0.924190047058824

 $00:01:30.821 \longrightarrow 00:01:33.083$ author for four of these chapters.

NOTE Confidence: 0.924190047058824

00:01:33.090 --> 00:01:34.850 He's highly involved in ash,

NOTE Confidence: 0.924190047058824

 $00:01:34.850 \longrightarrow 00:01:36.848$ working on the Publications committee as

NOTE Confidence: 0.924190047058824

 $00:01:36.848 \longrightarrow 00:01:39.170$ well as the Abstract Review Committee.

NOTE Confidence: 0.924190047058824

00:01:39.170 --> 00:01:41.130 He has won the Benjamin Councilman Award,

NOTE Confidence: 0.924190047058824

00:01:41.130 --> 00:01:42.658 outstanding paper and pathology

NOTE Confidence: 0.924190047058824

 $00:01:42.658 \longrightarrow 00:01:43.804$ through use CAP,

NOTE Confidence: 0.924190047058824

 $00{:}01{:}43.810 \dashrightarrow 00{:}01{:}46.288$ as well as the Berard Dorfman Founders

NOTE Confidence: 0.924190047058824

 $00:01:46.288 \longrightarrow 00:01:48.075$ Award for Young investigators

NOTE Confidence: 0.924190047058824

 $00:01:48.075 \longrightarrow 00:01:50.699$ through Society for HEMATOPATHOLOGY.

NOTE Confidence: 0.924190047058824

00:01:50.700 --> 00:01:51.900 I knew of Abner,

NOTE Confidence: 0.924190047058824

00:01:51.900 --> 00:01:54.231 but then got to know him personally

NOTE Confidence: 0.924190047058824

00:01:54.231 --> 00:01:57.815 through a rather epic study that is ongoing,

 $00:01:57.820 \longrightarrow 00:02:00.459$ and for that I got tasked with

NOTE Confidence: 0.924190047058824

 $00:02:00.460 \longrightarrow 00:02:04.848$ evaluating 789 potchkin lymphomas

NOTE Confidence: 0.924190047058824

 $00:02:04.848 \longrightarrow 00:02:07.236$ and I thought.

NOTE Confidence: 0.924190047058824

00:02:07.240 --> 00:02:08.560 Nobody would be willing to work

NOTE Confidence: 0.924190047058824

 $00:02:08.560 \longrightarrow 00:02:09.440$ on this with me,

NOTE Confidence: 0.924190047058824

 $00:02:09.440 \longrightarrow 00:02:13.400$ particularly someone with a lab himself.

NOTE Confidence: 0.924190047058824

 $00:02:13.400 \longrightarrow 00:02:16.920$ But Abner has proved me wrong and has

NOTE Confidence: 0.924190047058824

 $00{:}02{:}16.920 \dashrightarrow 00{:}02{:}19.188$ helped greatly in that translational study.

NOTE Confidence: 0.924190047058824

00:02:19.188 --> 00:02:21.666 What I didn't know about him until

NOTE Confidence: 0.924190047058824

 $00:02:21.666 \longrightarrow 00:02:24.026$ very recently is that he started

NOTE Confidence: 0.924190047058824

 $00{:}02{:}24.026 \dashrightarrow 00{:}02{:}25.582$ his academic faculty position

NOTE Confidence: 0.924190047058824

 $00:02:25.582 \longrightarrow 00:02:27.690$ focusing on clinical hematopathology.

NOTE Confidence: 0.924190047058824

 $00{:}02{:}27.690 \dashrightarrow 00{:}02{:}29.994$ And was not in fact in the lab when

NOTE Confidence: 0.924190047058824

 $00:02:29.994 \longrightarrow 00:02:32.547$ he asked those fundamental questions

NOTE Confidence: 0.924190047058824

 $00:02:32.547 \longrightarrow 00:02:34.767$ about pediatric type follicular

00:02:34.767 --> 00:02:37.129 lymphoma and that resulted in his Kay Ward.

NOTE Confidence: 0.924190047058824

 $00:02:37.130 \longrightarrow 00:02:39.010$ He later carried out these

NOTE Confidence: 0.924190047058824

 $00:02:39.010 \longrightarrow 00:02:40.890$ experiments in David Weinstock's lab.

NOTE Confidence: 0.924190047058824

00:02:40.890 --> 00:02:42.874 And I think it is this unique pathway

NOTE Confidence: 0.924190047058824

 $00:02:42.874 \longrightarrow 00:02:44.970$ that he has carved that demonstrates

NOTE Confidence: 0.924190047058824

00:02:44.970 --> 00:02:46.900 his scientific queries are truly

NOTE Confidence: 0.924190047058824

 $00:02:46.900 \longrightarrow 00:02:48.992$ grounded in his own personal clinical

NOTE Confidence: 0.924190047058824

 $00:02:48.992 \longrightarrow 00:02:50.642$ expertise and that is something

NOTE Confidence: 0.924190047058824

 $00{:}02{:}50.650 \dashrightarrow 00{:}02{:}52.490$ that I find truly inspiring.

NOTE Confidence: 0.924190047058824

 $00:02:52.490 \longrightarrow 00:02:53.918$ So thank you so much for coming

NOTE Confidence: 0.924190047058824

 $00{:}02{:}53.918 \dashrightarrow 00{:}02{:}56.930$ to speak at Yale Grand Rounds.

NOTE Confidence: 0.933544666666667

 $00:02:56.930 \longrightarrow 00:02:57.248$ Thank you so

NOTE Confidence: 0.94629164

 $00:02:57.250 \longrightarrow 00:02:59.794$ much for that really kind introduction

NOTE Confidence: 0.94629164

00:02:59.794 --> 00:03:02.468 and it's it's truly an honor and

NOTE Confidence: 0.94629164

 $00:03:02.468 \longrightarrow 00:03:04.750$ pleasure to be here in the department

NOTE Confidence: 0.94629164

 $00{:}03{:}04.816 \to 00{:}03{:}07.049$ and thank Doctor Chu and Doctor Lu

 $00{:}03{:}07.049 \dashrightarrow 00{:}03{:}09.249$ for hosting me in the department.

NOTE Confidence: 0.94629164

 $00{:}03{:}09.250 \dashrightarrow 00{:}03{:}11.274$ I'm really happy to talk a little bit

NOTE Confidence: 0.94629164

 $00:03:11.274 \longrightarrow 00:03:13.570$ about some of the work that we've done

NOTE Confidence: 0.81131856

 $00:03:15.650 \longrightarrow 00:03:18.938$ just I have no disclosures and.

NOTE Confidence: 0.81131856

00:03:18.938 --> 00:03:21.578 I will talk about different,

NOTE Confidence: 0.81131856

 $00:03:21.580 \longrightarrow 00:03:22.380$ different efforts,

NOTE Confidence: 0.81131856

 $00:03:22.380 \longrightarrow 00:03:24.780$ but they all center around a

NOTE Confidence: 0.81131856

 $00:03:24.780 \longrightarrow 00:03:27.212$ central goal which is if you think

NOTE Confidence: 0.81131856

 $00{:}03{:}27.212 \dashrightarrow 00{:}03{:}29.179$ about lymphoma or what we do as

NOTE Confidence: 0.81131856

 $00:03:29.180 \longrightarrow 00:03:30.636$ pathologists and classifying the

NOTE Confidence: 0.81131856

 $00:03:30.636 \longrightarrow 00:03:32.456$ over hundred types of lymphoma.

NOTE Confidence: 0.909208146153846

 $00:03:50.820 \longrightarrow 00:03:53.312$ And all the work that I'll be

NOTE Confidence: 0.909208146153846

 $00{:}03{:}53.312 \dashrightarrow 00{:}03{:}55.905$ presenting has attempted to do is to

NOTE Confidence: 0.909208146153846

 $00{:}03{:}55.905 \dashrightarrow 00{:}03{:}57.720$ identify biomarkers that can either

NOTE Confidence: 0.909208146153846

00:03:57.720 --> 00:04:00.126 predict or give us a sense of help

00:04:00.126 --> 00:04:03.056 us understand how different lesions,

NOTE Confidence: 0.909208146153846

 $00{:}04{:}03.060 \dashrightarrow 00{:}04{:}05.240$ why different lesions respond differently

NOTE Confidence: 0.909208146153846

 $00:04:05.240 \longrightarrow 00:04:07.420$ to the the rapeutic interventions and the

NOTE Confidence: 0.909208146153846

 $00:04:07.476 \longrightarrow 00:04:09.261$ heterogeneity responses that we see

NOTE Confidence: 0.909208146153846

 $00:04:09.261 \longrightarrow 00:04:11.500$ even within a single disease entity.

NOTE Confidence: 0.909208146153846

00:04:11.500 --> 00:04:13.000 And then occasionally when you

NOTE Confidence: 0.909208146153846

 $00:04:13.000 \longrightarrow 00:04:13.900$ do the investigation,

NOTE Confidence: 0.909208146153846

00:04:13.900 --> 00:04:16.005 you end up finding that what

NOTE Confidence: 0.909208146153846

 $00:04:16.005 \longrightarrow 00:04:18.765$ was thought to be a part of an

NOTE Confidence: 0.909208146153846

 $00:04:18.765 \longrightarrow 00:04:21.418$ entity is actually its own entity.

NOTE Confidence: 0.909208146153846

00:04:21.420 --> 00:04:22.980 And so with that I'll start,

NOTE Confidence: 0.909208146153846

 $00:04:22.980 \longrightarrow 00:04:24.968$ I'll start each of these sections with

NOTE Confidence: 0.909208146153846

 $00{:}04{:}24.968 \dashrightarrow 00{:}04{:}27.556$ sort of a clinical case that sort of

NOTE Confidence: 0.909208146153846

 $00:04:27.556 \longrightarrow 00:04:29.803$ represents the impact or of the work.

NOTE Confidence: 0.909208146153846

 $00:04:29.803 \longrightarrow 00:04:33.561$ So the first is a 25 year old man with

NOTE Confidence: 0.909208146153846

 $00:04:33.561 \longrightarrow 00:04:35.653$ isolated cervical lymph adenopathy

00:04:35.653 --> 00:04:38.460 limited stage with clonal CD10B cell

NOTE Confidence: 0.909208146153846

00:04:38.460 --> 00:04:40.160 population by flow cytometry and

NOTE Confidence: 0.909208146153846

 $00:04:40.160 \longrightarrow 00:04:42.578$ you can sort of see a confluence of

NOTE Confidence: 0.909208146153846

 $00:04:42.580 \longrightarrow 00:04:45.190$ expanded follicles and the sort of

NOTE Confidence: 0.909208146153846

 $00:04:45.190 \longrightarrow 00:04:48.019$ largest medium to largest sort of cells.

NOTE Confidence: 0.909208146153846

 $00:04:48.020 \longrightarrow 00:04:50.540$ And there's an architectural pattern to it,

NOTE Confidence: 0.909208146153846

 $00:04:50.540 \longrightarrow 00:04:51.610$ focular pattern.

NOTE Confidence: 0.909208146153846

 $00:04:51.610 \longrightarrow 00:04:54.820$ The neoplastic cells are CD10 positive,

NOTE Confidence: 0.909208146153846

00:04:54.820 --> 00:04:57.039 their BCL two mostly negative and have

NOTE Confidence: 0.909208146153846

 $00{:}04{:}57.039 \dashrightarrow 00{:}04{:}59.460$ a really high proliferation fraction.

NOTE Confidence: 0.9251585

 $00:05:03.060 \longrightarrow 00:05:06.684$ And so traditionally when this was

NOTE Confidence: 0.9251585

00:05:06.684 --> 00:05:07.874 originally diagnosed, this case,

NOTE Confidence: 0.9251585

 $00{:}05{:}07.874 \dashrightarrow 00{:}05{:}10.170$ it was diagnosed as a focal lymphoma and

NOTE Confidence: 0.9251585

 $00:05:10.230 \longrightarrow 00:05:12.705$ I'll talk a little bit about that for those.

NOTE Confidence: 0.9251585

 $00:05:12.710 \longrightarrow 00:05:14.470$ Not in familiar with lymphoma,

 $00:05:14.470 \longrightarrow 00:05:17.530$ but it was diagnosed as a high grade Grade

NOTE Confidence: 0.9251585

 $00:05:17.530 \longrightarrow 00:05:21.390$ 3 focal lymphoma and it was limited stage.

NOTE Confidence: 0.9251585

 $00:05:21.390 \longrightarrow 00:05:24.112$ And so the question there is do you

NOTE Confidence: 0.9251585

00:05:24.112 --> 00:05:25.918 treat with chemotherapy at the time

NOTE Confidence: 0.9251585

 $00:05:25.918 \longrightarrow 00:05:28.470$ or do you observe radiation therapy?

NOTE Confidence: 0.9251585

 $00:05:28.470 \longrightarrow 00:05:31.070$ And so we'll get back to the case,

NOTE Confidence: 0.9251585

 $00:05:31.070 \longrightarrow 00:05:32.876$ but just as a background focal lymphoma

NOTE Confidence: 0.9251585

 $00:05:32.876 \longrightarrow 00:05:35.384$ is a neoplasm of germinal center B cells

NOTE Confidence: 0.9251585

00:05:35.384 --> 00:05:37.064 comprised of centrocites and centroblasts,

NOTE Confidence: 0.9251585

 $00:05:37.070 \longrightarrow 00:05:39.510$ normal cell types within follicles,

NOTE Confidence: 0.9251585

00:05:39.510 --> 00:05:40.962 lymph node follicles.

NOTE Confidence: 0.9251585

 $00:05:40.962 \longrightarrow 00:05:42.898$ This disease demonstrates a

NOTE Confidence: 0.9251585

00:05:42.898 --> 00:05:44.350 policular growth pattern.

NOTE Confidence: 0.9251585

 $00:05:44.350 \longrightarrow 00:05:47.102$ The mean age is 6 decade and often

NOTE Confidence: 0.9251585

 $00:05:47.102 \longrightarrow 00:05:49.509$ presents with advanced stage disease,

NOTE Confidence: 0.9251585

00:05:49.510 --> 00:05:51.838 usually involving lymph nodes

00:05:51.838 --> 00:05:54.166 can occasionally involve marrow

NOTE Confidence: 0.9251585

00:05:54.166 --> 00:05:55.870 and extranodal sites.

NOTE Confidence: 0.9251585

 $00:05:55.870 \longrightarrow 00:05:57.980$ These follicular lymphomas can have

NOTE Confidence: 0.9251585

 $00:05:57.980 \longrightarrow 00:05:59.668$ different contributions of centrocytes,

NOTE Confidence: 0.9251585

 $00{:}05{:}59.670 \dashrightarrow 00{:}06{:}02.570$ which are smaller cleave cells

NOTE Confidence: 0.9251585

 $00:06:02.570 \longrightarrow 00:06:06.390$ and larger centroblasts and today.

NOTE Confidence: 0.938134915263158

 $00:06:10.360 \longrightarrow 00:06:12.920$ Grade one to two would be sort of a lower

NOTE Confidence: 0.938134915263158

 $00:06:12.992 \longrightarrow 00:06:15.664$ grade and tends to have these smaller cells

NOTE Confidence: 0.938134915263158

00:06:15.664 --> 00:06:19.360 with sort of irregularly shaped nuclei.

NOTE Confidence: 0.938134915263158

 $00:06:19.360 \longrightarrow 00:06:22.078$ Whereas the central blasts are larger,

NOTE Confidence: 0.938134915263158

 $00:06:22.080 \longrightarrow 00:06:24.624$ more round with usually nuclear that

NOTE Confidence: 0.938134915263158

 $00:06:24.624 \longrightarrow 00:06:27.230$ are opposed to the nuclear membrane

NOTE Confidence: 0.938134915263158

 $00{:}06{:}27.230 \dashrightarrow 00{:}06{:}29.792$ and 3A and 3D split between 3D

NOTE Confidence: 0.938134915263158

 $00:06:29.792 \longrightarrow 00:06:31.760$ being sheets of these large cells,

NOTE Confidence: 0.938134915263158

00:06:31.760 --> 00:06:34.559 3A being more than 15 per high power field.

 $00:06:34.560 \longrightarrow 00:06:36.535$ And generally the thought is

NOTE Confidence: 0.938134915263158

 $00:06:36.535 \longrightarrow 00:06:38.510$ that the grade threes are.

NOTE Confidence: 0.938134915263158

00:06:38.510 --> 00:06:44.590 May have a behave worse and may it may

NOTE Confidence: 0.938134915263158

 $00:06:44.590 \longrightarrow 00:06:47.281$ require more aggressive chemotherapy

NOTE Confidence: 0.938134915263158

 $00:06:47.281 \longrightarrow 00:06:51.552$ and the current upcoming WHO grading

NOTE Confidence: 0.938134915263158

00:06:51.552 --> 00:06:54.768 has been removed and and the ICC

NOTE Confidence: 0.938134915263158

 $00:06:54.768 \longrightarrow 00:06:56.605$ classification it's still there but

NOTE Confidence: 0.938134915263158

00:06:56.605 --> 00:06:59.042 for the purposes of this just want

NOTE Confidence: 0.938134915263158

 $00{:}06{:}59.042 \dashrightarrow 00{:}07{:}02.909$ to present the difference so these

NOTE Confidence: 0.938134915263158

 $00:07:02.909 \longrightarrow 00:07:05.304$ focalformers have a fundamental genetic

NOTE Confidence: 0.938134915263158

 $00{:}07{:}05.304 \dashrightarrow 00{:}07{:}08.560$ alteration which is BC L2 translocations.

NOTE Confidence: 0.938134915263158

 $00:07:08.560 \longrightarrow 00:07:11.974$ Which the 1418 which juxtaposes BC

NOTE Confidence: 0.938134915263158

 $00:07:11.974 \longrightarrow 00:07:14.244$ L2 upon regulatory enhancer elements

NOTE Confidence: 0.938134915263158

 $00:07:14.244 \longrightarrow 00:07:17.080$ of the heavy chain which causes

NOTE Confidence: 0.938134915263158

 $00:07:17.080 \longrightarrow 00:07:19.912$ up regulation of BC L2 expression

NOTE Confidence: 0.938134915263158

 $00:07:19.912 \longrightarrow 00:07:21.800$ which imparts survival advantage

 $00:07:21.800 \longrightarrow 00:07:24.440$ and it clinically we can see this

NOTE Confidence: 0.933506579166667

 $00{:}07{:}30.520 \dashrightarrow 00{:}07{:}31.916$ expression representing a germinal

NOTE Confidence: 0.933506579166667

 $00{:}07{:}31.916 \dashrightarrow 00{:}07{:}34.519$ center cell and you can see that in.

NOTE Confidence: 0.841452866666667

00:07:38.140 --> 00:07:39.552 Folk lympharma, traditional classic,

NOTE Confidence: 0.841452866666667

00:07:39.552 --> 00:07:41.892 folk lympharma, you have BCL two

NOTE Confidence: 0.841452866666667

 $00:07:41.892 \longrightarrow 00:07:45.691$ expression and traditionally the most

NOTE Confidence: 0.841452866666667

 $00:07:45.691 \longrightarrow 00:07:48.793$ folk lympharmas have a relatively low

NOTE Confidence: 0.841452866666667

 $00:07:48.793 \longrightarrow 00:07:50.672$ proliferation fraction and usually

NOTE Confidence: 0.841452866666667

 $00{:}07{:}50.672 \dashrightarrow 00{:}07{:}52.868$ a reactive general center will have

NOTE Confidence: 0.841452866666667

 $00{:}07{:}52.868 {\:\raisebox{--}{\text{--}}}{\:\raisebox{--}{\text{--}}}{\:\raisebox{--}{\text{--}}} 00{:}07{:}54.688$ a very high proliferation fraction.

NOTE Confidence: 0.841452866666667

 $00:07:54.688 \longrightarrow 00:07:58.076$ And we can do additional studies to look at

NOTE Confidence: 0.841452866666667

 $00:07:58.076 \longrightarrow 00:08:00.872$ clonality like PCR for IGHD arrangements,

NOTE Confidence: 0.841452866666667

 $00{:}08{:}00.872 \dashrightarrow 00{:}08{:}04.778$ fish for for to assess the the BCL

NOTE Confidence: 0.841452866666667

 $00:08:04.778 \longrightarrow 00:08:07.720$ 2 rearrangement and flow cytometry.

NOTE Confidence: 0.841452866666667

 $00:08:07.720 \longrightarrow 00:08:10.872$ Now early on we had identified there

 $00:08:10.872 \longrightarrow 00:08:13.056$ were some early series looking at folk

NOTE Confidence: 0.841452866666667

 $00:08:13.056 \longrightarrow 00:08:14.971$ and plumber and children and there

NOTE Confidence: 0.841452866666667

 $00:08:14.971 \longrightarrow 00:08:17.390$ there was some common trends noticed.

NOTE Confidence: 0.841452866666667

 $00:08:17.390 \longrightarrow 00:08:20.960$ So many of these young patients

NOTE Confidence: 0.841452866666667

 $00:08:20.960 \longrightarrow 00:08:23.640$ were were boys, young young boys.

NOTE Confidence: 0.841452866666667

 $00{:}08{:}23.640 \dashrightarrow 00{:}08{:}25.410$ And there was they presented with

NOTE Confidence: 0.841452866666667

 $00{:}08{:}25.410 \dashrightarrow 00{:}08{:}26.870$ limited stage disease often in

NOTE Confidence: 0.841452866666667

 $00:08:26.870 \longrightarrow 00:08:28.000$ the head and neck region,

NOTE Confidence: 0.841452866666667

 $00:08:28.000 \longrightarrow 00:08:30.712$ often had what was thought to be high

NOTE Confidence: 0.841452866666667

 $00:08:30.712 \longrightarrow 00:08:32.959$ histologic grade like more like a Grade 3

NOTE Confidence: 0.841452866666667

 $00:08:32.960 \longrightarrow 00:08:37.280$ or thought to be and they often lacked BC L2.

NOTE Confidence: 0.841452866666667

00:08:37.280 --> 00:08:37.898 Next question,

NOTE Confidence: 0.841452866666667

 $00:08:37.898 \longrightarrow 00:08:39.443$ but interestingly in all these

NOTE Confidence: 0.841452866666667

 $00:08:39.443 \longrightarrow 00:08:41.320$ series there was durable remission.

NOTE Confidence: 0.841452866666667

 $00:08:41.320 \longrightarrow 00:08:43.455$ Often these patients they'd get

NOTE Confidence: 0.841452866666667

 $00:08:43.455 \longrightarrow 00:08:45.163$ chemotherapy but sometimes they

 $00:08:45.163 \longrightarrow 00:08:48.799$ did not and and response was good.

NOTE Confidence: 0.841452866666667

 $00{:}08{:}48.800 \dashrightarrow 00{:}08{:}51.216$ And so back in 2008 this was considered

NOTE Confidence: 0.841452866666667

00:08:51.216 --> 00:08:52.694 a provisional entity pediatric

NOTE Confidence: 0.841452866666667

 $00:08:52.694 \longrightarrow 00:08:55.124$ cochlemphoma with where you have these

NOTE Confidence: 0.841452866666667

00:08:55.124 --> 00:08:57.079 folkformers and kids that did well,

NOTE Confidence: 0.841452866666667

 $00:08:57.080 \longrightarrow 00:08:59.348$ they tended to have what they called

NOTE Confidence: 0.841452866666667

00:08:59.348 --> 00:09:01.559 grade 3 morphology expansive follicles,

NOTE Confidence: 0.841452866666667

 $00:09:01.560 \longrightarrow 00:09:03.912$ but it was clear that these

NOTE Confidence: 0.841452866666667

 $00:09:03.912 \longrightarrow 00:09:04.696$ pediatric cochlemphomas.

NOTE Confidence: 0.84145286666667

 $00:09:04.700 \longrightarrow 00:09:06.140$ Had many features indistinguishable

NOTE Confidence: 0.841452866666667

 $00:09:06.140 \longrightarrow 00:09:07.940$ from those seen in adults.

NOTE Confidence: 0.841452866666667

 $00:09:07.940 \longrightarrow 00:09:10.140$ And so at the time when I answered the field,

NOTE Confidence: 0.841452866666667

 $00:09:10.140 \dashrightarrow 00:09:11.900$ there were some questions that came to mind.

NOTE Confidence: 0.841452866666667

 $00:09:11.900 \longrightarrow 00:09:14.568$ One is that as we got more

NOTE Confidence: 0.841452866666667

00:09:14.568 --> 00:09:15.099 and more experience,

00:09:15.100 --> 00:09:16.913 we realized that many of these patients

NOTE Confidence: 0.841452866666667

 $00{:}09{:}16.913 \dashrightarrow 00{:}09{:}18.237$ had no progression or occurrence

NOTE Confidence: 0.841452866666667

 $00:09:18.237 \longrightarrow 00:09:19.973$ even with just excision of the node.

NOTE Confidence: 0.841452866666667

 $00:09:19.980 \longrightarrow 00:09:23.380$ And I began to see a lot of these cases

NOTE Confidence: 0.841452866666667

 $00:09:23.380 \longrightarrow 00:09:25.216$ presenting in patients with in their

NOTE Confidence: 0.841452866666667

00:09:25.216 --> 00:09:27.538 20s and 30s with the same features.

NOTE Confidence: 0.841452866666667

 $00:09:27.540 \longrightarrow 00:09:28.340$ So now the question is,

NOTE Confidence: 0.841452866666667

 $00{:}09{:}28.340 \dashrightarrow 00{:}09{:}30.488$ are are these Grade 3 folliculars

NOTE Confidence: 0.841452866666667

 $00:09:30.488 \longrightarrow 00:09:31.920$ or the pediatric folliculars?

NOTE Confidence: 0.841452866666667

 $00:09:31.920 \longrightarrow 00:09:33.341$ And so we asked the question how

NOTE Confidence: 0.841452866666667

 $00{:}09{:}33.341 \dashrightarrow 00{:}09{:}34.493$ can we actually distinguish these

NOTE Confidence: 0.841452866666667

 $00:09:34.493 \longrightarrow 00:09:35.738$ because it's going to actually

NOTE Confidence: 0.841452866666667

 $00:09:35.738 \longrightarrow 00:09:37.550$ make a big difference in care,

NOTE Confidence: 0.841452866666667

 $00:09:37.550 \longrightarrow 00:09:39.320$ how can we objectively define these.

NOTE Confidence: 0.841452866666667

 $00:09:39.320 \longrightarrow 00:09:41.540$ So we started by looking at 27,

NOTE Confidence: 0.841452866666667

 $00:09:41.540 \longrightarrow 00:09:43.640$ you know all the focal point of

 $00:09:43.640 \longrightarrow 00:09:45.964$ patients at MGH that were less than 40

NOTE Confidence: 0.841452866666667

 $00:09:45.964 \longrightarrow 00:09:47.640$ years of age and we found that they

NOTE Confidence: 0.841452866666667

 $00:09:47.640 \longrightarrow 00:09:48.760$ should have broke into two groups,

NOTE Confidence: 0.841452866666667

 $00:09:48.760 \longrightarrow 00:09:51.862$ one that were limited stage and

NOTE Confidence: 0.841452866666667

 $00:09:51.862 \longrightarrow 00:09:54.154$ one with advanced stage disease and

NOTE Confidence: 0.841452866666667

 $00:09:54.154 \longrightarrow 00:09:56.461$ the ones that were limited stage

NOTE Confidence: 0.841452866666667

 $00:09:56.461 \longrightarrow 00:09:59.475$ we did see a predominance in in in

NOTE Confidence: 0.841452866666667

00:09:59.475 --> 00:10:00.720 a male predominance.

NOTE Confidence: 0.841452866666667

 $00:10:00.720 \longrightarrow 00:10:03.121$ And we looked at a whole slew

NOTE Confidence: 0.841452866666667

00:10:03.121 --> 00:10:04.575 of pathological features to

NOTE Confidence: 0.841452866666667

 $00:10:04.575 \longrightarrow 00:10:05.999$ try to distinguish those.

NOTE Confidence: 0.841452866666667

 $00{:}10{:}06.000 \dashrightarrow 00{:}10{:}08.121$ We did find that the the limited

NOTE Confidence: 0.841452866666667

 $00{:}10{:}08.121 \dashrightarrow 00{:}10{:}09.796$ stage ones had large follicles

NOTE Confidence: 0.841452866666667

 $00:10:09.796 \longrightarrow 00:10:11.878$ and had a star sky pattern,

NOTE Confidence: 0.841452866666667

 $00:10:11.880 \longrightarrow 00:10:14.160$ but many of the other parameters

00:10:14.160 --> 00:10:16.435 didn't pan out to make a difference.

NOTE Confidence: 0.841452866666667

00:10:16.440 --> 00:10:18.496 But one thing that we noticed really made

NOTE Confidence: 0.841452866666667

 $00:10:18.496 \longrightarrow 00:10:20.399$ a difference was the BCL 2G arrangements.

NOTE Confidence: 0.841452866666667

 $00:10:20.400 \longrightarrow 00:10:22.614$ So all of the limited stage ones lacked BCL

NOTE Confidence: 0.841452866666667

 $00:10:22.614 \longrightarrow 00:10:24.799$ two arrangements and BCL 6 arrangements,

NOTE Confidence: 0.841452866666667

 $00:10:24.800 \longrightarrow 00:10:27.056$ and had a very high proliferation

NOTE Confidence: 0.841452866666667

 $00:10:27.056 \longrightarrow 00:10:28.560$ fraction greater than 30%.

NOTE Confidence: 0.841452866666667

 $00:10:28.560 \longrightarrow 00:10:30.919$ And they had the combination of them

NOTE Confidence: 0.841452866666667

 $00:10:30.920 \longrightarrow 00:10:34.076$ whereas the the Advanced Age ones,

NOTE Confidence: 0.938241032

00:10:34.080 --> 00:10:36.384 the majority did not have none of them

NOTE Confidence: 0.938241032

 $00:10:36.384 \longrightarrow 00:10:38.880$ had both and both of those features.

NOTE Confidence: 0.936804341333333

00:10:41.400 --> 00:10:43.416 So we thought well maybe this is something

NOTE Confidence: 0.936804341333333

00:10:43.416 --> 00:10:45.236 maybe maybe these two features the the,

NOTE Confidence: 0.936804341333333

 $00:10:45.240 \longrightarrow 00:10:47.928$ the BCL 2 gene arrangements and the

NOTE Confidence: 0.936804341333333

 $00:10:47.928 \longrightarrow 00:10:49.454$ proliferation fraction together could

NOTE Confidence: 0.936804341333333

 $00:10:49.454 \longrightarrow 00:10:51.556$ could pick these good behaving cases out.

 $00:10:51.556 \longrightarrow 00:10:54.330$ So then we looked at a second cohort of

NOTE Confidence: 0.936804341333333

 $00:10:54.330 \longrightarrow 00:10:56.920$ adult patients less than 40 years of age.

NOTE Confidence: 0.936804341333333

00:10:56.920 --> 00:10:58.648 Right. And we've broken them up

NOTE Confidence: 0.936804341333333

00:10:58.648 --> 00:11:00.528 into four categories, you know,

NOTE Confidence: 0.936804341333333

00:11:00.528 --> 00:11:02.040 translocation, no translocation,

NOTE Confidence: 0.936804341333333

00:11:02.040 --> 00:11:04.040 no translocation and high proliferation,

NOTE Confidence: 0.936804341333333

 $00:11:04.040 \longrightarrow 00:11:06.100$ low proliferation index and the

NOTE Confidence: 0.936804341333333

 $00:11:06.100 \longrightarrow 00:11:08.160$ ones that had no translocation

NOTE Confidence: 0.936804341333333

 $00{:}11{:}08.231 \dashrightarrow 00{:}11{:}10.359$ and high proliferation fraction,

NOTE Confidence: 0.936804341333333

 $00:11:10.360 \longrightarrow 00:11:14.077$ all of them ended up being stage one disease.

NOTE Confidence: 0.936804341333333

00:11:14.080 --> 00:11:15.856 Many of them did get chemotherapy

NOTE Confidence: 0.936804341333333

 $00:11:15.856 \longrightarrow 00:11:18.319$ and in terms of progression relapse,

NOTE Confidence: 0.936804341333333

 $00{:}11{:}18.320 \dashrightarrow 00{:}11{:}20.196$ none of them had progression or relapse.

NOTE Confidence: 0.936804341333333

 $00{:}11{:}20.200 \dashrightarrow 00{:}11{:}21.551$ And actually I remember reading the notes

NOTE Confidence: 0.936804341333333

00:11:21.551 --> 00:11:23.280 and it would be like these surprising notes,

00:11:23.280 --> 00:11:24.471 Oh my gosh,

NOTE Confidence: 0.936804341333333

00:11:24.471 --> 00:11:27.250 this is patients doing really well and.

NOTE Confidence: 0.936804341333333

00:11:27.250 --> 00:11:29.371 And but this trend was really important

NOTE Confidence: 0.936804341333333

00:11:29.371 --> 00:11:31.930 to us and this is just a looking at

NOTE Confidence: 0.936804341333333

00:11:31.930 --> 00:11:34.006 Kaplan Meyer sort of curve showing

NOTE Confidence: 0.936804341333333

 $00:11:34.006 \longrightarrow 00:11:35.914$ the differences between the cases

NOTE Confidence: 0.936804341333333

 $00:11:35.914 \longrightarrow 00:11:38.163$ that have BC L2 arrangements and High

NOTE Confidence: 0.936804341333333

 $00:11:38.163 \longrightarrow 00:11:40.410$ proliferation index and the ones that didn't.

NOTE Confidence: 0.936804341333333

 $00:11:40.410 \longrightarrow 00:11:42.966$ At the same time Elaine Jaffe's

NOTE Confidence: 0.936804341333333

00:11:42.966 --> 00:11:45.298 group described that these these

NOTE Confidence: 0.936804341333333

 $00{:}11{:}45.298 \dashrightarrow 00{:}11{:}48.850$ pediatric follicular lymphoma cases.

NOTE Confidence: 0.936804341333333

 $00:11:48.850 \longrightarrow 00:11:50.250$ Had a very different morphology.

NOTE Confidence: 0.936804341333333

 $00:11:50.250 \longrightarrow 00:11:52.224$ So they're the morphology was not

NOTE Confidence: 0.936804341333333

 $00:11:52.224 \longrightarrow 00:11:54.232$ that of typical Centra blast where

NOTE Confidence: 0.936804341333333

00:11:54.232 --> 00:11:56.416 you can see these larger cells with

NOTE Confidence: 0.936804341333333

 $00:11:56.416 \longrightarrow 00:11:58.905$ these nucleoli sort of centers sort

 $00:11:58.905 \longrightarrow 00:12:00.645$ of touching nuclear membranes.

NOTE Confidence: 0.936804341333333

 $00:12:00.650 \longrightarrow 00:12:02.974$ They were more of a medium sized

NOTE Confidence: 0.936804341333333

 $00:12:02.974 \longrightarrow 00:12:05.078$ blastoid type phenotype and for that

NOTE Confidence: 0.936804341333333

 $00:12:05.078 \longrightarrow 00:12:06.823$ reason suggested that we shouldn't

NOTE Confidence: 0.936804341333333

 $00:12:06.823 \longrightarrow 00:12:08.289$ grade these these cases.

NOTE Confidence: 0.936804341333333

 $00:12:08.289 \longrightarrow 00:12:10.296$ And when you look when we looked at

NOTE Confidence: 0.936804341333333

 $00:12:10.296 \longrightarrow 00:12:11.943$ all of our case at MGH we we found

NOTE Confidence: 0.936804341333333

 $00:12:12.001 \longrightarrow 00:12:13.688$ that there were two sort of peaks,

NOTE Confidence: 0.936804341333333

 $00{:}12{:}13.690 \dashrightarrow 00{:}12{:}16.306$ so the pediatric type focal from a peak.

NOTE Confidence: 0.936804341333333

 $00:12:16.310 \longrightarrow 00:12:17.417$ Peaked in adolescence,

NOTE Confidence: 0.936804341333333

 $00:12:17.417 \longrightarrow 00:12:20.000$ but you can see that it tailed

NOTE Confidence: 0.936804341333333

 $00:12:20.071 \longrightarrow 00:12:22.746$ into a dulthood versus.

NOTE Confidence: 0.936804341333333

 $00{:}12{:}22.746 \dashrightarrow 00{:}12{:}24.882$ They took the classic focal forma which

NOTE Confidence: 0.936804341333333

 $00:12:24.882 \longrightarrow 00:12:27.390$ as we know peaks in the in the 6th,

NOTE Confidence: 0.936804341333333 00:12:27.390 --> 00:12:28.200 7th decade,

 $00:12:28.200 \longrightarrow 00:12:30.630$ but it's in this intermediate range

NOTE Confidence: 0.936804341333333

 $00{:}12{:}30.630 \dashrightarrow 00{:}12{:}33.293$ where it becomes important to be

NOTE Confidence: 0.936804341333333

 $00:12:33.293 \longrightarrow 00:12:36.710$ able to distinguish the difference.

NOTE Confidence: 0.936804341333333

 $00:12:36.710 \longrightarrow 00:12:39.419$ So from this we proposed that there was a

NOTE Confidence: 0.936804341333333

 $00:12:39.419 \longrightarrow 00:12:42.038$ highly indolent subset of focalforma which.

NOTE Confidence: 0.936804341333333

00:12:42.040 --> 00:12:44.308 Occurred in patients which were not likely

NOTE Confidence: 0.936804341333333

 $00:12:44.308 \longrightarrow 00:12:46.959$ to progress and did not require chemotherapy.

NOTE Confidence: 0.936804341333333

00:12:46.960 --> 00:12:48.675 Characterized by the lack of the B,

NOTE Confidence: 0.936804341333333 00:12:48.680 --> 00:12:49.350 CL2B, C, NOTE Confidence: 0.936804341333333

00:12:49.350 --> 00:12:50.690 L6 arrangements and high

NOTE Confidence: 0.936804341333333

00:12:50.690 --> 00:12:51.360 proliferation fraction,

NOTE Confidence: 0.936804341333333

 $00:12:51.360 \longrightarrow 00:12:54.600$ and we hypothesize that they were

NOTE Confidence: 0.936804341333333

 $00:12:54.600 \longrightarrow 00:12:56.724$ biologically distinct and common in

NOTE Confidence: 0.936804341333333

00:12:56.724 --> 00:12:58.116 adolescents and young adults,

NOTE Confidence: 0.936804341333333

 $00:12:58.120 \longrightarrow 00:13:01.396$ but can occur in older patients.

NOTE Confidence: 0.936804341333333

00:13:01.400 --> 00:13:02.159 At the time,

00:13:02.159 --> 00:13:03.677 we were really excited about this,

NOTE Confidence: 0.936804341333333

 $00:13:03.680 \longrightarrow 00:13:07.544$ but we realized we saw a phenomenon that.

NOTE Confidence: 0.936804341333333 00:13:07.550 --> 00:13:07.918 You know, NOTE Confidence: 0.936804341333333

 $00:13:07.918 \longrightarrow 00:13:08.470$ we hadn't really,

NOTE Confidence: 0.936804341333333

 $00:13:08.470 \longrightarrow 00:13:09.875$ we they were histologically similar

NOTE Confidence: 0.936804341333333

 $00{:}13{:}09.875 \dashrightarrow 00{:}13{:}11.773$ to high grateful lymphoma in some ways

NOTE Confidence: 0.936804341333333

 $00:13:11.773 \longrightarrow 00:13:13.341$ and there was no direct evidence that

NOTE Confidence: 0.936804341333333

 $00{:}13{:}13.341 \dashrightarrow 00{:}13{:}15.086$ the ones that occurred in a dults were

NOTE Confidence: 0.936804341333333

 $00:13:15.086 \longrightarrow 00:13:17.394$ equivalent to the ones that occurred in kids.

NOTE Confidence: 0.936804341333333

00:13:17.394 --> 00:13:18.387 And practically speaking,

NOTE Confidence: 0.936804341333333 00:13:18.390 --> 00:13:18.928 we noticed, NOTE Confidence: 0.936804341333333

 $00:13:18.928 \longrightarrow 00:13:20.811$ I noticed that a lot of patients

NOTE Confidence: 0.936804341333333

 $00{:}13{:}20.811 \to 00{:}13{:}22.549$ who presented young patients,

NOTE Confidence: 0.936804341333333

00:13:22.550 --> 00:13:23.390 it depended their,

NOTE Confidence: 0.936804341333333

00:13:23.390 --> 00:13:25.350 their therapy depended upon who they saw.

 $00:13:25.350 \longrightarrow 00:13:27.415$ So if they saw a pediatric pediatric

NOTE Confidence: 0.936804341333333

00:13:27.415 --> 00:13:28.909 oncologist they would be quickly,

NOTE Confidence: 0.936804341333333

 $00:13:28.910 \longrightarrow 00:13:30.595$ they would be observed and

NOTE Confidence: 0.936804341333333

 $00:13:30.595 \longrightarrow 00:13:31.943$ they would do fine.

NOTE Confidence: 0.936804341333333

 $00:13:31.950 \longrightarrow 00:13:33.630$ And if they saw an adult

NOTE Confidence: 0.936804341333333

 $00:13:33.630 \longrightarrow 00:13:34.750$ oncologist they'd basically be

NOTE Confidence: 0.941930833333333

 $00:13:34.804 \longrightarrow 00:13:36.740$ given our chop and they would do fine.

NOTE Confidence: 0.941930833333333

 $00:13:36.740 \longrightarrow 00:13:39.458$ So we I thought it was important to go

 $00{:}13{:}39.458 \dashrightarrow 00{:}13{:}42.139$ further to define these objectively so that

NOTE Confidence: 0.941930833333333

 $00:13:42.140 \longrightarrow 00:13:44.620$ basically to avoid unnecessary therapy.

NOTE Confidence: 0.941930833333333

 $00{:}13{:}44.620 \dashrightarrow 00{:}13{:}46.456$ And so the question hypothesis is

NOTE Confidence: 0.941930833333333

 $00:13:46.456 \longrightarrow 00:13:48.108$ that pediatric type filial fund

NOTE Confidence: 0.941930833333333

00:13:48.108 --> 00:13:49.818 is biologically distinct and we

NOTE Confidence: 0.941930833333333

 $00:13:49.818 \longrightarrow 00:13:51.612$ wanted to look at the mutational

NOTE Confidence: 0.941930833333333

 $00:13:51.612 \longrightarrow 00:13:53.080$ profile differences between the two.

NOTE Confidence: 0.941930833333333

 $00:13:53.080 \longrightarrow 00:13:54.060$ Now to do this,

 $00:13:54.060 \longrightarrow 00:13:56.072$ we had to leverage colleagues from

NOTE Confidence: 0.941930833333333

 $00{:}13{:}56.072 \dashrightarrow 00{:}13{:}57.768$ different institutions across the

NOTE Confidence: 0.941930833333333

 $00{:}13{:}57.768 \dashrightarrow 00{:}14{:}00.318$ country to get these uncommon cases.

NOTE Confidence: 0.941930833333333

 $00:14:00.320 \longrightarrow 00:14:02.816$ So we put together 44 cases

NOTE Confidence: 0.941930833333333

00:14:02.816 --> 00:14:04.480 of limited stage disease,

NOTE Confidence: 0.941930833333333

 $00:14:04.480 \longrightarrow 00:14:06.330$ so we were not including

NOTE Confidence: 0.941930833333333

00:14:06.330 --> 00:14:07.440 advanced stage disease,

NOTE Confidence: 0.941930833333333

 $00{:}14{:}07.440 \dashrightarrow 00{:}14{:}09.680$ no DLBCL and basically split them up

NOTE Confidence: 0.941930833333333

 $00{:}14{:}09.680 \dashrightarrow 00{:}14{:}11.392$ into pediatric type focal components

NOTE Confidence: 0.941930833333333

 $00{:}14{:}11.392 \dashrightarrow 00{:}14{:}13.793$ defined by the BC L2 rearrangement and

NOTE Confidence: 0.941930833333333

 $00:14:13.793 \longrightarrow 00:14:15.574$ high proliferation fraction versus the

NOTE Confidence: 0.941930833333333

 $00{:}14{:}15.574 \dashrightarrow 00{:}14{:}18.341$ ones that either had BC L2 arrangement

NOTE Confidence: 0.941930833333333

 $00{:}14{:}18.341 \dashrightarrow 00{:}14{:}21.846$ or locally low proliferation fraction.

NOTE Confidence: 0.941930833333333

 $00:14:21.850 \longrightarrow 00:14:24.055$ And we found when we did this again that

NOTE Confidence: 0.941930833333333

 $00:14:24.055 \longrightarrow 00:14:26.083$ the the ones that we call pediatric

 $00:14:26.083 \longrightarrow 00:14:29.142$ type had a had a male predominance were

NOTE Confidence: 0.941930833333333

 $00:14:29.142 \longrightarrow 00:14:31.410$ mostly involving the head and neck.

NOTE Confidence: 0.941930833333333

 $00:14:31.410 \longrightarrow 00:14:33.402$ And when we looked at the ones above

NOTE Confidence: 0.941930833333333

 $00:14:33.402 \longrightarrow 00:14:35.126$ older than 18 or younger than 18,

NOTE Confidence: 0.941930833333333

 $00:14:35.130 \longrightarrow 00:14:37.839$ which is the classic definition of pediatric

NOTE Confidence: 0.941930833333333

 $00:14:37.839 \longrightarrow 00:14:40.249$ and how sometimes these were defined,

NOTE Confidence: 0.941930833333333

 $00{:}14{:}40.250 \dashrightarrow 00{:}14{:}42.482$ they had a similar breakdown male

NOTE Confidence: 0.941930833333333

 $00:14:42.482 \longrightarrow 00:14:44.788$ predominance and head and neck predominance.

NOTE Confidence: 0.941930833333333

 $00:14:44.788 \longrightarrow 00:14:47.278$ And in terms of therapy,

NOTE Confidence: 0.941930833333333

 $00:14:47.280 \longrightarrow 00:14:49.782$ a lot of the limited stage

NOTE Confidence: 0.941930833333333

00:14:49.782 --> 00:14:52.000 ones did get chemotherapy,

NOTE Confidence: 0.941930833333333

 $00:14:52.000 \longrightarrow 00:14:54.295$ the classic folk problems did

NOTE Confidence: 0.941930833333333

 $00:14:54.295 \longrightarrow 00:14:55.755$ get chemotherapy and radiation.

NOTE Confidence: 0.941930833333333

 $00:14:55.760 \longrightarrow 00:14:58.000$ A lot of the ones that were

NOTE Confidence: 0.941930833333333

00:14:58.000 --> 00:15:00.640 called PTFL did get excision,

NOTE Confidence: 0.941930833333333

 $00:15:00.640 \longrightarrow 00:15:03.240$ but the sort of rates were very different.

 $00:15:03.240 \longrightarrow 00:15:04.776$ So the the patients,

NOTE Confidence: 0.941930833333333

 $00{:}15{:}04.776 \dashrightarrow 00{:}15{:}08.412$ the PTFL patients did really well with

NOTE Confidence: 0.941930833333333

 $00:15:08.412 \longrightarrow 00:15:11.840$ with remission no evidence of disease.

NOTE Confidence: 0.941930833333333

 $00:15:11.840 \longrightarrow 00:15:14.241$ Whereas the the ones that were

NOTE Confidence: 0.941930833333333

00:15:14.241 --> 00:15:16.853 more classic had a BC L2 arrangement

NOTE Confidence: 0.941930833333333

 $00:15:16.853 \longrightarrow 00:15:19.115$ or high a low proliferation fraction

NOTE Confidence: 0.941930833333333

 $00:15:19.120 \longrightarrow 00:15:21.668$ were much more likely to recur and

NOTE Confidence: 0.941930833333333

 $00:15:21.668 \longrightarrow 00:15:22.760$ transformation events occurred

NOTE Confidence: 0.941930833333333

 $00:15:22.822 \longrightarrow 00:15:23.998$ solely in that group.

NOTE Confidence: 0.94193083333333

00:15:24.000 --> 00:15:27.405 This is a Kappa Meyer and when you

NOTE Confidence: 0.941930833333333

 $00:15:27.405 \longrightarrow 00:15:29.280$ looked at the breakdown between

NOTE Confidence: 0.941930833333333

 $00:15:29.280 \longrightarrow 00:15:30.996$ pediatric type in older patients

NOTE Confidence: 0.941930833333333

 $00{:}15{:}30.996 \dashrightarrow 00{:}15{:}33.377$ and and less than 18 or older than

NOTE Confidence: 0.941930833333333

 $00:15:33.377 \longrightarrow 00:15:36.554$ 18 the the the the same trends

NOTE Confidence: 0.94193083333333

 $00:15:36.554 \longrightarrow 00:15:40.330$ occurred in terms of doing well.

 $00:15:40.330 \longrightarrow 00:15:43.252$ So we then looked at the the

NOTE Confidence: 0.941930833333333

 $00:15:43.252 \longrightarrow 00:15:45.257$ molecular dynamics of these lesions

NOTE Confidence: 0.941930833333333

00:15:45.257 --> 00:15:48.070 and we found that the pediatric

NOTE Confidence: 0.941930833333333

 $00:15:48.070 \longrightarrow 00:15:51.101$ type colliculum informas had a very

NOTE Confidence: 0.941930833333333

 $00:15:51.101 \longrightarrow 00:15:53.458$ low genomic complexity with you

NOTE Confidence: 0.941930833333333

00:15:53.458 --> 00:15:55.796 know much fewer genome copy number

NOTE Confidence: 0.941930833333333

 $00:15:55.796 \longrightarrow 00:15:57.528$ alterations and genomic events

NOTE Confidence: 0.941930833333333

 $00:15:57.530 \longrightarrow 00:16:00.290$ than the typical for lymphomas.

 $00:16:00.290 \longrightarrow 00:16:02.621$ And there was a high higher predominance

NOTE Confidence: 0.941930833333333

00:16:02.621 --> 00:16:05.466 of loss of heterozygosity 1P36 and

 $00{:}16{:}05.466 \dashrightarrow 00{:}16{:}09.270$ deletions at that site of TNFRSF 14.

NOTE Confidence: 0.941930833333333

 $00{:}16{:}09.270 \dashrightarrow 00{:}16{:}11.376$ But the most striking thing was

NOTE Confidence: 0.941930833333333

 $00{:}16{:}11.376 \dashrightarrow 00{:}16{:}13.633$ when we looked at the pediatric

NOTE Confidence: 0.941930833333333

 $00{:}16{:}13.633 \dashrightarrow 00{:}16{:}16.342$ type whether lower than 18 or older

NOTE Confidence: 0.941930833333333

 $00:16:16.342 \longrightarrow 00:16:17.835$ than 18 that the classic.

NOTE Confidence: 0.941930833333333

 $00:16:17.835 \longrightarrow 00:16:20.353$ So we we did a targeted panel that

00:16:20.353 --> 00:16:22.143 included pretty much every gene

NOTE Confidence: 0.941930833333333

 $00{:}16{:}22.143 \dashrightarrow 00{:}16{:}23.774$ that had been mutated reported to be

NOTE Confidence: 0.941930833333333

 $00:16:23.774 \longrightarrow 00:16:25.269$ mutated in focal form at the time

NOTE Confidence: 0.938815971428571

00:16:27.390 --> 00:16:31.470 and which was much more than here almost 100

NOTE Confidence: 0.94312881

 $00:16:33.670 \longrightarrow 00:16:34.922$ I think 100 genes.

NOTE Confidence: 0.94312881

 $00:16:34.922 \longrightarrow 00:16:37.236$ These these on the left are sort

NOTE Confidence: 0.94312881

 $00:16:37.236 \longrightarrow 00:16:39.402$ of the ones that are classically

NOTE Confidence: 0.94312881

 $00:16:39.402 \longrightarrow 00:16:41.170$ mutated in full lymphoma.

NOTE Confidence: 0.94312881

 $00:16:41.170 \longrightarrow 00:16:43.502$ And you can see that the even limited

NOTE Confidence: 0.94312881

 $00{:}16{:}43.502 \dashrightarrow 00{:}16{:}46.268$ stage ones that had BC L2 arrangement

NOTE Confidence: 0.94312881

00:16:46.268 --> 00:16:48.224 or low proliferation fraction had a

NOTE Confidence: 0.94312881

 $00:16:48.224 \longrightarrow 00:16:50.247$ high frequency of these mutations.

NOTE Confidence: 0.94312881

 $00{:}16{:}50.250 \dashrightarrow 00{:}16{:}51.690$ But they were essentially

NOTE Confidence: 0.94312881

 $00:16:51.690 \longrightarrow 00:16:53.490$ not present in the PTF,

NOTE Confidence: 0.94312881

 $00:16:53.490 \longrightarrow 00:16:56.087$ the pediatric type full lymphomas other than

 $00:16:58.130 \longrightarrow 00:17:00.530$ TNFTNFTNFRSF 14.

NOTE Confidence: 0.94528522

 $00:17:00.530 \longrightarrow 00:17:02.750$ We also did helexome on a on a on on

NOTE Confidence: 0.94528522

 $00:17:02.821 \longrightarrow 00:17:05.245$ six of the cases and we didn't find

NOTE Confidence: 0.94528522

 $00:17:05.245 \longrightarrow 00:17:07.278$ any recurrent mutations at the time.

NOTE Confidence: 0.94528522

 $00:17:07.280 \longrightarrow 00:17:09.902$ And this histogram just shows the purple

NOTE Confidence: 0.94528522

 $00{:}17{:}09.902 \dashrightarrow 00{:}17{:}12.219$ and the blue represents 2 big subsets

NOTE Confidence: 0.94528522

 $00{:}17{:}12.219 \dashrightarrow 00{:}17{:}14.853$ of typical classic focal FOMA and the

NOTE Confidence: 0.94528522

00:17:14.853 --> 00:17:17.640 most common mutations including ML,

NOTE Confidence: 0.94528522

00:17:17.640 --> 00:17:19.340 L2, probably PA,

NOTE Confidence: 0.94528522

 $00:17:19.340 \longrightarrow 00:17:21.040$ lot of chromatin modifying genes.

NOTE Confidence: 0.94528522

 $00{:}17{:}21.040 \dashrightarrow 00{:}17{:}22.608$ And you can see that the low

NOTE Confidence: 0.94528522

00:17:22.608 --> 00:17:23.871 frequency in the pediatric type

NOTE Confidence: 0.94528522

00:17:23.871 --> 00:17:25.236 focalform other than the Tina,

NOTE Confidence: 0.94528522

 $00:17:25.240 \longrightarrow 00:17:26.494$ Tina, RSF 14.

NOTE Confidence: 0.94528522

00:17:26.494 --> 00:17:29.002 So we thought that they suggested

NOTE Confidence: 0.94528522

 $00:17:29.002 \longrightarrow 00:17:31.797$ definitely these were biologically distinct

 $00:17:31.800 \longrightarrow 00:17:34.558$ and we were pretty happy with that.

NOTE Confidence: 0.94528522

 $00{:}17{:}34.560 \dashrightarrow 00{:}17{:}36.576$ And but we weren't clear what was driving

NOTE Confidence: 0.94528522

 $00:17:36.576 \longrightarrow 00:17:38.101$ the the pediatric type proliferation

NOTE Confidence: 0.94528522

00:17:38.101 --> 00:17:40.341 but at the same time we submitted

NOTE Confidence: 0.94528522

 $00:17:40.393 \longrightarrow 00:17:42.199$ to to blood and we're very excited.

NOTE Confidence: 0.94528522

 $00{:}17{:}42.200 \to 00{:}17{:}45.297$ We we received a review saying well you

NOTE Confidence: 0.94528522

00:17:45.297 --> 00:17:47.033 only looked at six cases of whole EXIM.

NOTE Confidence: 0.94528522

 $00:17:47.040 \longrightarrow 00:17:48.867$ We think you should look up more

NOTE Confidence: 0.94528522

 $00{:}17{:}48.867 \dashrightarrow 00{:}17{:}50.616$ and that was a little depressing

NOTE Confidence: 0.94528522

 $00:17:50.616 \longrightarrow 00:17:52.620$ at the time but it was turned

NOTE Confidence: 0.94528522

 $00:17:52.620 \longrightarrow 00:17:54.770$ out to be very fruitful and maybe

NOTE Confidence: 0.94528522

 $00:17:54.770 \longrightarrow 00:17:56.960$ appreciate the review process because

NOTE Confidence: 0.94528522

 $00{:}17{:}56.960 \dashrightarrow 00{:}17{:}59.000$ we we basically sequenced all,

NOTE Confidence: 0.94528522

 $00:17:59.000 \longrightarrow 00:18:01.200$ the whole EXIM and all we found that.

NOTE Confidence: 0.94528522

 $00:18:01.200 \longrightarrow 00:18:02.916$ About 60% of these cases had

00:18:02.916 --> 00:18:04.999 mutations in the MAP kinase pathway,

NOTE Confidence: 0.94528522

00:18:05.000 --> 00:18:07.655 particularly MAP 2K1 at a

NOTE Confidence: 0.94528522

 $00:18:07.655 \longrightarrow 00:18:10.300$ a targeted hotspot site,

NOTE Confidence: 0.94528522

 $00:18:10.300 \longrightarrow 00:18:13.708$ which is present in this negative

NOTE Confidence: 0.94528522

 $00:18:13.708 \longrightarrow 00:18:16.786$ regulatory region of map 2K1 and represents

NOTE Confidence: 0.94528522

 $00:18:16.786 \longrightarrow 00:18:19.144$ a mutation that's commonly seen in

NOTE Confidence: 0.94528522

 $00:18:19.144 \longrightarrow 00:18:21.199$ other neoplasms including melanomas,

NOTE Confidence: 0.94528522

00:18:21.200 --> 00:18:23.208 ***** hand cell hysterocytosis,

NOTE Confidence: 0.94528522

00:18:23.208 --> 00:18:25.718 B rap negative hairy cells,

NOTE Confidence: 0.94528522

 $00:18:25.720 \longrightarrow 00:18:26.002$ etcetera.

NOTE Confidence: 0.94528522

00:18:26.002 --> 00:18:28.258 So we were very excited about this and

NOTE Confidence: 0.94528522

 $00:18:28.258 \longrightarrow 00:18:30.365$ we thought this clearly demonstrated

NOTE Confidence: 0.94528522

 $00:18:30.365 \longrightarrow 00:18:32.575$ that these were biologically distinct.

NOTE Confidence: 0.94528522

 $00:18:32.580 \longrightarrow 00:18:35.492$ And at the time three groups were

NOTE Confidence: 0.94528522

00:18:35.492 --> 00:18:38.100 working on this simultaneously.

NOTE Confidence: 0.94528522

 $00:18:38.100 \longrightarrow 00:18:40.260$ And this is sort of a summary of

 $00:18:40.260 \longrightarrow 00:18:42.759$ all the cases in those three groups.

NOTE Confidence: 0.94528522

 $00{:}18{:}42.760 \dashrightarrow 00{:}18{:}45.707$ You can see that again the common

NOTE Confidence: 0.94528522

 $00:18:45.707 \longrightarrow 00:18:47.895$ mutations typical and full lymphoma

NOTE Confidence: 0.94528522

 $00:18:47.895 \longrightarrow 00:18:50.842$ are very lowly are very rare in

NOTE Confidence: 0.94528522

 $00:18:50.842 \longrightarrow 00:18:53.336$ pediatric type and the map 2K1 and

NOTE Confidence: 0.94528522

 $00:18:53.336 \longrightarrow 00:18:55.056$ the MAP kinase pathway mutations

NOTE Confidence: 0.94528522

 $00:18:55.056 \longrightarrow 00:18:57.485$ really seem to be to drive the

NOTE Confidence: 0.94528522

 $00:18:57.485 \longrightarrow 00:18:58.833$ pediatric type molecular ones.

NOTE Confidence: 0.94528522

 $00:18:58.840 \longrightarrow 00:19:00.940$ The the one that is shared is

NOTE Confidence: 0.94528522

 $00:19:00.940 \longrightarrow 00:19:03.440$ the mutation of TNFRSF 14.

NOTE Confidence: 0.94528522

 $00:19:03.440 \longrightarrow 00:19:05.744$ So from this we you know we use

NOTE Confidence: 0.94528522

 $00:19:05.744 \longrightarrow 00:19:07.633$ the term pediatric type lymphoma

NOTE Confidence: 0.94528522

 $00{:}19{:}07.633 \dashrightarrow 00{:}19{:}10.510$ to to include the fact that these

NOTE Confidence: 0.94528522

00:19:10.587 --> 00:19:12.319 occur in older patients.

NOTE Confidence: 0.94528522

 $00:19:12.320 \longrightarrow 00:19:14.581$ And you know from that that sort

00:19:14.581 --> 00:19:16.945 of helped define the current our

NOTE Confidence: 0.94528522

 $00{:}19{:}16.945 \dashrightarrow 00{:}19{:}18.713$ current understanding of pediatric

NOTE Confidence: 0.94528522

00:19:18.713 --> 00:19:21.480 type of lymphoma and in the

NOTE Confidence: 0.94528522

 $00:19:21.480 \longrightarrow 00:19:23.905$ DOUBLECHILD 2016 that was the help

NOTE Confidence: 0.94528522

 $00:19:23.905 \longrightarrow 00:19:25.557$ define the the characteristics.

NOTE Confidence: 0.94528522

00:19:25.560 --> 00:19:27.390 Some of the important features are

NOTE Confidence: 0.94528522

 $00:19:27.390 \longrightarrow 00:19:29.555$ that grading is not used for these

NOTE Confidence: 0.94528522

 $00:19:29.555 \longrightarrow 00:19:31.768$ for the reasons I mentioned there's

NOTE Confidence: 0.94528522

 $00{:}19{:}31.768 \dashrightarrow 00{:}19{:}34.960$ never any advantage disease and

NOTE Confidence: 0.94528522

 $00:19:34.960 \longrightarrow 00:19:36.584$ there's no component of the LBCL.

NOTE Confidence: 0.94528522

 $00:19:36.584 \longrightarrow 00:19:38.600$ So if there is a if you see the

NOTE Confidence: 0.94528522

 $00{:}19{:}38.600 \dashrightarrow 00{:}19{:}41.420$ LBCL that excludes this diagnosis.

NOTE Confidence: 0.94528522

 $00:19:41.420 \longrightarrow 00:19:43.020$ And the clinical implications that

NOTE Confidence: 0.94528522

 $00:19:43.020 \longrightarrow 00:19:44.944$ both children and adults with PTFL

NOTE Confidence: 0.94528522

 $00:19:44.944 \longrightarrow 00:19:46.888$ do not likely need chemotherapy when

NOTE Confidence: 0.94528522

 $00:19:46.888 \longrightarrow 00:19:48.546$ they're when they're diagnosed that

00:19:48.546 --> 00:19:51.898 way and the map kinase mutation may help,

NOTE Confidence: 0.94528522

 $00{:}19{:}51.900 \dashrightarrow 00{:}19{:}53.460$ may help with the diagnosis.

NOTE Confidence: 0.94528522

00:19:53.460 --> 00:19:55.315 So going back to the patient I

NOTE Confidence: 0.94528522

 $00:19:55.315 \longrightarrow 00:19:56.480$ described that was originally

NOTE Confidence: 0.94528522

 $00:19:56.480 \longrightarrow 00:19:58.334$ diagnosed as grade three O 3,

NOTE Confidence: 0.94528522

 $00:19:58.340 \longrightarrow 00:20:01.735$ this was re diagnosed by Elaine Jaffe

NOTE Confidence: 0.924502703333334

 $00:20:01.740 \longrightarrow 00:20:04.820$ at at, at as pediatric type

NOTE Confidence: 0.924502703333334

 $00:20:04.820 \longrightarrow 00:20:07.560$ for lymphoma but at the site where

NOTE Confidence: 0.924502703333334

 $00{:}20{:}07.560 \dashrightarrow 00{:}20{:}09.420$ the patient was being treated.

NOTE Confidence: 0.924502703333334

 $00:20:09.420 \longrightarrow 00:20:10.440$ They were still going to give

NOTE Confidence: 0.924502703333334

 $00:20:10.440 \longrightarrow 00:20:11.388$ our chop because they weren't

NOTE Confidence: 0.924502703333334

00:20:11.388 --> 00:20:12.296 familiar with this entity.

NOTE Confidence: 0.924502703333334

 $00{:}20{:}12.300 \dashrightarrow 00{:}20{:}14.708$ And so I received a call from the

NOTE Confidence: 0.924502703333334

00:20:14.708 --> 00:20:17.231 mom about this and had seen the paper

NOTE Confidence: 0.924502703333334

 $00{:}20{:}17.231 \dashrightarrow 00{:}20{:}20.152$ and I refer them to our ecology team

 $00:20:20.152 \longrightarrow 00:20:22.172$ who who basically were suggested

NOTE Confidence: 0.924502703333334

 $00{:}20{:}22.180 \to 00{:}20{:}23.885$ observation and the patient's doing

NOTE Confidence: 0.924502703333334

 $00:20:23.885 \longrightarrow 00:20:26.255$ well and I still occasionally get calls

NOTE Confidence: 0.924502703333334

 $00:20:26.255 \longrightarrow 00:20:29.193$ from families about this where the

NOTE Confidence: 0.924502703333334

00:20:29.193 --> 00:20:31.540 the thought is to treat aggressively

NOTE Confidence: 0.924502703333334

00:20:31.540 --> 00:20:34.428 and they're always actually happy

NOTE Confidence: 0.924502703333334

 $00:20:34.428 \longrightarrow 00:20:36.920$ to to to feel like I've made some

NOTE Confidence: 0.924502703333334

 $00:20:36.920 \longrightarrow 00:20:39.279$ impact on the care of these patients.

NOTE Confidence: 0.924502703333334

 $00:20:39.280 \longrightarrow 00:20:40.984$ I just wanted to emphasize that

NOTE Confidence: 0.924502703333334

 $00:20:40.984 \longrightarrow 00:20:43.140$ it's really important to to follow

NOTE Confidence: 0.924502703333334

 $00{:}20{:}43.140 \dashrightarrow 00{:}20{:}46.656$ all the criteria and this this

NOTE Confidence: 0.924502703333334

 $00:20:46.656 \longrightarrow 00:20:48.712$ case sort of demonstrates why.

NOTE Confidence: 0.924502703333334

 $00:20:48.712 \longrightarrow 00:20:52.273$ So this is a 25 year old with

NOTE Confidence: 0.924502703333334

00:20:52.273 --> 00:20:53.599 cervical lymphadenopathy,

NOTE Confidence: 0.924502703333334

00:20:53.600 --> 00:20:56.414 the nice space dot star sky pattern

NOTE Confidence: 0.924502703333334

 $00:20:56.414 \longrightarrow 00:20:59.096$ and the sort of blastoid type

 $00:20:59.096 \longrightarrow 00:21:02.725$ cells and these are CD10 positive

NOTE Confidence: 0.924502703333334

 $00:21:02.725 \longrightarrow 00:21:06.250$ with B cells with a relatively

NOTE Confidence: 0.924502703333334

 $00:21:06.250 \longrightarrow 00:21:08.562$ high proliferation fraction and.

NOTE Confidence: 0.924502703333334

 $00:21:08.570 \longrightarrow 00:21:10.202$ No BC L2 expression.

NOTE Confidence: 0.924502703333334

 $00:21:10.202 \longrightarrow 00:21:12.446$ So this was brought to me as a as a

NOTE Confidence: 0.924502703333334

 $00:21:12.446 \longrightarrow 00:21:14.144$ consult as whether this could be a

NOTE Confidence: 0.924502703333334

00:21:14.144 --> 00:21:15.685 nice classic case of pediatric type

NOTE Confidence: 0.924502703333334

 $00{:}21{:}15.685 \dashrightarrow 00{:}21{:}17.540$ lymphoma and I asked you know did

NOTE Confidence: 0.924502703333334

00:21:17.540 --> 00:21:20.998 you do the fish for B CL2B C L6 and

NOTE Confidence: 0.924502703333334

 $00:21:20.998 \longrightarrow 00:21:23.291$ they didn't and it was frustrating

NOTE Confidence: 0.924502703333334

 $00:21:23.291 \longrightarrow 00:21:25.440$ for them but it after came back

NOTE Confidence: 0.924502703333334

 $00{:}21{:}25.505 \dashrightarrow 00{:}21{:}27.410$ with ABC L6 gene rearrangement.

NOTE Confidence: 0.924502703333334

 $00{:}21{:}27.410 \dashrightarrow 00{:}21{:}30.182$ So this is essentially a conventional

NOTE Confidence: 0.924502703333334

00:21:30.182 --> 00:21:31.964 BC L2 negative lymphoma.

NOTE Confidence: 0.924502703333334

 $00:21:31.964 \longrightarrow 00:21:34.328$ So it's not a pediatric type

 $00:21:34.330 \longrightarrow 00:21:36.510$ which and these do occur.

NOTE Confidence: 0.924502703333334

 $00:21:36.510 \longrightarrow 00:21:38.790$ And interestingly later there was

NOTE Confidence: 0.924502703333334

 $00:21:38.790 \longrightarrow 00:21:40.456$ you know months later there was a

NOTE Confidence: 0.924502703333334

00:21:40.456 --> 00:21:41.622 axillary lymph adenopathy and they

NOTE Confidence: 0.924502703333334

 $00:21:41.622 \longrightarrow 00:21:43.036$ re biopsied it because they were a

NOTE Confidence: 0.924502703333334

 $00:21:43.036 \longrightarrow 00:21:44.234$ little concerned by the diagnosis

NOTE Confidence: 0.924502703333334

 $00:21:44.234 \longrightarrow 00:21:46.083$ that it was not called pediatric type

NOTE Confidence: 0.924502703333334

 $00:21:46.083 \longrightarrow 00:21:49.695$ this time the Falcons were much smaller.

NOTE Confidence: 0.924502703333334

 $00:21:49.695 \longrightarrow 00:21:52.785$ There was this eosinophil deposits and

NOTE Confidence: 0.924502703333334

 $00:21:52.790 \longrightarrow 00:21:55.184$ deposits that looked a little bit like

NOTE Confidence: 0.924502703333334

 $00{:}21{:}55.184 \dashrightarrow 00{:}21{:}57.350$ Dutcher bodies and some of the cells,

NOTE Confidence: 0.924502703333334

 $00:21:57.350 \longrightarrow 00:22:00.520$ the cells were relatively small.

NOTE Confidence: 0.924502703333334

 $00{:}22{:}00.520 \dashrightarrow 00{:}22{:}02.806$ The follicles were or small smaller

NOTE Confidence: 0.924502703333334

 $00:22:02.806 \longrightarrow 00:22:05.152$ again CD10 positive but this time

NOTE Confidence: 0.924502703333334

00:22:05.152 --> 00:22:07.027 the proliferation fraction was low

NOTE Confidence: 0.924502703333334

 $00{:}22{:}07.027 \dashrightarrow 00{:}22{:}09.318$ and there was BC L2 expression.

 $00:22:09.320 \longrightarrow 00:22:12.116$ So clearly a case of classic

NOTE Confidence: 0.924502703333334

00:22:12.116 --> 00:22:13.514 classic folk lymphoma.

NOTE Confidence: 0.924502703333334

 $00:22:13.520 \longrightarrow 00:22:15.050$ So it's really important to follow

NOTE Confidence: 0.924502703333334

 $00:22:15.050 \longrightarrow 00:22:16.385$ all those guidelines and make

NOTE Confidence: 0.924502703333334

 $00{:}22{:}16.385 \dashrightarrow 00{:}22{:}17.720$ the diagnosis of pediatric type.

NOTE Confidence: 0.924502703333334

00:22:17.720 --> 00:22:19.799 It's not just the BC L2 negativity.

NOTE Confidence: 0.933963975

 $00:22:22.400 \longrightarrow 00:22:24.745$ So from that you know we looked

NOTE Confidence: 0.933963975

 $00:22:24.745 \longrightarrow 00:22:26.568$ at several subtypes of folk

NOTE Confidence: 0.933963975

 $00{:}22{:}26.568 \dashrightarrow 00{:}22{:}28.800$ lymphoma to to try to understand.

NOTE Confidence: 0.933963975

 $00{:}22{:}28.800 \dashrightarrow 00{:}22{:}32.160$ Them and sort of the variation in in

NOTE Confidence: 0.933963975

 $00{:}22{:}32.160 \dashrightarrow 00{:}22{:}34.160$ their behavior and I'll just mention

NOTE Confidence: 0.933963975

 $00:22:34.160 \longrightarrow 00:22:36.781$ while the other one which is the primary

NOTE Confidence: 0.933963975

 $00{:}22{:}36.781 \dashrightarrow 00{:}22{:}38.425$ utaneous follicle central lymphoma

NOTE Confidence: 0.933963975

 $00:22:38.425 \longrightarrow 00:22:40.600$ which are localized skin lesions.

NOTE Confidence: 0.933963975

 $00:22:40.600 \longrightarrow 00:22:43.600$ They by definition don't are not

00:22:43.600 --> 00:22:45.845 systemic disease and they often

NOTE Confidence: 0.933963975

 $00:22:45.845 \longrightarrow 00:22:47.560$ occur in the head and the trunk.

NOTE Confidence: 0.933963975

 $00:22:47.560 \longrightarrow 00:22:49.640$ They have an excellent prognosis.

NOTE Confidence: 0.933963975

00:22:49.640 --> 00:22:52.118 Again they're negative for BC L2,

NOTE Confidence: 0.933963975

 $00{:}22{:}52.120 \dashrightarrow 00{:}22{:}54.600$ they lack BC L2 rearrangements.

NOTE Confidence: 0.933963975

 $00{:}22{:}54.600 \dashrightarrow 00{:}22{:}57.060$ So they're clear similarities to

NOTE Confidence: 0.933963975

00:22:57.060 --> 00:22:59.520 to pediatric type of lymphoma.

NOTE Confidence: 0.933963975

 $00:22:59.520 \longrightarrow 00:23:02.560$ So we wanted to investigate to see if

NOTE Confidence: 0.933963975

 $00:23:02.560 \longrightarrow 00:23:05.120$ we can understand understand these.

NOTE Confidence: 0.933963975

 $00:23:05.120 \longrightarrow 00:23:09.236$ We did, we did a study where we

NOTE Confidence: 0.933963975

 $00{:}23{:}09.240 \dashrightarrow 00{:}23{:}13.240$ basically got primary continuous,

NOTE Confidence: 0.933963975

 $00{:}23{:}13.240 \dashrightarrow 00{:}23{:}15.630$ continuous focal pharma and and

NOTE Confidence: 0.933963975

00:23:15.630 --> 00:23:17.542 secondary primarily being ones

NOTE Confidence: 0.933963975

 $00{:}23{:}17.542 \dashrightarrow 00{:}23{:}19.853$ that occurred in the skin and

NOTE Confidence: 0.933963975

 $00:23:19.853 \longrightarrow 00:23:21.518$ actually and and not systemically.

NOTE Confidence: 0.933963975

 $00:23:21.520 \longrightarrow 00:23:23.355$ Initially there were four cases

 $00:23:23.355 \longrightarrow 00:23:25.565$ and we occasionally see this where

NOTE Confidence: 0.933963975

 $00:23:25.565 \longrightarrow 00:23:27.707$ it it fulfills the features of of.

NOTE Confidence: 0.933963975

00:23:27.710 --> 00:23:29.630 A primary utanous follicle center lymphoma,

NOTE Confidence: 0.933963975

 $00:23:29.630 \longrightarrow 00:23:31.550$ but then years later, months later,

NOTE Confidence: 0.933963975

 $00:23:31.550 \longrightarrow 00:23:34.150$ years later has systemic dissemination.

NOTE Confidence: 0.933963975

 $00:23:34.150 \longrightarrow 00:23:36.388$ So we had four of those.

NOTE Confidence: 0.933963975

 $00:23:36.390 \longrightarrow 00:23:38.868$ And then we also had secondary utanous

NOTE Confidence: 0.933963975

 $00:23:38.868 \longrightarrow 00:23:40.691$ follicle center lymphoma where there

NOTE Confidence: 0.933963975

00:23:40.691 --> 00:23:42.436 was a previous systemic disease

NOTE Confidence: 0.933963975

 $00:23:42.436 \longrightarrow 00:23:44.609$ involving the skin or they currently

NOTE Confidence: 0.933963975

 $00:23:44.609 \longrightarrow 00:23:46.745$ presented systemically and in the skin.

NOTE Confidence: 0.933963975

 $00:23:46.750 \longrightarrow 00:23:49.654$ And so the hypothesis that these

NOTE Confidence: 0.933963975

 $00{:}23{:}49.654 \dashrightarrow 00{:}23{:}52.100$ would be genetically distinct and

NOTE Confidence: 0.933963975

 $00{:}23{:}52.100 \dashrightarrow 00{:}23{:}54.650$ there may be initial differences.

NOTE Confidence: 0.933963975

 $00:23:54.650 \longrightarrow 00:23:57.242$ So you can see here that the median range,

 $00:23:57.250 \longrightarrow 00:23:58.950$ age range was approximately

NOTE Confidence: 0.933963975

 $00{:}23{:}58.950 \dashrightarrow 00{:}24{:}00.650$ similar across these groups

NOTE Confidence: 0.942266216

 $00:24:03.330 \longrightarrow 00:24:08.387$ and in terms of the rapeutic therapy

NOTE Confidence: 0.942266216

 $00{:}24{:}08.387 \dashrightarrow 00{:}24{:}10.889$ was pretty it was pretty similar

NOTE Confidence: 0.942266216

 $00:24:10.890 \longrightarrow 00:24:13.438$ as well and the patients with

NOTE Confidence: 0.942266216

 $00{:}24{:}13.438 \dashrightarrow 00{:}24{:}14.923$ primary continuous fossil center

NOTE Confidence: 0.942266216

00:24:14.923 --> 00:24:17.240 of course did much better and but

NOTE Confidence: 0.942266216

 $00:24:17.240 \longrightarrow 00:24:19.585$ they they did they did recur as

NOTE Confidence: 0.942266216

 $00:24:19.585 \longrightarrow 00:24:22.193$ these as these cases do recur but

NOTE Confidence: 0.942266216

 $00:24:22.193 \longrightarrow 00:24:24.480$ the patients still do very well.

NOTE Confidence: 0.942266216

 $00:24:24.480 \longrightarrow 00:24:26.482$ One of the interesting things we noted

NOTE Confidence: 0.942266216

 $00:24:26.482 \longrightarrow 00:24:28.540$ was that the recurrences tended to

NOTE Confidence: 0.942266216

 $00{:}24{:}28.540 \dashrightarrow 00{:}24{:}31.520$ occur at the similar same location.

NOTE Confidence: 0.942266216

 $00:24:31.520 \longrightarrow 00:24:32.672$ So you can see.

NOTE Confidence: 0.942266216

 $00:24:32.672 \longrightarrow 00:24:34.976$ You can see that here where the

NOTE Confidence: 0.942266216

 $00:24:34.976 \longrightarrow 00:24:37.635$ recurrences occurred pretty much at the

00:24:37.635 --> 00:24:40.304 same sites as the primary location,

NOTE Confidence: 0.942266216

 $00{:}24{:}40.304 \dashrightarrow 00{:}24{:}42.345$ even the secondary recurrences.

NOTE Confidence: 0.942266216

 $00:24:42.345 \longrightarrow 00:24:46.095$ Whereas the the four cases that

NOTE Confidence: 0.942266216

 $00:24:46.095 \longrightarrow 00:24:49.816$ actually eventually recurred in a

NOTE Confidence: 0.942266216

 $00{:}24{:}49.816 \dashrightarrow 00{:}24{:}52.000$ in a different site or were more.

NOTE Confidence: 0.942266216

00:24:52.000 --> 00:24:53.800 Groups presented systemically

NOTE Confidence: 0.942266216

 $00:24:53.800 \longrightarrow 00:24:56.142$ had quite interesting locations

NOTE Confidence: 0.942266216

 $00:24:56.142 \longrightarrow 00:24:59.280$ such as the dura breast and

NOTE Confidence: 0.950317

 $00:25:01.640 \longrightarrow 00:25:04.744$ bone marrow, and so one of

NOTE Confidence: 0.950317

 $00:25:04.744 \longrightarrow 00:25:06.700$ the things we noted was that

NOTE Confidence: 0.950317

 $00:25:06.787 \longrightarrow 00:25:09.199$ these secondary cutaneous folk,

NOTE Confidence: 0.950317

 $00:25:09.200 \longrightarrow 00:25:11.680$ the secondary cutaneous folk lymphomas,

NOTE Confidence: 0.950317

 $00:25:11.680 \longrightarrow 00:25:13.912$ harbored a lot of the mutations

NOTE Confidence: 0.950317

 $00:25:13.912 \longrightarrow 00:25:15.850$ in the chromatin modifying genes.

NOTE Confidence: 0.950317

 $00:25:15.850 \longrightarrow 00:25:18.070$ Whereas again the primary cutaneous had

00:25:18.070 --> 00:25:20.768 fewer although they were more they were they,

NOTE Confidence: 0.950317

 $00:25:20.770 \longrightarrow 00:25:22.178$ they occurred more frequently.

NOTE Confidence: 0.950317

 $00:25:22.178 \longrightarrow 00:25:25.024$ I mean they they had there were

NOTE Confidence: 0.950317

 $00:25:25.024 \longrightarrow 00:25:27.039$ more cases than in primary pediatric

NOTE Confidence: 0.950317

 $00:25:27.039 \longrightarrow 00:25:29.831$ type and that that had these but they

NOTE Confidence: 0.950317

 $00:25:29.831 \longrightarrow 00:25:32.646$ were definitely much fewer than the

NOTE Confidence: 0.950317

 $00:25:32.646 \longrightarrow 00:25:34.900$ secondary cutaneous folk lymphomas,

NOTE Confidence: 0.950317

 $00:25:34.900 \longrightarrow 00:25:38.762$ the few cases that actually presented

NOTE Confidence: 0.950317

 $00{:}25{:}38.762 \dashrightarrow 00{:}25{:}41.290$ like primary cutaneous falcal,

NOTE Confidence: 0.950317

 $00:25:41.290 \longrightarrow 00:25:44.070$ center lymphoma but then.

NOTE Confidence: 0.950317

 $00{:}25{:}44.070 \dashrightarrow 00{:}25{:}45.918$ Showed systemic involvement

NOTE Confidence: 0.950317

 $00:25:45.918 \longrightarrow 00:25:47.150$ interestingly showed

NOTE Confidence: 0.9462458875

 $00{:}25{:}49.350 \dashrightarrow 00{:}25{:}51.850$ more frequent mutations in these

NOTE Confidence: 0.9462458875

 $00{:}25{:}51.850 \dashrightarrow 00{:}25{:}53.350$ chromatin modifying genes.

NOTE Confidence: 0.91897162

 $00:25:55.390 \longrightarrow 00:25:59.990$ So we proposed an algorithm to try to

NOTE Confidence: 0.91897162

 $00:25:59.990 \longrightarrow 00:26:03.630$ predict cases or to to help support

 $00:26:03.630 \longrightarrow 00:26:07.122$ cases that we that would potentially

NOTE Confidence: 0.91897162

 $00:26:07.122 \longrightarrow 00:26:10.020$ behave either at the time of diagnosis

NOTE Confidence: 0.91897162

 $00:26:10.020 \longrightarrow 00:26:12.534$ or later with systemic disease and.

NOTE Confidence: 0.91897162

 $00:26:12.534 \longrightarrow 00:26:15.662$ Basically the way it works is 1

NOTE Confidence: 0.91897162

 $00:26:15.662 \longrightarrow 00:26:18.776$ criteria is having both mutations in

NOTE Confidence: 0.91897162

00:26:18.776 --> 00:26:22.882 KMTTD and Kreb BP or having more than

NOTE Confidence: 0.91897162

00:26:22.882 --> 00:26:25.347 three chromatin modifier gene mutate,

NOTE Confidence: 0.91897162

 $00{:}26{:}25.350 \dashrightarrow 00{:}26{:}28.101$ more than 3 mutations and chromatin modifier

NOTE Confidence: 0.91897162

 $00{:}26{:}28.101 \dashrightarrow 00{:}26{:}30.710$ genes or the presence of BCLTG arrangement.

NOTE Confidence: 0.91897162

 $00:26:30.710 \longrightarrow 00:26:33.986$ And we found that if you had more than two

NOTE Confidence: 0.937570026666667

00:26:37.110 --> 00:26:39.406 of these two or more of these criteria

NOTE Confidence: 0.937570026666667

 $00:26:39.406 \longrightarrow 00:26:41.277$ that there was a very high risk.

NOTE Confidence: 0.937570026666667

 $00{:}26{:}41.280 \dashrightarrow 00{:}26{:}43.572$ That this represented a lesion that

NOTE Confidence: 0.937570026666667

 $00:26:43.572 \longrightarrow 00:26:46.235$ was going to behave more systemically.

NOTE Confidence: 0.937570026666667

 $00:26:46.235 \longrightarrow 00:26:48.760$ And just to demonstrate this,

 $00:26:48.760 \longrightarrow 00:26:50.312$ these are few cases.

NOTE Confidence: 0.937570026666667

00:26:50.312 --> 00:26:53.220 This is 1 case of Prime Minister

NOTE Confidence: 0.937570026666667

 $00:26:53.220 \longrightarrow 00:26:55.536$ Falcon Center Oklahoma with that was

NOTE Confidence: 0.937570026666667

 $00:26:55.536 \longrightarrow 00:26:57.960$ had no BC L2 generated in the 74

NOTE Confidence: 0.937570026666667

 $00:26:57.960 \longrightarrow 00:27:01.238$ year old in the scalp and this had

NOTE Confidence: 0.937570026666667

00:27:01.238 --> 00:27:03.794 classic there was CD20 positive cells,

NOTE Confidence: 0.937570026666667

 $00:27:03.800 \longrightarrow 00:27:06.716$ somewhat of a high proliferation fraction.

NOTE Confidence: 0.937570026666667

 $00:27:06.720 \longrightarrow 00:27:09.457$ Again the cells were BC L2 negative.

NOTE Confidence: 0.937570026666667

00:27:09.460 --> 00:27:11.300 There was a relatively high,

NOTE Confidence: 0.937570026666667

00:27:11.300 --> 00:27:12.956 like I mentioned,

NOTE Confidence: 0.937570026666667

 $00{:}27{:}12.956 \dashrightarrow 00{:}27{:}14.670$ proliferation fraction and there

NOTE Confidence: 0.937570026666667

 $00:27:14.670 \longrightarrow 00:27:16.805$ was no mutations in these in the

NOTE Confidence: 0.937570026666667

 $00:27:16.805 \longrightarrow 00:27:18.740$ common chromatin modifier genes.

NOTE Confidence: 0.937570026666667

 $00:27:18.740 \longrightarrow 00:27:22.188$ There was no B CL2B C L6 arrangement

NOTE Confidence: 0.937570026666667

 $00:27:22.188 \longrightarrow 00:27:25.470$ and this patient to the end of follow

NOTE Confidence: 0.937570026666667

 $00:27:25.470 \longrightarrow 00:27:27.678$ up never had any systemic disease,

 $00:27:27.678 \longrightarrow 00:27:28.896$ but there was.

NOTE Confidence: 0.937570026666667

 $00:27:28.900 \longrightarrow 00:27:31.350$ Here's another case of a 47 year

NOTE Confidence: 0.937570026666667

 $00:27:31.350 \longrightarrow 00:27:34.976$ old male who had a forehead lesion.

NOTE Confidence: 0.937570026666667

00:27:34.980 --> 00:27:37.220 The I HC showed terminal Center B cells,

NOTE Confidence: 0.937570026666667

 $00:27:37.220 \longrightarrow 00:27:40.480$ but these were BC L2.

NOTE Confidence: 0.937570026666667

 $00:27:40.480 \longrightarrow 00:27:42.676$ Positive there was no BC L2,

NOTE Confidence: 0.937570026666667

 $00:27:42.680 \longrightarrow 00:27:44.910$ B CL6GG arrangements.

NOTE Confidence: 0.937570026666667

 $00:27:44.910 \longrightarrow 00:27:47.721$ It was signed out as possible cutaneous

NOTE Confidence: 0.937570026666667

 $00{:}27{:}47.721 \dashrightarrow 00{:}27{:}50.526$ falcocenter lymphoma primary but these

NOTE Confidence: 0.937570026666667

 $00{:}27{:}50.526 \dashrightarrow 00{:}27{:}53.762$ this turned out to have mutations

NOTE Confidence: 0.937570026666667

 $00{:}27{:}53.762 \dashrightarrow 00{:}28{:}00.000$ prebby P and KTM2D No B CL2B C L6

NOTE Confidence: 0.937570026666667

 $00:28:00.000 \longrightarrow 00:28:02.064$ arrangements and then imaging at

NOTE Confidence: 0.937570026666667

 $00{:}28{:}02.064 \dashrightarrow 00{:}28{:}03.944$ the time showed concurrent nodal

NOTE Confidence: 0.937570026666667

 $00:28:03.944 \longrightarrow 00:28:06.186$ involvement and then there was a 45

NOTE Confidence: 0.937570026666667

 $00:28:06.186 \longrightarrow 00:28:08.950$ year old with a male scalp lesion.

00:28:08.950 --> 00:28:11.270 Again,

NOTE Confidence: 0.937570026666667

00:28:11.270 --> 00:28:13.238 no B CL2B C L6 arrangement

NOTE Confidence: 0.937570026666667

 $00:28:13.238 \longrightarrow 00:28:15.162$ signed out as possible primary

NOTE Confidence: 0.937570026666667

 $00:28:15.162 \longrightarrow 00:28:17.306$ cutaneous Falco Center lymphoma.

NOTE Confidence: 0.937570026666667

00:28:17.310 --> 00:28:20.710 Again this had Kreb BPKTMTD

NOTE Confidence: 0.937570026666667

00:28:20.710 --> 00:28:23.310 mutations and ABC L2 arrangement.

NOTE Confidence: 0.937570026666667

 $00:28:23.310 \longrightarrow 00:28:25.431$ The imaging at the time should not

NOTE Confidence: 0.937570026666667

00:28:25.431 --> 00:28:27.070 no concurrent nodal involvement,

NOTE Confidence: 0.937570026666667

 $00{:}28{:}27.070 \dashrightarrow 00{:}28{:}29.254$ so it was thought to be a primary

NOTE Confidence: 0.937570026666667

 $00:28:29.254 \longrightarrow 00:28:30.750$ cutaneous Falco center lymphoma.

NOTE Confidence: 0.937570026666667

 $00{:}28{:}30.750 \dashrightarrow 00{:}28{:}32.268$ But thirteen months later there was

NOTE Confidence: 0.937570026666667

00:28:32.268 --> 00:28:33.947 involvement of the bone marrow and

NOTE Confidence: 0.937570026666667

 $00:28:33.947 \longrightarrow 00:28:35.179$ axillary lymph node involvement.

NOTE Confidence: 0.937570026666667

 $00:28:35.180 \longrightarrow 00:28:35.762$ So I think, NOTE Confidence: 0.9375700266666667

 $00:28:35.762 \longrightarrow 00:28:36.926$ I mean there's still has to

NOTE Confidence: 0.937570026666667

 $00:28:36.926 \longrightarrow 00:28:38.100$ be validation for this,

 $00:28:38.100 \longrightarrow 00:28:42.139$ but I think these parameters can help

NOTE Confidence: 0.937570026666667

 $00:28:42.140 \longrightarrow 00:28:45.668$ in what can sometimes be a difficult,

NOTE Confidence: 0.937570026666667

00:28:45.668 --> 00:28:47.388 in some difficult cases and

NOTE Confidence: 0.937570026666667

 $00:28:47.388 \longrightarrow 00:28:48.420$ trying to predict,

NOTE Confidence: 0.937570026666667

 $00:28:48.420 \longrightarrow 00:28:50.675$ maybe even help support when

NOTE Confidence: 0.937570026666667

00:28:50.675 --> 00:28:52.930 these patients should be followed

NOTE Confidence: 0.937570026666667

 $00:28:53.004 \longrightarrow 00:28:55.260$ carefully for systemic disease.

NOTE Confidence: 0.937570026666667

00:28:55.260 --> 00:28:58.536 So to summarize some of these

NOTE Confidence: 0.937570026666667

00:28:58.540 --> 00:28:59.716 subsets that I've described,

NOTE Confidence: 0.937570026666667

 $00:28:59.716 \longrightarrow 00:29:01.620$ you have classic focal Pharma with B,

NOTE Confidence: 0.937570026666667

 $00:29:01.620 \longrightarrow 00:29:03.384$ CL2B, C L6 arrangements.

NOTE Confidence: 0.937570026666667

 $00:29:03.384 \longrightarrow 00:29:06.348$ And krubby P mutations and KTMTD mutations,

NOTE Confidence: 0.937570026666667

 $00{:}29{:}06.348 \dashrightarrow 00{:}29{:}08.243$ other chromatin modifying G mutations

NOTE Confidence: 0.937570026666667

 $00{:}29{:}08.243 \dashrightarrow 00{:}29{:}10.790$ with a low proliferation fraction.

NOTE Confidence: 0.937570026666667

 $00:29:10.790 \longrightarrow 00:29:12.866$ And then you have which is

 $00:29:12.866 \longrightarrow 00:29:13.904$ classic focal FOMA.

NOTE Confidence: 0.937570026666667

 $00{:}29{:}13.910 \dashrightarrow 00{:}29{:}15.840$ You have pediatric focal FOMA

NOTE Confidence: 0.937570026666667

00:29:15.840 --> 00:29:18.344 which lacks the BCL two BCL 6 and

NOTE Confidence: 0.937570026666667

 $00:29:18.344 \longrightarrow 00:29:20.016$ lacks these chromatin modifying G

NOTE Confidence: 0.937570026666667

 $00:29:20.016 \longrightarrow 00:29:21.771$ mutations but has kinase mutations

NOTE Confidence: 0.937570026666667

 $00:29:21.771 \longrightarrow 00:29:24.309$ has a high proliferation fraction.

NOTE Confidence: 0.937570026666667

00:29:24.310 --> 00:29:26.613 These are most likely not arising

NOTE Confidence: 0.937570026666667

 $00:29:26.613 \longrightarrow 00:29:27.642$ from the typical.

NOTE Confidence: 0.937570026666667

00:29:27.642 --> 00:29:29.700 Recursive cell in the bone marrow

NOTE Confidence: 0.937570026666667

 $00:29:29.766 \longrightarrow 00:29:31.381$ and where which derives the

NOTE Confidence: 0.937570026666667

00:29:31.381 --> 00:29:32.673 systemic form of this,

NOTE Confidence: 0.937570026666667

 $00:29:32.680 \longrightarrow 00:29:34.680$ but it's probably represents

NOTE Confidence: 0.937570026666667

 $00:29:34.680 \longrightarrow 00:29:36.680$ a locally stimulated clonal

NOTE Confidence: 0.937570026666667

 $00:29:36.680 \longrightarrow 00:29:38.103$ follicular proliferation and

NOTE Confidence: 0.937570026666667

00:29:38.103 --> 00:29:39.372 similarly primary containers.

NOTE Confidence: 0.937570026666667

00:29:39.372 --> 00:29:41.910 Falconceno FOMA is is most likely

00:29:41.973 --> 00:29:44.117 locally stimulated focal lymphoma,

NOTE Confidence: 0.937570026666667

 $00:29:44.120 \longrightarrow 00:29:46.682$ but a subset of these that appear

NOTE Confidence: 0.937570026666667

 $00:29:46.682 \longrightarrow 00:29:49.524$ to be this way may actually be more

NOTE Confidence: 0.937570026666667

00:29:49.524 --> 00:29:52.094 have a more of a systemic behavior

NOTE Confidence: 0.937570026666667

 $00:29:52.094 \longrightarrow 00:29:54.602$ and I think looking at these

NOTE Confidence: 0.937570026666667

 $00:29:54.602 \longrightarrow 00:29:56.418$ mutations these underlying mutations

NOTE Confidence: 0.937570026666667

 $00:29:56.418 \longrightarrow 00:29:58.889$ may help predict those few cases.

NOTE Confidence: 0.937570026666667

00:29:58.890 --> 00:30:01.878 So you know,

NOTE Confidence: 0.937570026666667

 $00:30:01.878 \longrightarrow 00:30:05.030$ one runs against the one runs against the

NOTE Confidence: 0.934890693333333

 $00:30:05.117 \dashrightarrow 00:30:07.752$ wall when really trying to identify

NOTE Confidence: 0.934890693333333

00:30:07.752 --> 00:30:10.240 biomarkers with basically pieces

NOTE Confidence: 0.934890693333333

00:30:10.240 --> 00:30:12.100 of tissue and characterizing,

NOTE Confidence: 0.934890693333333

 $00{:}30{:}12.100 \dashrightarrow 00{:}30{:}13.930$ we can look at mutational profiles,

NOTE Confidence: 0.934890693333333

 $00:30:13.930 \longrightarrow 00:30:18.259$ but I began to think about ways that

NOTE Confidence: 0.934890693333333

 $00:30:18.259 \longrightarrow 00:30:20.727$ we can get around that in terms of

 $00:30:20.730 \longrightarrow 00:30:23.740$ looking at snapshots of mutational

NOTE Confidence: 0.934890693333333

 $00{:}30{:}23.740 \dashrightarrow 00{:}30{:}26.148$ landscapes or expression profiles.

NOTE Confidence: 0.934890693333333

 $00:30:26.150 \longrightarrow 00:30:28.350$ Wanted to do more functional,

NOTE Confidence: 0.934890693333333

 $00:30:28.350 \longrightarrow 00:30:30.094$ be able to look at the more functional

NOTE Confidence: 0.934890693333333

 $00:30:30.094 \longrightarrow 00:30:31.958$ behavior of these cells in a context

NOTE Confidence: 0.934890693333333

 $00:30:31.958 \longrightarrow 00:30:33.930$ of microenvironment or be able to

NOTE Confidence: 0.934890693333333

 $00:30:33.930 \longrightarrow 00:30:35.705$ assess responses in therapy directly.

NOTE Confidence: 0.934890693333333

00:30:35.710 --> 00:30:37.684 And so began to think about models

NOTE Confidence: 0.934890693333333

 $00:30:37.684 \longrightarrow 00:30:40.614$ to do this and we started to develop

NOTE Confidence: 0.934890693333333

00:30:40.614 --> 00:30:42.652 patient derived xenograft models and

NOTE Confidence: 0.934890693333333

 $00:30:42.652 \longrightarrow 00:30:44.762$ we initially developed a repository

NOTE Confidence: 0.934890693333333

00:30:44.762 --> 00:30:47.249 where you know the lymphoma cases

NOTE Confidence: 0.934890693333333

 $00:30:47.249 \longrightarrow 00:30:50.422$ go to the frozen lab and we have a

NOTE Confidence: 0.934890693333333

 $00:30:50.422 \longrightarrow 00:30:52.450$ pipeline where tissues that are large

NOTE Confidence: 0.934890693333333

00:30:52.519 --> 00:30:54.835 enough that are not small biopsies.

NOTE Confidence: 0.934890693333333

 $00{:}30{:}54.840 \dashrightarrow 00{:}30{:}57.101$ We can set aside some tissue and

 $00:30:57.101 \longrightarrow 00:30:59.626$ viably freeze that tissue and consent

NOTE Confidence: 0.934890693333333

 $00{:}30{:}59.626 \dashrightarrow 00{:}31{:}02.956$ the patients and then in a very non.

NOTE Confidence: 0.934890693333333

 $00:31:02.956 \longrightarrow 00:31:04.630$ So we're not targeting any particular

NOTE Confidence: 0.934890693333333

 $00:31:04.683 \longrightarrow 00:31:06.398$ Histology or anything like that.

NOTE Confidence: 0.934890693333333

 $00:31:06.400 \longrightarrow 00:31:09.704$ We've done this for about 200 cases to

NOTE Confidence: 0.934890693333333

 $00:31:09.704 \longrightarrow 00:31:12.578$ date and it's been a very fruitful effort.

NOTE Confidence: 0.934890693333333

 $00:31:12.578 \longrightarrow 00:31:14.672$ It allows us because we're not

NOTE Confidence: 0.934890693333333

 $00:31:14.672 \longrightarrow 00:31:16.199$ going after specific histhologies

NOTE Confidence: 0.934890693333333

 $00:31:16.199 \longrightarrow 00:31:18.503$ to occasional to capture rare cases

NOTE Confidence: 0.934890693333333

 $00:31:18.503 \longrightarrow 00:31:20.933$ that if you were going to try to

NOTE Confidence: 0.934890693333333

 $00:31:20.933 \longrightarrow 00:31:23.938$ target that would be hard to do.

NOTE Confidence: 0.934890693333333

 $00{:}31{:}23.940 \dashrightarrow 00{:}31{:}25.720$ And diagnostic challenging cases

NOTE Confidence: 0.934890693333333

 $00{:}31{:}25.720 \dashrightarrow 00{:}31{:}28.803$ and the the viably frozen being able

NOTE Confidence: 0.934890693333333

 $00:31:28.803 \longrightarrow 00:31:31.190$ to viably freeze them allows us to

NOTE Confidence: 0.934890693333333

 $00:31:31.190 \longrightarrow 00:31:33.329$ then thaw them out and generate

00:31:33.329 --> 00:31:35.820 PDX models or try to culture them.

NOTE Confidence: 0.934890693333333

 $00{:}31{:}35.820 --> 00{:}31{:}37.420$ So it's been great.

NOTE Confidence: 0.934890693333333

 $00:31:37.420 \longrightarrow 00:31:40.340$ So that's sort of our resource for this.

NOTE Confidence: 0.934890693333333

 $00:31:40.340 \longrightarrow 00:31:43.294$ And then the way we generate these

NOTE Confidence: 0.934890693333333

00:31:43.294 --> 00:31:45.870 PDX models is we use NSG immunity

NOTE Confidence: 0.934890693333333

 $00:31:45.870 \longrightarrow 00:31:47.940$ deficient mice and we initially we

NOTE Confidence: 0.934890693333333

 $00:31:47.940 \longrightarrow 00:31:49.866$ take those little pieces of tissue

NOTE Confidence: 0.934890693333333

 $00:31:49.866 \longrightarrow 00:31:51.618$ which you can see on the.

NOTE Confidence: 0.934890693333333

 $00:31:51.620 \longrightarrow 00:31:53.580$ On the on the right here that we

NOTE Confidence: 0.934890693333333

 $00:31:53.580 \longrightarrow 00:31:55.435$ viably freeze and we implant them

NOTE Confidence: 0.934890693333333

 $00{:}31{:}55.435 \dashrightarrow 00{:}31{:}56.416$ under neath the capsule,

NOTE Confidence: 0.934890693333333

 $00:31:56.420 \longrightarrow 00:31:57.540$ the the renal capsule.

NOTE Confidence: 0.934890693333333

 $00:31:57.540 \longrightarrow 00:31:59.220$ So we pop out the kidney,

NOTE Confidence: 0.934890693333333

 $00:31:59.220 \longrightarrow 00:32:01.317$ we make a little hole and we stick the

NOTE Confidence: 0.934890693333333

 $00:32:01.317 \longrightarrow 00:32:03.548$ tissue in there and then eventually it

NOTE Confidence: 0.934890693333333

 $00:32:03.548 \dashrightarrow 00:32:05.840$ grows into something on the bottom now.

 $00:32:05.840 \longrightarrow 00:32:08.562$ So you can see it just becomes a tumor

NOTE Confidence: 0.934890693333333

 $00:32:08.562 \longrightarrow 00:32:11.212$ and we can then take that and we

NOTE Confidence: 0.934890693333333

00:32:11.212 --> 00:32:13.534 can keep propagating that over time.

NOTE Confidence: 0.934890693333333

 $00:32:13.540 \longrightarrow 00:32:15.472$ And these models are very helpful because

NOTE Confidence: 0.934890693333333

 $00:32:15.472 \longrightarrow 00:32:18.067$ you can use them to test different therapies.

NOTE Confidence: 0.934890693333333

00:32:18.070 --> 00:32:20.398 And you basically are growing more

NOTE Confidence: 0.934890693333333

 $00:32:20.398 \longrightarrow 00:32:24.590$ tissue that you can then study live

NOTE Confidence: 0.934890693333333

 $00{:}32{:}24.590 \dashrightarrow 00{:}32{:}29.188$ and so we use this recently for in in a

NOTE Confidence: 0.934890693333333

 $00:32:29.188 \dashrightarrow 00:32:31.277$ more aggressive disease and again I'll,

NOTE Confidence: 0.934890693333333

00:32:31.277 --> 00:32:33.720 I'll I'll start with the case of

NOTE Confidence: 0.934890693333333

 $00:32:33.797 \longrightarrow 00:32:36.110$ a 42 year old man presented to the

NOTE Confidence: 0.934890693333333

00:32:36.110 --> 00:32:37.990 Ed with junction night sweats,

NOTE Confidence: 0.934890693333333

 $00{:}32{:}37.990 \dashrightarrow 00{:}32{:}42.150$ anemia and basically a lot of

NOTE Confidence: 0.934890693333333

00:32:42.150 --> 00:32:43.376 disease lymphadenopathy.

NOTE Confidence: 0.934890693333333

 $00:32:43.376 \longrightarrow 00:32:47.054$ A biopsy was rendered and basically

 $00:32:47.054 \longrightarrow 00:32:50.453$ we have these sheets of very large

NOTE Confidence: 0.934890693333333

 $00:32:50.453 \longrightarrow 00:32:53.871$ cells with a lot of areas of necrosis

NOTE Confidence: 0.934890693333333

 $00:32:53.871 \longrightarrow 00:32:57.000$ and apoptosis and the cells had were

NOTE Confidence: 0.934890693333333

 $00:32:57.089 \longrightarrow 00:32:59.879$ large and had plasma blastic sort

NOTE Confidence: 0.934890693333333

00:32:59.879 --> 00:33:02.224 of phenotype with very prominent

NOTE Confidence: 0.934890693333333

00:33:02.224 --> 00:33:04.650 nucleoli and essentially placed nuclei.

NOTE Confidence: 0.934890693333333

 $00:33:04.650 \longrightarrow 00:33:07.650$ The cells were strongly out positive

NOTE Confidence: 0.934890693333333

 $00:33:07.650 \longrightarrow 00:33:10.492$ and lacked CD20 and CD3B cell and

NOTE Confidence: 0.934890693333333

00:33:10.492 --> 00:33:14.020 T cell markers and had some CD138.

NOTE Confidence: 0.934890693333333

 $00:33:14.020 \longrightarrow 00:33:16.828$ So essentially this was the diagnostic

NOTE Confidence: 0.934890693333333

00:33:16.828 --> 00:33:19.780 of positive large B cell lymphoma

NOTE Confidence: 0.934689750909091

 $00:33:19.780 \longrightarrow 00:33:23.344$ which is driven by overexpression of

NOTE Confidence: 0.934689750909091

 $00:33:23.344 \longrightarrow 00:33:25.980$ anaplastic lymphoma kinase which is

NOTE Confidence: 0.934689750909091

00:33:25.980 --> 00:33:29.116 which was reported fairly recently in 97.

NOTE Confidence: 0.934689750909091

 $00:33:29.116 \longrightarrow 00:33:32.276$ These are extremely rare lymphoma cases.

NOTE Confidence: 0.934689750909091

00:33:32.276 --> 00:33:35.216 They often do express plasma

00:33:35.216 --> 00:33:36.980 cell plasoblastic markers.

NOTE Confidence: 0.934689750909091

 $00{:}33{:}36.980 \to 00{:}33{:}39.860$ They lack typical B cell T cell markers.

NOTE Confidence: 0.934689750909091

 $00:33:39.860 \longrightarrow 00:33:41.018$ The patients tend to be young,

NOTE Confidence: 0.934689750909091

 $00:33:41.020 \longrightarrow 00:33:42.160$ the median age.

NOTE Confidence: 0.934689750909091

 $00:33:42.160 \longrightarrow 00:33:44.356$ In the 40s, one third of them

NOTE Confidence: 0.934689750909091

 $00:33:44.356 \longrightarrow 00:33:45.940$ are in the pediatric age group.

NOTE Confidence: 0.934689750909091

 $00:33:45.940 \longrightarrow 00:33:47.872$ The the patient, the the prognosis

NOTE Confidence: 0.934689750909091

 $00{:}33{:}47.872 \dashrightarrow 00{:}33{:}50.020$ is dismal and many patients die,

NOTE Confidence: 0.934689750909091

 $00{:}33{:}50.020 \dashrightarrow 00{:}33{:}51.460$ especially in advanced stage

NOTE Confidence: 0.934689750909091

 $00:33:51.460 \longrightarrow 00:33:53.260$ with within a few years.

NOTE Confidence: 0.934689750909091

 $00:33:53.260 \longrightarrow 00:33:55.492$ And because of the rarity of the disease

NOTE Confidence: 0.934689750909091

 $00:33:55.492 \longrightarrow 00:33:57.857$ and the aggressiveness of the disease,

NOTE Confidence: 0.934689750909091

 $00{:}33{:}57.860 \dashrightarrow 00{:}33{:}59.332$ it's essentially impossible to

NOTE Confidence: 0.934689750909091

 $00:33:59.332 \longrightarrow 00:34:01.540$ to set up a clinical trial.

NOTE Confidence: 0.934689750909091

 $00:34:01.540 \longrightarrow 00:34:04.528$ The the ALC anaplastic lymphoma kinase

 $00:34:04.528 \longrightarrow 00:34:07.853$ is a receptive tyrosine kinase originally

NOTE Confidence: 0.934689750909091

 $00:34:07.853 \longrightarrow 00:34:10.045$ discovered in anaplastic large cell

NOTE Confidence: 0.934689750909091

 $00:34:10.045 \longrightarrow 00:34:11.935$ lymphoma which is an op positive.

NOTE Confidence: 0.934689750909091

 $00:34:11.940 \longrightarrow 00:34:14.523$ T cell from a 94 and these

NOTE Confidence: 0.934689750909091

 $00:34:14.523 \longrightarrow 00:34:16.460$ are driven by fusions.

NOTE Confidence: 0.934689750909091

 $00:34:16.460 \longrightarrow 00:34:19.260$ The alcos of a LC L's driven by

NOTE Confidence: 0.934689750909091

00:34:19.260 --> 00:34:22.988 NPM fusions with with the kinase

NOTE Confidence: 0.934689750909091

 $00:34:22.988 \longrightarrow 00:34:24.785$ part of the ALC protein.

NOTE Confidence: 0.934689750909091

 $00:34:24.785 \longrightarrow 00:34:27.385$ But the alcosa large B cell from us

NOTE Confidence: 0.934689750909091

 $00:34:27.385 \longrightarrow 00:34:29.883$ tend to have the partner tends to

NOTE Confidence: 0.934689750909091

 $00{:}34{:}29.883 \dashrightarrow 00{:}34{:}31.889$ be clathrin so different than the

NOTE Confidence: 0.934689750909091

 $00{:}34{:}31.889 \dashrightarrow 00{:}34{:}34.030$ ALC L's and these lead to downstream

NOTE Confidence: 0.934689750909091

 $00{:}34{:}34.030 \dashrightarrow 00{:}34{:}36.159$ signaling and Jack stat and P cell

NOTE Confidence: 0.934689750909091

00:34:36.159 --> 00:34:41.800 gamma and Ras irk Pi through kinase pathways.

NOTE Confidence: 0.934689750909091

 $00:34:41.800 \longrightarrow 00:34:43.837$ But you can see that the prognosis

NOTE Confidence: 0.934689750909091

 $00:34:43.837 \longrightarrow 00:34:46.052$ is pretty dismal for patients that

 $00:34:46.052 \longrightarrow 00:34:49.840$ particularly in advanced stage disease

NOTE Confidence: 0.934689750909091

 $00:34:49.840 \longrightarrow 00:34:52.780$ and there has been as you probably

NOTE Confidence: 0.934689750909091

 $00:34:52.780 \longrightarrow 00:34:55.056$ know ALK inhibitors developed for

NOTE Confidence: 0.934689750909091

 $00:34:55.056 \longrightarrow 00:34:57.840$ these malignancies all kinds of lung,

NOTE Confidence: 0.934689750909091

 $00:34:57.840 \longrightarrow 00:35:01.172$ all kinds of with without fusions and

NOTE Confidence: 0.934689750909091

 $00:35:01.172 \longrightarrow 00:35:04.638$ that have been fairly effective so

NOTE Confidence: 0.934689750909091

 $00:35:04.638 \longrightarrow 00:35:07.984$ soon after the discovery of these fusions.

NOTE Confidence: 0.934689750909091

 $00{:}35{:}07.990 \dashrightarrow 00{:}35{:}10.348$ The the first generation OP inhibitor

NOTE Confidence: 0.934689750909091

 $00{:}35{:}10.350 \dashrightarrow 00{:}35{:}13.087$ was was generated and and

NOTE Confidence: 0.934689750909091

 $00:35:13.087 \longrightarrow 00:35:16.716$ shown to be effective in in different

NOTE Confidence: 0.934689750909091

 $00:35:16.716 \longrightarrow 00:35:18.838$ positive neoplasms and then then

NOTE Confidence: 0.934689750909091

 $00:35:18.838 \dashrightarrow 00:35:21.130$ there was second and third generation

NOTE Confidence: 0.934689750909091

 $00{:}35{:}21.198 \dashrightarrow 00{:}35{:}23.440$ inhibitors that had higher potency.

NOTE Confidence: 0.934689750909091

00:35:23.440 --> 00:35:26.590 So interestingly in in AL positive

NOTE Confidence: 0.934689750909091

 $00:35:26.590 \longrightarrow 00:35:28.054$ anaplastic large cell lymphoma

 $00:35:28.054 \longrightarrow 00:35:31.074$ there has been that you you get a

NOTE Confidence: 0.934689750909091

 $00{:}35{:}31.074 \dashrightarrow 00{:}35{:}32.867$ significant response right and to

NOTE Confidence: 0.934689750909091

 $00{:}35{:}32.867 \dashrightarrow 00{:}35{:}34.529$ this to chrosatini which is the

NOTE Confidence: 0.934689750909091

 $00:35:34.529 \longrightarrow 00:35:36.130$ first generation OP inhibitor but.

NOTE Confidence: 0.934689750909091

 $00:35:36.130 \longrightarrow 00:35:38.314$ Where the out positive large B cell

NOTE Confidence: 0.934689750909091

 $00:35:38.314 \longrightarrow 00:35:40.816$ from is you actually these patients

NOTE Confidence: 0.934689750909091

 $00:35:40.816 \longrightarrow 00:35:43.714$ often go through a several sequential

NOTE Confidence: 0.934689750909091

 $00:35:43.714 \longrightarrow 00:35:45.484$ highly aggressive chemotherapy

NOTE Confidence: 0.934689750909091

 $00:35:45.484 \longrightarrow 00:35:47.758$ regimens and don't do well.

NOTE Confidence: 0.934689750909091

00:35:47.758 --> 00:35:49.693 And anecdotally people have tried

NOTE Confidence: 0.934689750909091

 $00{:}35{:}49.693 \dashrightarrow 00{:}35{:}52.082$ the chrysotonyb and basically the

NOTE Confidence: 0.934689750909091

00:35:52.082 --> 00:35:54.497 patients have maybe had partial

NOTE Confidence: 0.934689750909091

 $00:35:54.497 \longrightarrow 00:35:56.220$ response and then essentially failure.

NOTE Confidence: 0.934689750909091

 $00:35:56.220 \longrightarrow 00:35:58.660$ And so the few cases that have been

NOTE Confidence: 0.934689750909091

 $00:35:58.721 \longrightarrow 00:36:00.846$ reported in the literature anecdotally.

NOTE Confidence: 0.934689750909091

 $00:36:00.850 \longrightarrow 00:36:03.818$ Have have shown like a a

 $00:36:03.818 \longrightarrow 00:36:05.090$ very short response,

NOTE Confidence: 0.934689750909091

 $00:36:05.090 \longrightarrow 00:36:07.250$ a transit partial response and then

NOTE Confidence: 0.934689750909091

 $00:36:07.250 \longrightarrow 00:36:09.610$ failure and that's only been a couple.

NOTE Confidence: 0.934689750909091

 $00:36:09.610 \longrightarrow 00:36:12.076$ So that that had been the status of the

NOTE Confidence: 0.934689750909091

 $00:36:12.076 \longrightarrow 00:36:14.724$ field and these patients just don't do well.

NOTE Confidence: 0.934689750909091

00:36:14.730 --> 00:36:17.130 So the rationale for PDX modeling

NOTE Confidence: 0.934689750909091

 $00:36:17.130 \longrightarrow 00:36:19.505$ is that you know to to look at the

NOTE Confidence: 0.934689750909091

 $00{:}36{:}19.505 \dashrightarrow 00{:}36{:}20.925$ efficacy of these OP inhibitors and

NOTE Confidence: 0.934689750909091

 $00:36:20.925 \longrightarrow 00:36:23.409$ the the fact is we can't do clinical trials.

NOTE Confidence: 0.934689750909091

 $00{:}36{:}23.410 \dashrightarrow 00{:}36{:}26.250$ So could we use these models to test

NOTE Confidence: 0.934689750909091

 $00:36:26.250 \longrightarrow 00:36:29.118$ these OP inhibitors in this disease.

NOTE Confidence: 0.934689750909091

 $00:36:29.120 \longrightarrow 00:36:31.520$ So again this is just another image

NOTE Confidence: 0.934689750909091

 $00:36:31.520 \longrightarrow 00:36:32.920$ of how we make these.

NOTE Confidence: 0.934689750909091

 $00{:}36{:}32.920 \dashrightarrow 00{:}36{:}34.852$ So you can see the small tumor

NOTE Confidence: 0.934689750909091

 $00:36:34.852 \longrightarrow 00:36:35.680$ and and basically

 $00:36:37.720 \longrightarrow 00:36:39.488$ we pop that back in and then we

NOTE Confidence: 0.935222009285714

 $00:36:39.488 \longrightarrow 00:36:41.038$ generate a tumor on the kidney,

NOTE Confidence: 0.935222009285714

 $00:36:41.040 \longrightarrow 00:36:44.800$ this actually is a tumor and out tumor.

NOTE Confidence: 0.935222009285714

 $00:36:44.800 \longrightarrow 00:36:46.969$ So on the left here you can see the

NOTE Confidence: 0.935222009285714

00:36:46.969 --> 00:36:48.609 normal kidney on the right these

NOTE Confidence: 0.935222009285714

00:36:48.609 --> 00:36:50.352 go pretty quickly and you can sort

NOTE Confidence: 0.935222009285714

 $00:36:50.352 \longrightarrow 00:36:52.371$ of see the size of the tumor and

NOTE Confidence: 0.935222009285714

 $00:36:52.371 \longrightarrow 00:36:54.197$ this is bivalve then you can see

NOTE Confidence: 0.935222009285714

 $00:36:54.197 \longrightarrow 00:36:55.787$ the the consistency of the tumor.

NOTE Confidence: 0.935222009285714

00:36:55.790 --> 00:36:58.118 You can see here that the PDX tumor

NOTE Confidence: 0.935222009285714

 $00{:}36{:}58.118 \dashrightarrow 00{:}36{:}59.903$ actually expresses ALC and maintains the

NOTE Confidence: 0.935222009285714

 $00:36:59.903 \longrightarrow 00:37:02.287$ mean of phenotype of the native and the

NOTE Confidence: 0.935222009285714

 $00:37:02.287 \longrightarrow 00:37:03.822$ similarities between the Histology of

NOTE Confidence: 0.935222009285714

 $00:37:03.822 \dashrightarrow 00:37:07.550$ the PDX ALC and the original patient.

NOTE Confidence: 0.935222009285714

 $00:37:07.550 \longrightarrow 00:37:10.494$ So this was originally we did this with

NOTE Confidence: 0.935222009285714

 $00:37:10.494 \longrightarrow 00:37:13.258$ the with a case that we captured through

 $00:37:13.258 \longrightarrow 00:37:15.632$ our pipeline and then we consent to

NOTE Confidence: 0.935222009285714

 $00:37:15.632 \longrightarrow 00:37:17.338$ the patient who agreed to only do this

NOTE Confidence: 0.935222009285714

 $00:37:17.338 \dashrightarrow 00:37:19.268$ if we if we named the mask after him,

NOTE Confidence: 0.935222009285714

 $00{:}37{:}19.270 \dashrightarrow 00{:}37{:}20.962$ which we did.

NOTE Confidence: 0.935222009285714

 $00:37:20.962 \longrightarrow 00:37:25.620$ So our approach was to implant the tumor

NOTE Confidence: 0.935222009285714

 $00:37:25.620 \longrightarrow 00:37:28.063$ and we we use ultrasound to actually

NOTE Confidence: 0.935222009285714

 $00:37:28.063 \longrightarrow 00:37:30.215$ check for engrassmans and then we we

NOTE Confidence: 0.935222009285714

 $00{:}37{:}30.215 \dashrightarrow 00{:}37{:}32.387$ check at a second time point to to

NOTE Confidence: 0.935222009285714

 $00:37:32.387 \longrightarrow 00:37:34.740$ assess for growth and then we sort of

NOTE Confidence: 0.935222009285714

 $00:37:34.740 \dashrightarrow 00:37:37.059$ split the mice between vehicle and latinum.

NOTE Confidence: 0.935222009285714

 $00{:}37{:}37.060 \dashrightarrow 00{:}37{:}38.740$ So the question is we know that chrosotinum,

NOTE Confidence: 0.935222009285714

00:37:38.740 --> 00:37:40.618 we knew that Chrosotinum wasn't working,

NOTE Confidence: 0.935222009285714

 $00:37:40.620 \dashrightarrow 00:37:43.574$ could second and third generation be helpful

NOTE Confidence: 0.935222009285714

 $00:37:43.574 \longrightarrow 00:37:46.739$ and so that's what we initially did so.

NOTE Confidence: 0.935222009285714

 $00:37:46.740 \longrightarrow 00:37:47.760$ So what we found,

00:37:47.760 --> 00:37:49.290 so this is ultrasound imaging and

NOTE Confidence: 0.935222009285714

 $00:37:49.344 \longrightarrow 00:37:51.104$ it's it's hard to tell but this is

NOTE Confidence: 0.935222009285714

 $00:37:51.104 \longrightarrow 00:37:52.698$ all tumor and this is all tumor.

NOTE Confidence: 0.935222009285714

 $00:37:52.700 \longrightarrow 00:37:55.045$ So there was large tumors at the

NOTE Confidence: 0.935222009285714

 $00:37:55.045 \longrightarrow 00:37:57.360$ time when we started therapy and you

NOTE Confidence: 0.935222009285714

 $00:37:57.360 \longrightarrow 00:38:00.013$ can see within within a week this on

NOTE Confidence: 0.935222009285714

 $00:38:00.013 \longrightarrow 00:38:01.915$ the right this is responsive therapy

NOTE Confidence: 0.935222009285714

 $00{:}38{:}01.985 \dashrightarrow 00{:}38{:}04.218$ with most of this is like fibrotic

NOTE Confidence: 0.935222009285714

 $00:38:04.218 \longrightarrow 00:38:07.486$ tissue and on the left that's the

NOTE Confidence: 0.935222009285714

 $00:38:07.486 \longrightarrow 00:38:09.414$ disease and so on the right here

NOTE Confidence: 0.935222009285714

 $00{:}38{:}09.414 \dashrightarrow 00{:}38{:}11.011$ you can see sort of the difference.

NOTE Confidence: 0.935222009285714

 $00:38:11.011 \longrightarrow 00:38:13.090$ So at day zero this is the time of

NOTE Confidence: 0.935222009285714

 $00:38:13.143 \longrightarrow 00:38:14.844$ therapy and you can see the ones

NOTE Confidence: 0.935222009285714

 $00:38:14.844 \longrightarrow 00:38:16.220$ that didn't get the rapy.

NOTE Confidence: 0.935222009285714 00:38:16.220 --> 00:38:16.570 Grew, NOTE Confidence: 0.935222009285714

 $00:38:16.570 \longrightarrow 00:38:17.620$ continued to grow.

 $00:38:17.620 \longrightarrow 00:38:19.720$ The ones that got therapy responded

NOTE Confidence: 0.935222009285714

 $00:38:19.786 \longrightarrow 00:38:21.931$ well and and you can see by

NOTE Confidence: 0.935222009285714

 $00:38:21.931 \longrightarrow 00:38:23.579$ Western that the activity is,

NOTE Confidence: 0.935222009285714

 $00:38:23.580 \longrightarrow 00:38:26.574$ is is functional in terms on the access

NOTE Confidence: 0.935222009285714

 $00:38:26.574 \longrightarrow 00:38:29.544$ in terms of eliminating phosphorylation

NOTE Confidence: 0.935222009285714

 $00:38:29.544 \longrightarrow 00:38:33.285$ of ALK and some downstream signaling.

NOTE Confidence: 0.935222009285714

 $00:38:33.285 \longrightarrow 00:38:35.725$ And so then we went back to look

NOTE Confidence: 0.935222009285714

 $00{:}38{:}35.725 \dashrightarrow 00{:}38{:}37.930$ at chrysatinib versus latinib and

NOTE Confidence: 0.935222009285714

 $00:38:37.930 \longrightarrow 00:38:40.215$ interestingly we found that yes

NOTE Confidence: 0.935222009285714

 $00:38:40.220 \longrightarrow 00:38:42.380$ in comparison to the vehicle which

NOTE Confidence: 0.935222009285714

 $00:38:42.380 \longrightarrow 00:38:44.304$ could grew after after therapy

NOTE Confidence: 0.935222009285714

 $00{:}38{:}44.304 \dashrightarrow 00{:}38{:}46.409$ chrysatnib did have this little.

NOTE Confidence: 0.935222009285714

00:38:46.410 --> 00:38:47.284 Temporary stalling,

NOTE Confidence: 0.935222009285714

 $00{:}38{:}47.284 \dashrightarrow 00{:}38{:}49.906$ but then grew out afterwards and

NOTE Confidence: 0.935222009285714

 $00:38:49.906 \longrightarrow 00:38:52.290$ then the Latin showed growth.

 $00:38:52.290 \longrightarrow 00:38:54.534$ So we're excited that the model

NOTE Confidence: 0.935222009285714

 $00:38:54.534 \longrightarrow 00:38:57.112$ was sort of mimicking what we were

NOTE Confidence: 0.935222009285714

 $00:38:57.112 \longrightarrow 00:38:58.506$ seeing in patients.

NOTE Confidence: 0.935222009285714

 $00:38:58.506 \longrightarrow 00:39:01.209$ We also tried a lectin A,

NOTE Confidence: 0.935222009285714

00:39:01.209 --> 00:39:03.610 which is another ALK inhibitor

NOTE Confidence: 0.935222009285714

 $00:39:03.610 \longrightarrow 00:39:06.170$ and found similar effect.

NOTE Confidence: 0.935222009285714

 $00:39:06.170 \longrightarrow 00:39:08.090$ So this is Jake Soumerai,

NOTE Confidence: 0.935222009285714

 $00:39:08.090 \longrightarrow 00:39:10.268$ who I work closely with as

NOTE Confidence: 0.935222009285714

 $00:39:10.268 \longrightarrow 00:39:11.357$ a clinical colleague.

NOTE Confidence: 0.935222009285714

 $00:39:11.360 \longrightarrow 00:39:14.492$ From our data we then he reached out

NOTE Confidence: 0.935222009285714

 $00:39:14.492 \longrightarrow 00:39:16.312$ to colleagues at different institutions

NOTE Confidence: 0.935222009285714

 $00:39:16.312 \longrightarrow 00:39:18.400$ who happened to have patients without

NOTE Confidence: 0.935222009285714

 $00:39:18.400 \longrightarrow 00:39:21.369$ B cell lymphomas for patients and

NOTE Confidence: 0.935222009285714

 $00:39:21.369 \longrightarrow 00:39:23.681$ they all had the ones that we could

NOTE Confidence: 0.935222009285714

 $00:39:23.681 \longrightarrow 00:39:25.576$ had the classerin alk fusion,

NOTE Confidence: 0.935222009285714

00:39:25.576 --> 00:39:28.200 many of them had been on prior therapies,

 $00:39:28.200 \longrightarrow 00:39:30.408$ a couple of them had been

NOTE Confidence: 0.935222009285714

 $00:39:30.408 \longrightarrow 00:39:31.512$ not responsive resotinip.

NOTE Confidence: 0.928512966666667

 $00:39:31.520 \longrightarrow 00:39:36.160$ So we put them on this therapy.

NOTE Confidence: 0.928512966666667

 $00:39:36.160 \longrightarrow 00:39:41.170$ So the one of the patients actually.

NOTE Confidence: 0.928512966666667

 $00:39:41.170 \longrightarrow 00:39:46.930$ Respond responded and is now in that

NOTE Confidence: 0.928512966666667

 $00:39:46.930 \longrightarrow 00:39:50.905$ at this point almost three years in

NOTE Confidence: 0.928512966666667

 $00:39:50.905 \longrightarrow 00:39:52.915$ clinical remission on the right you

NOTE Confidence: 0.928512966666667

 $00{:}39{:}52.915 \dashrightarrow 00{:}39{:}55.419$ can sort of see what the patient

NOTE Confidence: 0.928512966666667

00:39:55.419 --> 00:39:59.978 initial disease and sort of after we

NOTE Confidence: 0.928512966666667

 $00:39:59.978 \longrightarrow 00:40:02.946$ had one patient who you know that the

NOTE Confidence: 0.928512966666667

 $00:40:02.946 \longrightarrow 00:40:04.230$ initial actually I should say the

NOTE Confidence: 0.928512966666667

 $00:40:04.281 \longrightarrow 00:40:06.810$ initial patient that we made the PDX

NOTE Confidence: 0.928512966666667

 $00{:}40{:}06.810 \dashrightarrow 00{:}40{:}10.818$ out of responded and then recurred.

NOTE Confidence: 0.928512966666667

 $00{:}40{:}10.818 \dashrightarrow 00{:}40{:}14.012$ And basically the transplants could

NOTE Confidence: 0.928512966666667

 $00:40:14.012 \longrightarrow 00:40:17.118$ not be performed in time and he passed.

 $00:40:17.120 \longrightarrow 00:40:19.208$ But since then the team has sort of

NOTE Confidence: 0.928512966666667

 $00{:}40{:}19.208 \dashrightarrow 00{:}40{:}20.824$ realized the importance of getting

NOTE Confidence: 0.928512966666667

 $00:40:20.824 \longrightarrow 00:40:22.554$ the transplant done up front.

NOTE Confidence: 0.928512966666667

00:40:22.560 --> 00:40:24.877 So in summary, one of the patients,

NOTE Confidence: 0.928512966666667

 $00:40:24.880 \longrightarrow 00:40:27.208$ it's three years out and there's

NOTE Confidence: 0.928512966666667

00:40:27.208 --> 00:40:29.184 another young patient who was

NOTE Confidence: 0.928512966666667

 $00{:}40{:}29.184 \dashrightarrow 00{:}40{:}33.185$ transferred to us who's now about

NOTE Confidence: 0.928512966666667

00:40:33.185 --> 00:40:35.880 one one year out in clinical remission,

NOTE Confidence: 0.928512966666667

 $00:40:35.880 \longrightarrow 00:40:39.440$ one of the patients had a partial remission.

NOTE Confidence: 0.928512966666667

 $00:40:39.440 \longrightarrow 00:40:44.768$ So from this we've initiated a small

NOTE Confidence: 0.928512966666667

00:40:44.768 --> 00:40:48.032 clinical trial to to get more cases

NOTE Confidence: 0.928512966666667

 $00:40:48.032 \longrightarrow 00:40:50.180$ and generate more PDX models to

NOTE Confidence: 0.928512966666667

 $00:40:50.256 \longrightarrow 00:40:52.578$ study this and other agents further

NOTE Confidence: 0.928512966666667

 $00:40:52.578 \longrightarrow 00:40:55.753$ and to also begin to look do some

NOTE Confidence: 0.928512966666667

 $00:40:55.753 \longrightarrow 00:40:58.075$ functional studies on on these cases.

NOTE Confidence: 0.928512966666667

 $00{:}40{:}58.080 \dashrightarrow 00{:}41{:}00.090$ Interestingly I also really fascinated

 $00:41:00.090 \longrightarrow 00:41:02.100$ by class of plastic lymphoma

NOTE Confidence: 0.928512966666667

 $00:41:02.160 \longrightarrow 00:41:03.900$ because they were discovered.

NOTE Confidence: 0.928512966666667

00:41:03.900 --> 00:41:06.404 Around the same time in actually 1997,

NOTE Confidence: 0.928512966666667

 $00:41:06.404 \longrightarrow 00:41:07.796$ they, they have,

NOTE Confidence: 0.928512966666667

00:41:07.796 --> 00:41:10.580 they both have plasma blocks morphology,

NOTE Confidence: 0.928512966666667

 $00:41:10.580 \longrightarrow 00:41:12.873$ they have a very similar expression

NOTE Confidence: 0.928512966666667

00:41:12.873 --> 00:41:15.111 profile with the difference being the

NOTE Confidence: 0.928512966666667

00:41:15.111 --> 00:41:17.059 ALC because they're driven by ALC.

NOTE Confidence: 0.928512966666667

00:41:17.060 --> 00:41:18.460 The ALC largely cell phones

NOTE Confidence: 0.928512966666667

 $00:41:18.460 \longrightarrow 00:41:19.580$ drive by ALC fusions,

NOTE Confidence: 0.928512966666667

 $00:41:19.580 \longrightarrow 00:41:21.044$ the the plasma blocks forms are

NOTE Confidence: 0.928512966666667

 $00:41:21.044 \longrightarrow 00:41:22.340$ driven by Epstein Barr virus.

NOTE Confidence: 0.928512966666667

 $00{:}41{:}22.340 \dashrightarrow 00{:}41{:}24.286$ So but I actually think that the

NOTE Confidence: 0.928512966666667

 $00:41:24.286 \longrightarrow 00:41:25.939$ biologies are probably pretty similar.

NOTE Confidence: 0.928512966666667

00:41:25.940 --> 00:41:28.232 There have been some evidence of

00:41:28.232 --> 00:41:29.760 the similar downstream signaling

NOTE Confidence: 0.928512966666667

00:41:29.819 --> 00:41:31.229 pathways being involved.

NOTE Confidence: 0.928512966666667

00:41:31.230 --> 00:41:34.093 So we we've started to view these

NOTE Confidence: 0.928512966666667

 $00:41:34.093 \longrightarrow 00:41:36.429$ as class obelastic type of fomas

NOTE Confidence: 0.928512966666667

 $00:41:36.430 \longrightarrow 00:41:38.985$ that have that both have sort of

NOTE Confidence: 0.928512966666667

00:41:38.985 --> 00:41:40.058 clinical clinically disciplined

NOTE Confidence: 0.928512966666667

 $00:41:40.058 \longrightarrow 00:41:41.828$ prognosis and no clinical trials.

NOTE Confidence: 0.928512966666667

00:41:41.830 --> 00:41:44.541 And we've actually set up models

NOTE Confidence: 0.928512966666667

 $00:41:44.541 \longrightarrow 00:41:46.998$ of these of class obelastic FOMA as

NOTE Confidence: 0.928512966666667

 $00:41:46.998 \longrightarrow 00:41:49.879$ well to begin to understand the the

NOTE Confidence: 0.928512966666667

 $00{:}41{:}49.879 \dashrightarrow 00{:}41{:}51.984$ biology and develop new targets.

NOTE Confidence: 0.928512966666667

00:41:51.990 --> 00:41:54.059 And if you think about B cell develop

NOTE Confidence: 0.928512966666667

 $00{:}41{:}54.059 \dashrightarrow 00{:}41{:}55.804$ B cell development starting with

NOTE Confidence: 0.928512966666667

 $00:41:55.804 \longrightarrow 00:41:58.468$ the Pro B cell and the bone marrow

NOTE Confidence: 0.928512966666667

 $00:41:58.470 \longrightarrow 00:42:00.530$ going into mature B cell.

NOTE Confidence: 0.928512966666667

 $00{:}42{:}00.530 \dashrightarrow 00{:}42{:}02.966$ And then before you get to plasma

 $00:42:02.966 \longrightarrow 00:42:04.779$ cell where myelomas are derived

NOTE Confidence: 0.928512966666667

 $00{:}42{:}04.779 \dashrightarrow 00{:}42{:}07.530$ from most of our mature B cell

NOTE Confidence: 0.928512966666667

 $00:42:07.530 \longrightarrow 00:42:09.108$ lymphomas are coming from you know

NOTE Confidence: 0.928512966666667

00:42:09.108 --> 00:42:10.969 the more mature B cell phenotype.

NOTE Confidence: 0.928512966666667

 $00:42:10.970 \longrightarrow 00:42:13.420$ There is a a very transient plastoblast

NOTE Confidence: 0.928512966666667

 $00:42:13.420 \longrightarrow 00:42:15.221$ phase where probably the plastoblast

NOTE Confidence: 0.928512966666667

00:42:15.221 --> 00:42:17.629 lymphomas and the up large B cell

NOTE Confidence: 0.928512966666667

 $00{:}42{:}17.629 \dashrightarrow 00{:}42{:}19.945$ lymphomas arise and it it may be

NOTE Confidence: 0.928512966666667

 $00:42:19.945 \longrightarrow 00:42:21.560$ because these are so transient

NOTE Confidence: 0.928512966666667

 $00:42:21.628 \longrightarrow 00:42:23.686$ why these are less common.

NOTE Confidence: 0.928512966666667

00:42:23.690 --> 00:42:25.769 But a very interested in sort of

NOTE Confidence: 0.928512966666667

 $00:42:25.769 \longrightarrow 00:42:27.344$ characterizing these in our models

NOTE Confidence: 0.928512966666667

 $00{:}42{:}27.344 \dashrightarrow 00{:}42{:}28.596$ and understanding biology and

NOTE Confidence: 0.928512966666667

 $00:42:28.596 \longrightarrow 00:42:30.330$ coming up with new targets.

NOTE Confidence: 0.928512966666667

 $00:42:30.330 \longrightarrow 00:42:33.130$ Some of the questions we'd like to answer

 $00:42:33.130 \longrightarrow 00:42:35.255$ are what mediates these crozotinib

NOTE Confidence: 0.928512966666667

 $00:42:35.255 \longrightarrow 00:42:38.490$ failures in out large B cell lymphoma.

NOTE Confidence: 0.928512966666667

 $00:42:38.490 \longrightarrow 00:42:41.622$ We think that it may have to do with

NOTE Confidence: 0.928512966666667

 $00:42:41.622 \longrightarrow 00:42:44.430$ P glycoprotein where we know that

NOTE Confidence: 0.928512966666667

 $00:42:44.430 \longrightarrow 00:42:47.588$ crozotinib may be a a target for that.

NOTE Confidence: 0.928512966666667

 $00:42:47.588 \longrightarrow 00:42:50.901$ And then also what mediates resistance

NOTE Confidence: 0.928512966666667

 $00{:}42{:}50.901 \dashrightarrow 00{:}42{:}53.613$ downstream after some time with

NOTE Confidence: 0.928512966666667

 $00:42:53.613 \longrightarrow 00:42:56.031$ the with the second and third

NOTE Confidence: 0.928512966666667

 $00:42:56.031 \longrightarrow 00:42:57.240$ generation OP inhibitors.

NOTE Confidence: 0.928324273333333

 $00:42:57.240 \longrightarrow 00:42:58.640$ And and it's interesting,

NOTE Confidence: 0.928324273333333

 $00{:}42{:}58.640 \dashrightarrow 00{:}43{:}00.740$ I think it's fascinating that the

NOTE Confidence: 0.928324273333333

00:43:00.801 --> 00:43:02.756 ALK fusions actually are actually

NOTE Confidence: 0.928324273333333

 $00:43:02.760 \longrightarrow 00:43:04.916$ in part a better prognosis in the

NOTE Confidence: 0.928324273333333

 $00:43:04.916 \longrightarrow 00:43:06.498$ anaplastic large cell infomas better

NOTE Confidence: 0.928324273333333

00:43:06.498 --> 00:43:08.874 than the ones that don't have the ALK,

NOTE Confidence: 0.928324273333333

 $00:43:08.880 \longrightarrow 00:43:10.398$ whereas in the B cell infomas,

00:43:10.400 --> 00:43:12.440 it's in parts of dismal prognosis.

NOTE Confidence: 0.928324273333333

 $00:43:12.440 \longrightarrow 00:43:15.200$ So we're beginning to look

NOTE Confidence: 0.928324273333333

 $00:43:15.200 \longrightarrow 00:43:17.408$ at trying to understand.

NOTE Confidence: 0.928324273333333

 $00:43:17.410 \longrightarrow 00:43:18.890$ Whether those differences are different

NOTE Confidence: 0.928324273333333

 $00:43:18.890 \longrightarrow 00:43:21.018$ by the differences in in the fusion

NOTE Confidence: 0.928324273333333

 $00:43:21.018 \longrightarrow 00:43:22.818$ partners versus whether it's the native

NOTE Confidence: 0.928324273333333

00:43:22.818 --> 00:43:24.487 environment of B cell versus T cells.

NOTE Confidence: 0.928324273333333

 $00{:}43{:}24.490 \dashrightarrow 00{:}43{:}27.990$ We have some experiments there to to

NOTE Confidence: 0.928324273333333

00:43:27.990 --> 00:43:31.040 look at that and and again trying to

NOTE Confidence: 0.928324273333333

 $00:43:31.040 \longrightarrow 00:43:32.590$ understand the silicon pathways that

NOTE Confidence: 0.928324273333333

00:43:32.643 --> 00:43:34.554 may be in parallel to plasma blast

NOTE Confidence: 0.928324273333333

00:43:34.554 --> 00:43:36.409 lymphomas to begin to develop some

NOTE Confidence: 0.928324273333333

 $00{:}43{:}36.409 \dashrightarrow 00{:}43{:}38.034$ targeted the rapies for that disease

NOTE Confidence: 0.928324273333333

 $00:43:38.034 \longrightarrow 00:43:40.810$ which there are none at the time.

NOTE Confidence: 0.928324273333333

 $00:43:40.810 \longrightarrow 00:43:45.250$ So for this part we you know we we basically.

 $00:43:45.250 \longrightarrow 00:43:47.650$ I found the use of the second,

NOTE Confidence: 0.928324273333333

 $00{:}43{:}47.650 \dashrightarrow 00{:}43{:}50.074$ the high the next generation of

NOTE Confidence: 0.928324273333333

 $00:43:50.074 \longrightarrow 00:43:52.258$ inhibitors in this disease and

NOTE Confidence: 0.928324273333333

00:43:52.258 --> 00:43:54.986 illustrate the potential of PDX

NOTE Confidence: 0.928324273333333

 $00:43:54.986 \longrightarrow 00:43:57.266$ models to inform the rapeutic options

NOTE Confidence: 0.928324273333333

00:43:57.266 --> 00:43:59.090 for patients with REMALIGNANCIES.

NOTE Confidence: 0.909565391578947

 $00:44:02.530 \longrightarrow 00:44:04.636$ And you know more efforts are

NOTE Confidence: 0.909565391578947

00:44:04.636 --> 00:44:06.790 currently needed to look at adding

NOTE Confidence: 0.909565391578947

 $00{:}44{:}06.790 \dashrightarrow 00{:}44{:}09.170$ electinim to low Latin to first line.

NOTE Confidence: 0.909565391578947

00:44:09.170 --> 00:44:11.290 So currently the NCCN guidelines

NOTE Confidence: 0.909565391578947

 $00{:}44{:}11.290 \dashrightarrow 00{:}44{:}13.410$ have been modified to include.

NOTE Confidence: 0.909565391578947

 $00:44:13.410 \longrightarrow 00:44:15.699$ This as a go to after failure

NOTE Confidence: 0.909565391578947

 $00:44:15.699 \longrightarrow 00:44:17.490$ with first line therapies,

NOTE Confidence: 0.909565391578947

 $00:44:17.490 \longrightarrow 00:44:20.106$ but we're looking to begin to look at

NOTE Confidence: 0.909565391578947

 $00:44:20.106 \longrightarrow 00:44:22.436$ setting up a trial where these are

NOTE Confidence: 0.909565391578947

 $00:44:22.436 \longrightarrow 00:44:25.409$ included as part of the first line therapy.

 $00:44:25.410 \longrightarrow 00:44:27.330$ And then we've set up multiple

NOTE Confidence: 0.909565391578947

 $00:44:27.330 \longrightarrow 00:44:29.242$ lines of these at large B cell

NOTE Confidence: 0.909565391578947

00:44:29.242 --> 00:44:30.943 infomas and a plast cell infomas of

NOTE Confidence: 0.909565391578947

 $00:44:30.943 \longrightarrow 00:44:32.504$ Plast blast infomas to begin to do

NOTE Confidence: 0.909565391578947

 $00:44:32.504 \longrightarrow 00:44:34.239$ some of these functional studies.

NOTE Confidence: 0.909565391578947

00:44:34.240 --> 00:44:36.291 So I won't go through in detail

NOTE Confidence: 0.909565391578947

 $00:44:36.291 \longrightarrow 00:44:37.560$ with this last part,

NOTE Confidence: 0.909565391578947

 $00:44:37.560 \longrightarrow 00:44:39.792$ but one of the issues with lymphoma is

NOTE Confidence: 0.909565391578947

 $00{:}44{:}39.792 \dashrightarrow 00{:}44{:}42.275$ that it's not a sheet of neoplastic cells,

NOTE Confidence: 0.909565391578947

 $00{:}44{:}42.280 \dashrightarrow 00{:}44{:}44.114$ but there is a lot of microenvironmental

NOTE Confidence: 0.909565391578947

00:44:44.114 --> 00:44:45.703 cells that are actively interacting

NOTE Confidence: 0.909565391578947

 $00:44:45.703 \longrightarrow 00:44:47.199$ with the neoplastic cells.

NOTE Confidence: 0.909565391578947

 $00{:}44{:}47.200 \dashrightarrow 00{:}44{:}49.083$ We know the landscape very well of

NOTE Confidence: 0.909565391578947

00:44:49.083 --> 00:44:51.159 the perform as I described initially,

NOTE Confidence: 0.909565391578947

 $00:44:51.160 \longrightarrow 00:44:53.404$ but we still can't explain the

 $00:44:53.404 \longrightarrow 00:44:55.416$ heterogeneity of the disease and the

NOTE Confidence: 0.909565391578947

 $00:44:55.416 \longrightarrow 00:44:57.464$ one thing that we can at this point

NOTE Confidence: 0.909565391578947

 $00:44:57.464 \longrightarrow 00:44:59.699$ know that is important is if patients.

NOTE Confidence: 0.909565391578947

 $00:44:59.700 \longrightarrow 00:45:01.752$ For this the proportion of patients

NOTE Confidence: 0.909565391578947

 $00:45:01.752 \longrightarrow 00:45:03.739$ that need therapy if they are,

NOTE Confidence: 0.909565391578947

 $00:45:03.740 \longrightarrow 00:45:05.900$ if they progress or relapse within

NOTE Confidence: 0.909565391578947

 $00:45:05.900 \longrightarrow 00:45:08.103$ two unit therapy they do really

NOTE Confidence: 0.909565391578947

 $00:45:08.103 \longrightarrow 00:45:10.179$ poorly and others do really well.

NOTE Confidence: 0.909565391578947

 $00:45:10.180 \longrightarrow 00:45:11.908$ But trying to find biomarkers earlier

NOTE Confidence: 0.909565391578947

 $00:45:11.908 \longrightarrow 00:45:13.779$ on to produce that is important.

NOTE Confidence: 0.909565391578947

 $00:45:13.780 \longrightarrow 00:45:15.946$ We think that understanding some elements

NOTE Confidence: 0.909565391578947

 $00:45:15.946 \longrightarrow 00:45:18.379$ of the micro environment may be important.

NOTE Confidence: 0.909565391578947

 $00:45:18.380 \longrightarrow 00:45:20.660$ So we begin to set up,

NOTE Confidence: 0.909565391578947

 $00:45:20.660 \longrightarrow 00:45:22.634$ we've we've set up models of focal

NOTE Confidence: 0.909565391578947

 $00:45:22.634 \longrightarrow 00:45:25.146$ fellow which are much harder than some of

NOTE Confidence: 0.909565391578947

 $00:45:25.146 \longrightarrow 00:45:27.419$ the aggressive lymphomas to begin to look at.

 $00:45:27.420 \longrightarrow 00:45:29.135$ The impact of genetic alterations in in

NOTE Confidence: 0.909565391578947

 $00:45:29.135 \longrightarrow 00:45:30.770$ the context of the microenvironment and

NOTE Confidence: 0.909565391578947

 $00:45:30.770 \longrightarrow 00:45:32.744$ what the interplay may be between the

NOTE Confidence: 0.909565391578947

 $00:45:32.793 \longrightarrow 00:45:34.658$ neoplastic cells and the microenvironment

NOTE Confidence: 0.945844377777778

 $00:45:37.020 \longrightarrow 00:45:39.336$ and the barriers again are having

NOTE Confidence: 0.94584437777778

00:45:39.336 --> 00:45:41.328 models for this and I'll just show

NOTE Confidence: 0.945844377777778

 $00:45:41.328 \longrightarrow 00:45:43.141$ you some of the pictures of the full

NOTE Confidence: 0.94584437777778

 $00{:}45{:}43.141 \dashrightarrow 00{:}45{:}44.456$ and final model we've generated.

NOTE Confidence: 0.94584437777778

 $00:45:44.460 \longrightarrow 00:45:46.416$ So again this is a image

NOTE Confidence: 0.945844377777778

 $00:45:46.416 \longrightarrow 00:45:48.699$ of the tumor on the kidney.

NOTE Confidence: 0.945844377777778

 $00:45:48.700 \longrightarrow 00:45:51.898$ It's much more well circumscribed than

NOTE Confidence: 0.945844377777778

 $00:45:51.900 \longrightarrow 00:45:53.208$ some of the aggressive models here

NOTE Confidence: 0.945844377777778

 $00{:}45{:}53.208 \dashrightarrow 00{:}45{:}54.980$ you can see that the cells are small,

NOTE Confidence: 0.94584437777778

 $00{:}45{:}54.980 \dashrightarrow 00{:}45{:}56.930$ they look more like centrosized but.

NOTE Confidence: 0.945844377777778

 $00:45:56.930 \longrightarrow 00:45:58.085$ Mixed mixed morphology,

00:45:58.085 --> 00:46:01.131 one of the exciting things is that when

NOTE Confidence: 0.945844377777778

 $00:46:01.131 \longrightarrow 00:46:03.642$ you do when we look at the cells they

NOTE Confidence: 0.94584437777778

 $00:46:03.711 \longrightarrow 00:46:06.564$ include both B cells and the human T cells.

NOTE Confidence: 0.945844377777778

 $00:46:06.570 \longrightarrow 00:46:08.607$ So they they those two are present

NOTE Confidence: 0.945844377777778

 $00:46:08.607 \longrightarrow 00:46:10.860$ in the the tumor giving us an

NOTE Confidence: 0.94584437777778

00:46:10.860 --> 00:46:12.834 opportunity to begin to under to

NOTE Confidence: 0.94584437777778

00:46:12.907 --> 00:46:15.169 look at their interactions in vivo.

NOTE Confidence: 0.94584437777778

 $00:46:15.170 \longrightarrow 00:46:18.166$ This is just the immune chemistry showing

NOTE Confidence: 0.945844377777778

 $00:46:18.170 \longrightarrow 00:46:22.013$ the B cells and T cells in the.

NOTE Confidence: 0.94584437777778

 $00:46:22.020 \longrightarrow 00:46:24.288$ In the tissue we do interestingly get

NOTE Confidence: 0.945844377777778

 $00{:}46{:}24.288 \operatorname{--}{>} 00{:}46{:}25.702$ some plasma acidic differentiation

NOTE Confidence: 0.945844377777778

 $00:46:25.702 \longrightarrow 00:46:27.994$ which you don't typically get in

NOTE Confidence: 0.945844377777778

00:46:27.994 --> 00:46:29.999 folk lymphoma but occurs in these

NOTE Confidence: 0.945844377777778

 $00:46:29.999 \longrightarrow 00:46:31.334$ models and we do get,

NOTE Confidence: 0.945844377777778

 $00:46:31.340 \longrightarrow 00:46:33.349$ we do get CD21 meshworks in this

NOTE Confidence: 0.945844377777778

 $00{:}46{:}33.349 \dashrightarrow 00{:}46{:}34.925$ model although they don't persist

 $00:46:34.925 \longrightarrow 00:46:36.555$ and we believe that's because

NOTE Confidence: 0.94584437777778

 $00:46:36.555 \longrightarrow 00:46:38.699$ they're non non hematopoietic cells.

NOTE Confidence: 0.94584437777778

 $00:46:38.700 \longrightarrow 00:46:40.086$ So they persist for a period

NOTE Confidence: 0.945844377777778

 $00:46:40.086 \longrightarrow 00:46:41.340$ of time and go away.

NOTE Confidence: 0.945844377777778

 $00:46:41.340 \longrightarrow 00:46:45.288$ We we do get in NSG mice which don't

NOTE Confidence: 0.94584437777778

 $00:46:45.288 \longrightarrow 00:46:47.172$ have lymph nodes by definition.

NOTE Confidence: 0.945844377777778

 $00:46:47.172 \longrightarrow 00:46:48.436$ When we do the,

NOTE Confidence: 0.94584437777778

 $00:46:48.440 \longrightarrow 00:46:49.952$ when we do the PDX as we begin

NOTE Confidence: 0.94584437777778

 $00{:}46{:}49.952 \dashrightarrow 00{:}46{:}51.707$ to see the generation of lymph

NOTE Confidence: 0.94584437777778

 $00{:}46{:}51.707 \dashrightarrow 00{:}46{:}53.357$ nodes which is really interesting.

NOTE Confidence: 0.945844377777778

 $00:46:53.360 \longrightarrow 00:46:56.144$ So these these cells are tracking

NOTE Confidence: 0.945844377777778

 $00{:}46{:}56.144 \dashrightarrow 00{:}46{:}58.403$ and into some residual primordial

NOTE Confidence: 0.945844377777778

 $00{:}46{:}58.403 \dashrightarrow 00{:}47{:}00.418$ structure and generating lymph nodes

NOTE Confidence: 0.945844377777778

 $00{:}47{:}00.418 \dashrightarrow 00{:}47{:}02.953$ and this just shows the B cells and

NOTE Confidence: 0.945844377777778

 $00:47:02.953 \longrightarrow 00:47:04.690$ the T cells within that and you do see

 $00:47:04.743 \longrightarrow 00:47:06.675$ some of this plasma state differentiation.

NOTE Confidence: 0.91997488

 $00{:}47{:}08.760 \dashrightarrow 00{:}47{:}12.160$ We we do imaging to to to look at these.

NOTE Confidence: 0.91997488

 $00:47:12.160 \longrightarrow 00:47:14.400$ So this is normal kidney on

NOTE Confidence: 0.91997488

 $00:47:14.400 \longrightarrow 00:47:15.840$ the left and on the right.

NOTE Confidence: 0.9402536

 $00:47:18.700 \longrightarrow 00:47:19.420$ We'll see NOTE Confidence: 0.9469625333333333

 $00:47:23.580 \longrightarrow 00:47:25.512$ this, this dark thing is the tumor

NOTE Confidence: 0.946962533333333

00:47:25.512 --> 00:47:27.673 and we we developed this because

NOTE Confidence: 0.946962533333333

 $00:47:27.673 \longrightarrow 00:47:29.778$ unlike the large aggressive tumors

 $00:47:29.778 \longrightarrow 00:47:32.260$ where you can clinically sense when

NOTE Confidence: 0.946962533333333

 $00:47:32.260 \longrightarrow 00:47:34.815$ when the when the tumor is there,

NOTE Confidence: 0.946962533333333

 $00:47:34.820 \longrightarrow 00:47:35.696$ these are indolent.

NOTE Confidence: 0.946962533333333

 $00{:}47{:}35.696 \dashrightarrow 00{:}47{:}38.011$ So we need some imaging to be able

NOTE Confidence: 0.946962533333333

 $00:47:38.011 \longrightarrow 00:47:40.975$ to detect engraftment and we're now

NOTE Confidence: 0.9469625333333333

 $00{:}47{:}40.975 \dashrightarrow 00{:}47{:}44.280$ working at colleagues at the road.

NOTE Confidence: 0.946962533333333

 $00:47:44.280 \longrightarrow 00:47:46.840$ Wignesh Shanmugam is close colleague.

NOTE Confidence: 0.946962533333333

 $00:47:46.840 \longrightarrow 00:47:49.110$ I'm working on spatial transcriptomics

00:47:49.110 --> 00:47:52.334 to begin to ask questions around the

NOTE Confidence: 0.946962533333333

 $00:47:52.334 \longrightarrow 00:47:54.604$ microenvironment and and the spatial

NOTE Confidence: 0.946962533333333

 $00:47:54.604 \longrightarrow 00:47:56.420$ relationships between the neoplastic

NOTE Confidence: 0.946962533333333

 $00:47:56.484 \longrightarrow 00:47:58.782$ cells and different subsets of the

NOTE Confidence: 0.946962533333333

 $00:47:58.782 \longrightarrow 00:48:01.248$ microenvironments and how that plays both

NOTE Confidence: 0.9469625333333333

 $00:48:01.248 \longrightarrow 00:48:04.496$ in real patients but ultimately in the

NOTE Confidence: 0.946962533333333

 $00:48:04.496 \longrightarrow 00:48:08.437$ PD X's where we can do some manipulation.

NOTE Confidence: 0.9469625333333333

 $00:48:08.440 \longrightarrow 00:48:09.413$ So I just want to make sure

NOTE Confidence: 0.946962533333333

00:48:09.413 --> 00:48:10.159 I don't out of time.

NOTE Confidence: 0.946962533333333

00:48:10.160 --> 00:48:14.038 So yeah, so in conclusion here we.

NOTE Confidence: 0.9469625333333333 00:48:14.040 --> 00:48:16.080 We are, NOTE Confidence: 0.946962533333333

 $00:48:16.080 \longrightarrow 00:48:18.544$ we are using you know paired human

NOTE Confidence: 0.946962533333333

 $00{:}48{:}18.544 \dashrightarrow 00{:}48{:}21.702$ focal FOMA and focal PDX samples that

NOTE Confidence: 0.946962533333333

 $00{:}48{:}21.702 --> 00{:}48{:}23.918$ characterize the the microenvironment,

NOTE Confidence: 0.946962533333333

 $00:48:23.920 \longrightarrow 00:48:26.128$ the clonal populations and to explore

00:48:26.128 --> 00:48:28.605 their nature and roll the crosstalk

NOTE Confidence: 0.946962533333333

 $00:48:28.605 \longrightarrow 00:48:30.477$ between these cell populations.

NOTE Confidence: 0.946962533333333

 $00{:}48{:}30.480 \dashrightarrow 00{:}48{:}32.286$ And we anticipate that the <code>INTRIVIAL</code>

NOTE Confidence: 0.946962533333333

 $00:48:32.286 \longrightarrow 00:48:34.888$ model will serve as an ideal system to

NOTE Confidence: 0.9469625333333333

00:48:34.888 --> 00:48:36.558 really interrogate focal formal biology

NOTE Confidence: 0.946962533333333

 $00{:}48{:}36.558 \dashrightarrow 00{:}48{:}39.016$ and understand the mechanism mechanisms

NOTE Confidence: 0.946962533333333

 $00:48:39.016 \longrightarrow 00:48:42.876$ of targeted the rapies and resistance.

NOTE Confidence: 0.946962533333333

00:48:42.876 --> 00:48:47.260 So with that I want to thank you for,

NOTE Confidence: 0.9469625333333333

00:48:47.260 --> 00:48:48.720 for coming in person and

NOTE Confidence: 0.946962533333333

 $00:48:48.720 \longrightarrow 00:48:50.580$ for those who are on zoom,

NOTE Confidence: 0.946962533333333

 $00{:}48{:}50.580 \dashrightarrow 00{:}48{:}53.100$ thank you for for listening

NOTE Confidence: 0.946962533333333

 $00:48:53.100 \longrightarrow 00:48:54.220$ and I'll take any questions.

NOTE Confidence: 0.94025356

 $00:49:02.660 \longrightarrow 00:49:03.020$ Very nice.

NOTE Confidence: 0.901673494

00:49:05.260 --> 00:49:08.700 Two questions Chris really like getting.

NOTE Confidence: 0.94025356 00:49:14.010 --> 00:49:14.210 It's

NOTE Confidence: 0.933544608333333

 $00:49:29.770 \longrightarrow 00:49:34.690$ about is now we know that uniquely

 $00:49:34.690 \longrightarrow 00:49:37.606$ starts by in that general center.

NOTE Confidence: 0.94780115

 $00{:}49{:}44{:}390 \dashrightarrow 00{:}49{:}46.694$ Yeah, I mean presumably like the

NOTE Confidence: 0.94780115

00:49:46.694 --> 00:49:48.736 potentially the map kinase might

NOTE Confidence: 0.94780115

 $00:49:48.736 \longrightarrow 00:49:50.906$ be driving proliferation in those,

NOTE Confidence: 0.94780115

 $00:49:50.910 \longrightarrow 00:49:52.758$ that's one possibility and

NOTE Confidence: 0.94780115

00:49:52.758 --> 00:49:55.068 you know there have been

NOTE Confidence: 0.902829309090909

00:49:57.790 --> 00:50:00.334 you know people looking at micro

NOTE Confidence: 0.902829309090909

 $00{:}50{:}00.334 \dashrightarrow 00{:}50{:}02.990$ RNAs and other other downstream.

NOTE Confidence: 0.902829309090909

 $00:50:02.990 \longrightarrow 00:50:05.078$ But we don't have a clear clearly that

NOTE Confidence: 0.902829309090909

 $00{:}50{:}05.078 \dashrightarrow 00{:}50{:}07.140$ not it's not the same mechanism as

NOTE Confidence: 0.902829309090909

00:50:07.140 --> 00:50:09.152 having BCL two over express but that

NOTE Confidence: 0.902829309090909

 $00:50:09.152 \longrightarrow 00:50:11.352$ also may may be part of the reason why

NOTE Confidence: 0.902829309090909

 $00{:}50{:}11.352 \dashrightarrow 00{:}50{:}13.326$ we never see systemic involvement by we

NOTE Confidence: 0.902829309090909

 $00{:}50{:}13.326 \rightarrow 00{:}50{:}15.644$ don't see you know long term systemic

NOTE Confidence: 0.902829309090909

 $00:50:15.644 \longrightarrow 00:50:17.344$ involvement by these pediatric type.

 $00:50:17.350 \longrightarrow 00:50:19.042$ They're pretty limited and the you

NOTE Confidence: 0.902829309090909

 $00{:}50{:}19.042 \dashrightarrow 00{:}50{:}21.065$ know to the point where there was

NOTE Confidence: 0.902829309090909

 $00{:}50{:}21.065 \dashrightarrow 00{:}50{:}23.004$ a lot of debate about whether these

NOTE Confidence: 0.902829309090909

 $00:50:23.063 \longrightarrow 00:50:24.990$ should even be called lymphoma, right.

NOTE Confidence: 0.950317

 $00:50:33.030 \longrightarrow 00:50:37.736$ Maybe I wonder where it's in

NOTE Confidence: 0.950317

 $00:50:37.736 \longrightarrow 00:50:40.470$ on the OR the machinery. Yeah,

NOTE Confidence: 0.94629164

00:50:43.470 --> 00:50:44.550 yeah. There's no direct. Yeah.

NOTE Confidence: 0.938423890909091

 $00{:}50{:}45.110 \dashrightarrow 00{:}50{:}46.250$ Second question I wanted to

NOTE Confidence: 0.938423890909091

 $00:50:46.250 \longrightarrow 00:50:47.630$ ask is on the latter app,

NOTE Confidence: 0.938423890909091

00:50:47.630 --> 00:50:50.504 the PDX is really pretty exciting

NOTE Confidence: 0.938423890909091

 $00:50:50.504 \longrightarrow 00:50:53.549$ to be able to use those.

NOTE Confidence: 0.938423890909091

 $00{:}50{:}53.550 \dashrightarrow 00{:}50{:}55.726$ But you brought up from the end that

NOTE Confidence: 0.938423890909091

 $00:50:55.726 \longrightarrow 00:50:59.310$ you also want to look at the micro.

NOTE Confidence: 0.938423890909091

 $00{:}50{:}59.310 \dashrightarrow 00{:}51{:}01.630$ Yes, you do get to. Have some of it

NOTE Confidence: 0.850840825

 $00:51:01.630 \longrightarrow 00:51:03.390$ in the future planted,

NOTE Confidence: 0.92767435

 $00:51:03.790 \longrightarrow 00:51:05.350$ but I think a lot of you guys,

 $00:51:05.350 \longrightarrow 00:51:08.626$ some of the issues are that for

NOTE Confidence: 0.92767435

 $00{:}51{:}08.626 \dashrightarrow 00{:}51{:}10.686$ multiple passages that sort of

NOTE Confidence: 0.92767435

00:51:10.686 --> 00:51:12.982 leave that and you start winding up.

NOTE Confidence: 0.92767435

00:51:12.990 --> 00:51:16.410 Yes, yes. So, so I'm wondering if

NOTE Confidence: 0.92767435

 $00:51:16.410 \longrightarrow 00:51:19.654$ a lot of you guys explore which

NOTE Confidence: 0.92767435

 $00{:}51{:}19.654 \dashrightarrow 00{:}51{:}22.150$ types of humanized type models.

NOTE Confidence: 0.950317

 $00:51:24.360 \longrightarrow 00:51:25.965$ We're we're starting to to to

NOTE Confidence: 0.950317

 $00{:}51{:}25.965 \dashrightarrow 00{:}51{:}27.210$ look at the humanized models

NOTE Confidence: 0.9408825625

00:51:27.259 --> 00:51:28.597 we've had it's a little bit,

NOTE Confidence: 0.9408825625

 $00:51:28.600 \longrightarrow 00:51:30.168$ they're a little bit tricky to to

NOTE Confidence: 0.9408825625

 $00:51:30.168 \longrightarrow 00:51:31.800$ use and they're extremely expensive.

NOTE Confidence: 0.9408825625

 $00:51:31.800 \longrightarrow 00:51:33.825$ So you have to like you have to temper

NOTE Confidence: 0.9408825625

00:51:33.825 --> 00:51:36.036 how you do things get this jump into it.

NOTE Confidence: 0.9408825625

 $00:51:36.040 \longrightarrow 00:51:38.632$ And then we also in terms of match and

NOTE Confidence: 0.9408825625

 $00:51:38.632 \longrightarrow 00:51:41.078$ we've tried to attempt to in our bank,

00:51:41.080 --> 00:51:42.444 we actually can prospectively

NOTE Confidence: 0.9408825625

 $00:51:42.444 \longrightarrow 00:51:44.490$ collect blood from the patients who

NOTE Confidence: 0.9408825625

 $00{:}51{:}44.552 \dashrightarrow 00{:}51{:}46.500$ consent and so we've actually tried

NOTE Confidence: 0.9408825625

00:51:46.500 --> 00:51:48.393 to think about matching those which

NOTE Confidence: 0.9408825625

 $00:51:48.393 \longrightarrow 00:51:50.433$ takes some time and then you have to

NOTE Confidence: 0.9408825625

 $00:51:50.433 \longrightarrow 00:51:52.408$ you know so we're working on that.

NOTE Confidence: 0.9408825625

 $00:51:52.410 \longrightarrow 00:51:54.130$ It's a much harder experiment.

NOTE Confidence: 0.9408825625

00:51:54.130 --> 00:51:55.274 Yeah. And you're right.

NOTE Confidence: 0.9408825625

00:51:55.274 --> 00:51:56.670 Over time, it's a, you know,

NOTE Confidence: 0.9408825625

 $00:51:56.670 \longrightarrow 00:51:57.900$ we do run into, you know,

NOTE Confidence: 0.9408825625

00:51:57.900 --> 00:51:59.130 you lose like environment and how.

NOTE Confidence: 0.9408825625 00:51:59.130 --> 00:52:00.890 Yeah. NOTE Confidence: 0.9408825625

1.01E communico. 0.01000=00=0

 $00:52:00.890 \longrightarrow 00:52:01.250$ Thank you.

NOTE Confidence: 0.9301902

 $00:52:04.930 \longrightarrow 00:52:06.246$ Hi, can I ask you a question?

NOTE Confidence: 0.9301902

 $00:52:06.250 \longrightarrow 00:52:08.008$ This is Jeff Sklar on Zoom

NOTE Confidence: 0.94427896

 $00:52:11.210 \longrightarrow 00:52:14.764$ A2 part question. You know, I wonder

 $00:52:14.764 \longrightarrow 00:52:17.249$ about selection that's going on.

NOTE Confidence: 0.95534863

 $00:52:22.680 \longrightarrow 00:52:25.280$ Murders once they're established

NOTE Confidence: 0.95534863

 $00:52:25.280 \longrightarrow 00:52:26.918$ and compare the sequences of the

NOTE Confidence: 0.92683568

 $00:52:30.640 \longrightarrow 00:52:32.116$ yeah, we we do do that,

NOTE Confidence: 0.92683568

 $00{:}52{:}32.120 \dashrightarrow 00{:}52{:}37.408$ we we do sequence them and do RN A/C

NOTE Confidence: 0.92683568

 $00{:}52{:}37.408 \dashrightarrow 00{:}52{:}41.104$ to to compare and the the mutations

NOTE Confidence: 0.92683568

 $00:52:41.104 \longrightarrow 00:52:43.192$ that are present in the patient

NOTE Confidence: 0.92683568

00:52:43.192 --> 00:52:44.432 are typically present in the,

NOTE Confidence: 0.92683568

 $00:52:44.440 \longrightarrow 00:52:47.040$ although there are some.

NOTE Confidence: 0.92683568

 $00:52:47.040 \longrightarrow 00:52:48.630$ They're not 100% but they're

NOTE Confidence: 0.92683568

 $00{:}52{:}48.630 \dashrightarrow 00{:}52{:}50.220$ pretty similar the the main

NOTE Confidence: 0.92683568

00:52:50.277 --> 00:52:51.639 chromatin modifying gene

NOTE Confidence: 0.9301903

 $00{:}52{:}57.040 \dashrightarrow 00{:}53{:}00.365$ and so one of the points I was

NOTE Confidence: 0.9301903

 $00:53:00.365 \longrightarrow 00:53:02.936$ kind of getting at is do you ever

NOTE Confidence: 0.9301903

 $00:53:02.936 \longrightarrow 00:53:05.076$ see transformation to large cell

 $00:53:05.080 \longrightarrow 00:53:08.240$ in the rafted folliculars? Yes,

NOTE Confidence: 0.900959729473684

 $00:53:08.240 \longrightarrow 00:53:10.974$ we have. We have seen that in a in a few

NOTE Confidence: 0.900959729473684

 $00:53:10.974 \longrightarrow 00:53:13.678$ cases we can't get it to recurrently occur.

NOTE Confidence: 0.900959729473684

 $00:53:13.680 \longrightarrow 00:53:15.390$ So we'll have it as a.

NOTE Confidence: 0.900959729473684

 $00:53:15.390 \longrightarrow 00:53:17.374$ As an event and you know we're excited

NOTE Confidence: 0.900959729473684

 $00:53:17.374 \longrightarrow 00:53:19.254$ about the possibility of leveraging

NOTE Confidence: 0.900959729473684

00:53:19.254 --> 00:53:21.026 that to understand transformation,

NOTE Confidence: 0.900959729473684

 $00:53:21.030 \longrightarrow 00:53:24.335$ but it's it's hard to get as a

NOTE Confidence: 0.900959729473684

 $00{:}53{:}24.335 {\:\dashrightarrow\:} 00{:}53{:}25.985$ recurrent issue as a you know,

NOTE Confidence: 0.900959729473684

 $00:53:25.990 \longrightarrow 00:53:29.270$ as a model of that transformation. Thanks.

NOTE Confidence: 0.94025356

 $00{:}53{:}38.470 --> 00{:}53{:}38.590 \ \mathrm{Yeah},$

NOTE Confidence: 0.59691423

 $00:53:41.870 \longrightarrow 00:53:42.030$ very.

NOTE Confidence: 0.933544666666667

 $00:53:51.690 \longrightarrow 00:53:54.450$ Yes, yeah. Yes. Yeah,

NOTE Confidence: 0.9402536

 $00:53:57.450 \longrightarrow 00:53:57.650$ yeah,

NOTE Confidence: 0.9352219

 $00:54:02.450 \longrightarrow 00:54:03.474$ yeah. And that's also

NOTE Confidence: 0.9352219

 $00:54:03.474 \longrightarrow 00:54:05.010$ in my bucket in my mind.

00:54:05.010 --> 00:54:05.900 But I never really talked

NOTE Confidence: 0.9352219

 $00:54:05.900 \longrightarrow 00:54:07.050$ about it because no one knows,

NOTE Confidence: 0.9352219

 $00:54:07.050 \longrightarrow 00:54:08.650$ you know, it's so rare.

NOTE Confidence: 0.9352219

00:54:08.650 --> 00:54:10.340 But I really think that

NOTE Confidence: 0.9352219

 $00:54:10.340 \longrightarrow 00:54:12.030$ ultimately we're going to find

NOTE Confidence: 0.9352219

 $00:54:12.094 \longrightarrow 00:54:13.909$ that these have very similar.

NOTE Confidence: 0.9352219

00:54:13.910 --> 00:54:17.682 Analogy and if targets and in one,

NOTE Confidence: 0.9352219

 $00:54:17.682 \longrightarrow 00:54:18.906$ then my other question

NOTE Confidence: 0.948879371428571

 $00{:}54{:}27.590 \dashrightarrow 00{:}54{:}30.075$ what are your thoughts really

NOTE Confidence: 0.948879371428571

 $00:54:30.075 \longrightarrow 00:54:31.949$ about this grading versus not.

NOTE Confidence: 0.9402536

 $00:54:35.230 \longrightarrow 00:54:38.070$ Yeah. So to be honest when

NOTE Confidence: 0.9402536

 $00:54:38.070 \longrightarrow 00:54:40.110$ I when I first joined

NOTE Confidence: 0.937157169230769

 $00{:}54{:}40.215 \dashrightarrow 00{:}54{:}42.874$ the committee and having trained.

NOTE Confidence: 0.937157169230769

 $00:54:42.874 \longrightarrow 00:54:44.380$ With Nancy Harris.

NOTE Confidence: 0.937157169230769

 $00:54:44.380 \longrightarrow 00:54:45.772$ And I got onto the committee

 $00:54:45.772 \longrightarrow 00:54:46.980$ and the committee was like,

NOTE Confidence: 0.937157169230769

 $00:54:46.980 \longrightarrow 00:54:48.500$ we need to get rid of this grading.

NOTE Confidence: 0.937157169230769

 $00:54:48.500 \longrightarrow 00:54:49.460$ And my eyes were like,

NOTE Confidence: 0.83735318

 $00:54:51.860 \longrightarrow 00:54:54.060$ yeah, because that was like,

NOTE Confidence: 0.83735318

 $00:54:54.060 \longrightarrow 00:54:55.500$ yeah, I was like, wow.

NOTE Confidence: 0.83735318

00:54:55.500 --> 00:54:57.747 And I found myself defending really trying

NOTE Confidence: 0.83735318

 $00:54:57.747 \longrightarrow 00:54:59.978$ to defend the point of grading.

NOTE Confidence: 0.83735318

00:54:59.980 --> 00:55:03.050 But then they made me see that, you know,

NOTE Confidence: 0.83735318

 $00:55:03.050 \longrightarrow 00:55:05.115$ with some of the newer targeted the rapies

NOTE Confidence: 0.83735318

 $00:55:05.115 \longrightarrow 00:55:08.450$ that are being used, there is no.

NOTE Confidence: 0.83735318

 $00:55:08.450 \longrightarrow 00:55:10.585$ There's no difference really in in the

NOTE Confidence: 0.83735318

 $00:55:10.585 \longrightarrow 00:55:12.487$ patients that are 3A versus 1 to 2.

NOTE Confidence: 0.83735318

 $00:55:12.490 \longrightarrow 00:55:14.058$ And then the other thing is like

NOTE Confidence: 0.83735318

00:55:14.058 --> 00:55:15.939 I mentioned the POD24 where where

NOTE Confidence: 0.83735318

 $00:55:15.939 \longrightarrow 00:55:17.954$ patients that relapse or occur

NOTE Confidence: 0.83735318

 $00:55:17.954 \longrightarrow 00:55:20.386$ within two years they do much worse.

00:55:20.386 --> 00:55:22.210 And then the patients who don't,

NOTE Confidence: 0.83735318

 $00{:}55{:}22.210 \dashrightarrow 00{:}55{:}24.010$ if you look at some of those papers

NOTE Confidence: 0.83735318

 $00:55:24.010 \longrightarrow 00:55:26.010$ they they show you like in the

NOTE Confidence: 0.83735318

 $00:55:26.010 \longrightarrow 00:55:27.885$ supplements like the the breakdown of

NOTE Confidence: 0.83735318

 $00:55:27.885 \longrightarrow 00:55:29.810$ these cases and there's an even number

NOTE Confidence: 0.83735318

 $00:55:29.810 \longrightarrow 00:55:32.123$ of grade one to two grade 3A in those.

NOTE Confidence: 0.83735318

 $00:55:32.130 \longrightarrow 00:55:34.398$ So it's actually not predictive of that.

NOTE Confidence: 0.83735318

 $00:55:34.400 \longrightarrow 00:55:36.866$ So I actually think there's a pretty

NOTE Confidence: 0.83735318

 $00:55:36.866 \longrightarrow 00:55:40.192$ good argument of not doing grading.

NOTE Confidence: 0.83735318

 $00{:}55{:}40.192 \dashrightarrow 00{:}55{:}43.524$ I think the consensus of 3B is

NOTE Confidence: 0.83735318

00:55:43.524 --> 00:55:45.252 really more like DLBCL essentially,

NOTE Confidence: 0.83735318

 $00:55:45.252 \longrightarrow 00:55:47.480$ which is basically sheets of large cells.

NOTE Confidence: 0.83735318

 $00{:}55{:}47.480 \dashrightarrow 00{:}55{:}49.480$ This happens to have follicles.

NOTE Confidence: 0.83735318

 $00:55:49.480 \longrightarrow 00:55:51.160$ So what the decision was was

NOTE Confidence: 0.83735318

 $00:55:51.160 \longrightarrow 00:55:52.280$ we would lose it.

00:55:52.280 --> 00:55:53.810 But usually when you think about

NOTE Confidence: 0.83735318

00:55:53.810 --> 00:55:55.678 making a change in a different way,

NOTE Confidence: 0.83735318

 $00:55:55.680 \longrightarrow 00:55:57.156$ show there's sort of this unwritten

NOTE Confidence: 0.83735318

 $00:55:57.156 \longrightarrow 00:55:58.778$ rule that you have to have data.

NOTE Confidence: 0.83735318

 $00:55:58.780 \longrightarrow 00:56:00.257$ To support it and interestingly for that,

NOTE Confidence: 0.83735318

 $00:56:00.260 \longrightarrow 00:56:02.126$ there is no data to talk

NOTE Confidence: 0.83735318

 $00:56:02.126 \longrightarrow 00:56:03.059$ about removing something,

NOTE Confidence: 0.83735318

 $00:56:03.060 \longrightarrow 00:56:05.472$ but it's almost like when you look at the

NOTE Confidence: 0.83735318

 $00{:}56{:}05.472 \dashrightarrow 00{:}56{:}07.660$ origins of grading which was a little bit,

NOTE Confidence: 0.83735318

 $00:56:07.660 \longrightarrow 00:56:09.620$ there's not much data there.

NOTE Confidence: 0.83735318

 $00{:}56{:}09.620 \dashrightarrow 00{:}56{:}11.020$ So it's and then the idea was

NOTE Confidence: 0.83735318

00:56:11.020 --> 00:56:12.338 like over time we'll figure it

NOTE Confidence: 0.83735318

00:56:12.338 --> 00:56:13.899 out but it never got figured out.

NOTE Confidence: 0.83735318

00:56:13.900 --> 00:56:15.300 So it's almost removing something

NOTE Confidence: 0.83735318

 $00:56:15.300 \longrightarrow 00:56:16.140$ that was never.

NOTE Confidence: 0.83735318

 $00:56:16.140 \longrightarrow 00:56:17.220$ So I think that's the,

 $00:56:17.220 \longrightarrow 00:56:19.866$ well what we did do is was

NOTE Confidence: 0.83735318

 $00:56:19.866 \longrightarrow 00:56:22.296$ suggest that grading be allowed.

NOTE Confidence: 0.83735318

 $00:56:22.300 \longrightarrow 00:56:22.880$ So it's,

NOTE Confidence: 0.83735318

00:56:22.880 --> 00:56:24.620 it's not required but at local

NOTE Confidence: 0.83735318

 $00:56:24.620 \longrightarrow 00:56:26.755$ institutions like ours where some of the

NOTE Confidence: 0.83735318

 $00:56:26.755 \longrightarrow 00:56:28.255$ oncologists really want the grading.

NOTE Confidence: 0.83735318

 $00:56:28.260 \longrightarrow 00:56:29.100$ We still have the grading,

NOTE Confidence: 0.83735318

 $00:56:29.100 \longrightarrow 00:56:29.744$ but we just wanted,

NOTE Confidence: 0.83735318

 $00:56:29.744 \longrightarrow 00:56:31.159$ I think the idea was to make it

NOTE Confidence: 0.83735318

00:56:31.159 --> 00:56:32.174 clear that it wasn't required.

NOTE Confidence: 0.83735318

 $00:56:32.180 \longrightarrow 00:56:35.330$ And I think that sort of the

NOTE Confidence: 0.83735318

 $00{:}56{:}35.330 \dashrightarrow 00{:}56{:}36.860$ balance that we left were left with.

NOTE Confidence: 0.8353682

 $00:56:40.300 \longrightarrow 00:56:41.980$ Yeah, right, right.

NOTE Confidence: 0.94427896

 $00:56:44.500 \longrightarrow 00:56:45.420$ Thank you for the question.

NOTE Confidence: 0.9402537

00:56:55.360 --> 00:56:57.320 Are you looking for the DA sequence?

 $00:56:57.320 \longrightarrow 00:57:00.038$ Are you looking for the most of PCM who

NOTE Confidence: 0.9402537

 $00{:}57{:}00.038 \operatorname{{-->}} 00{:}57{:}02.584$ might support the transportation but

NOTE Confidence: 0.9402537

 $00:57:02.584 \longrightarrow 00:57:05.880$ have you snapped any translocation that.

NOTE Confidence: 0.94780125

 $00:57:07.840 \longrightarrow 00:57:09.840$ No. So there's no, there's

NOTE Confidence: 0.94780125

 $00:57:09.840 \longrightarrow 00:57:11.040$ usually no rearrangement.

NOTE Confidence: 0.94780125

00:57:11.040 --> 00:57:13.000 Igh would be the common partner,

NOTE Confidence: 0.86512336

 $00:57:15.640 \longrightarrow 00:57:18.200$ yeah no I I don't know of any.

NOTE Confidence: 0.86512336

 $00:57:18.200 \longrightarrow 00:57:19.532$ I know that there's some new

NOTE Confidence: 0.86512336

 $00{:}57{:}19.532 \dashrightarrow 00{:}57{:}20.560$ technologies that are that can

NOTE Confidence: 0.86512336

 $00:57:20.560 \longrightarrow 00:57:22.940$ that can pick up some uncommon.

NOTE Confidence: 0.86512336

 $00:57:22.940 \longrightarrow 00:57:24.542$ Types of transvocations and we've thought

NOTE Confidence: 0.86512336

 $00:57:24.542 \longrightarrow 00:57:26.220$ about submitting some of these to that,

NOTE Confidence: 0.86512336

 $00:57:26.220 \longrightarrow 00:57:29.420$ but there's no evidence to date of any

NOTE Confidence: 0.86512336

 $00:57:29.420 \longrightarrow 00:57:33.140$ rearrangements in these in these lesions.

NOTE Confidence: 0.86512336

 $00:57:33.140 \longrightarrow 00:57:35.338$ So the second question regarding more

NOTE Confidence: 0.83795913

 $00{:}57{:}35.580 \dashrightarrow 00{:}57{:}41.485$ general for the P7 coma, so really P7

 $00:57:41.485 \longrightarrow 00:57:43.340$ coma that have ITG and location is.

NOTE Confidence: 0.83795913

 $00:57:43.340 \dashrightarrow 00:57:48.623$ So what is driving by the ITG from overreach?

NOTE Confidence: 0.83795913

 $00:57:48.630 \longrightarrow 00:57:50.835$ Right. So because the right now the

NOTE Confidence: 0.83795913

 $00:57:50.835 \longrightarrow 00:57:53.570$ uncle gene always replaced by the ITG

NOTE Confidence: 0.83795913

 $00:57:53.570 \longrightarrow 00:57:56.000$ which so it's high and expressed.

NOTE Confidence: 0.83795913

 $00:57:56.000 \longrightarrow 00:58:01.374$ So my thought is that we if we instead

NOTE Confidence: 0.83795913

00.58:01.374 --> 00.58:04.150 of becoming even the uncle gene which

NOTE Confidence: 0.83795913

00:58:04.150 --> 00:58:06.494 is coming out the ITG transporting

NOTE Confidence: 0.83795913

 $00:58:06.494 \longrightarrow 00:58:10.094$ the level you keep the water

NOTE Confidence: 0.83795913

 $00:58:10.094 \longrightarrow 00:58:12.094$ transportation uncle gene fashion low.

NOTE Confidence: 0.83795913

00:58:12.094 --> 00:58:14.229 You see that will be high in your strategy.

NOTE Confidence: 0.942766971428571

 $00:58:15.230 \longrightarrow 00:58:16.850$ So targeting, targeting the

NOTE Confidence: 0.942766971428571

 $00{:}58{:}16.850 \dashrightarrow 00{:}58{:}18.065$ rearrangement you're saying.

NOTE Confidence: 0.95143515555556

00:58:18.480 --> 00:58:20.965 No talking even though globally

NOTE Confidence: 0.95143515555556

 $00:58:20.965 \longrightarrow 00:58:23.546$ and trying to reliable because

 $00{:}58{:}23.546 \dashrightarrow 00{:}58{:}26.476$ this this model actually friendly

NOTE Confidence: 0.95143515555556

 $00{:}58{:}26.480 \dashrightarrow 00{:}58{:}28.680$ controlled by the ITG reliable.

NOTE Confidence: 0.949198844444445

 $00{:}58{:}29.760 \dashrightarrow 00{:}58{:}31.890$ Yeah no, I've never really thought

NOTE Confidence: 0.94919884444445

 $00{:}58{:}31.890 \dashrightarrow 00{:}58{:}33.840$ thought about that interesting idea.

NOTE Confidence: 0.9402536

00:58:38.360 --> 00:58:38.720 Thank you.