



Dear Colleagues,

We are pleased to share the peer-reviewed highlights of the 56th American Society of Hematology Annual Meeting, held in San Francisco, California, December 6 to 9, 2014.

*MD Conference Express*<sup>®</sup> provides timely, peer-reviewed highlights of high-impact presentations from the live conference, long before they are published in the academic literature, and is a trusted education resource. The articles selected for this issue underwent a rigorous 5-step peer-review process to ensure their accuracy and provide a reliable interim information source prior to the research being vetted by the standard journal peer-review process.

The articles in this issue of *MD Conference Express* represent the most compelling topics of relevance to a broad array of practitioners and have the potential to influence clinical practice.

Among the late-breaking trials and abstracts presented at the meeting, the VALOR study showed that the addition of vosaroxin to cytarabine improved overall survival and complete remission rates in patients with relapsed, refractory acute myeloid leukemia. Vosaroxin is a first-in-class anticancer quinolone derivative. The PADIS-PE trial in patients with a first unprovoked venous thromboembolism (VTE) episode found that extending the duration of oral anticoagulation (OAC) with warfarin for an additional 18 months after an initial 6 months of treatment was associated with a relative risk reduction of 77% for recurrent VTE or major bleeding. However, the benefit was not maintained during the 2-year follow-up after discontinuing warfarin. Further work is needed to determine the patient groups with a lower risk who may not need an indefinite duration of OAC.

The final 5-year data from the DASISION trial showed that long-term treatment with dasatinib, compared with imatinib, resulted in greater rates of molecular and major molecular responses in patients with treatment-naïve chronic phase myeloid leukemia. Yet, overall survival and progression-free survival were not improved. A study conducted by the German Chronic Lymphocyte Leukemia (CLL) Study Group has shown that the triple-drug combination of fludarabine/cyclophosphamide/rituximab was superior to the double-drug combination of bendamustine/rituximab for overall survival in patients with advanced CLL. But, the rates of neutropenia and severe infection were higher with the triple-drug combination, and these were significantly more likely to be severe in patients over 65 years.

The feature article provides a review of the current understanding of the biology and impact of sickle cell disease and remaining treatment challenges. The selected update articles will provide you with reviews of the myeloproliferative neoplasms, non-Hodgkin lymphoma, and controversies in the treatment of myeloma.

We hope that you find the articles and practical perspectives that are contained in the pages of this issue of *MD Conference Express* helpful in integrating this new information into your clinical practice. For more information, please visit [www.mdconferencexpress.com](http://www.mdconferencexpress.com).

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