

Preliminary program

Self-paced learning package: Available from Friday 19 July 2024

| Topic and presenters | | Learning objectives |
|--|--|--|
| Diagnostic tests and cellular therapies | Diagnostic tests Dr Tamasine Stewart, Haematology Laboratory Registrar, Peter MacCallum Cancer Centre and Royal Melbourne Hospital, Melbourne, Vic | Describe the different methodologies used in diagnosing haematological malignancies Explain the principles of fluorescence in situ hybridisation (FISH) and next generation sequencing (NGS) Explain the diagnostic tests required for establishing the diagnosis of haematological malignancies, focusing on acute leukaemia |
| | CAR T-cell therapy Dr Mark Dowling, Cellular Therapies Fellow, Victorian Cancer Agency Mid- Career Fellow, Peter MacCallum Cancer Centre and Royal Melbourne Hospital, Melbourne, Vic | Describe the complex logistics involved in delivering CAR T-cell therapy Describe the standard-of-care indications for CAR T-cell therapy in Australia Overview the pivotal trials and expected outcomes in the approved indications Describe the pathophysiology and management of common CAR-T related toxicities, including cytokine release syndrome (CRS) and immune effector-cell associated neurotoxicity syndrome (ICANS) |
| | Dr Ray Mun Koo, Bone Marrow Transplant Fellow, Clinical Haematology, Peter MacCallum Cancer Centre and Royal Melbourne Hospital, Melbourne, Vic | Describe the basic principles of haematopoietic stem cell transplantation Explain the indications of haematopoietic stem cell transplantation. Explain the basic principles of conditioning therapy for haematopoietic stem cell transplantation Identify the most common toxicities of haematopoietic stem cell transplantation |
| Non-malignant haematological disorders | Part 1: Immune thrombocytopenia Isaac Goncalves, Consultant Haematologist, Peter MacCallum Cancer Centre and Royal Melbourne Hospital, Melbourne, Vic | Describe the pathophysiology and diagnosis of immune thrombocytopenia Compare the efficacy and safety of treatment options for immune thrombocytopenia |
| | Part 2: Haemophilia Antoinette Runge, Haematologist RBWH haemophilia unit | Describe pathophysiology of haemophilia, including the role of clotting factors and their deficiencies Understanding the different type haemophilia (A, B etc) and their respective genetic causes Discuss haemophilia management including prophylactic and emergency treatment strategies |
| Acute Myeloid Leukaemia (AML) | Part 1: Overview Dr Andrew Wei, Stream Leader- Acute Leukaemia and MDS, Peter MacCallum Cancer Centre and Royal Melbourne Hospital, Melbourne, Vic | Describe the pathophysiology of acute myeloid leukaemia Assess the prognostic impact of relevant cytogenetics or molecular mutations of acute myeloid leukaemia |



| | Part 2: Management in young and fit patients | Explain treatment paradigm for acute myeloid leukaemia (AML) |
|-------------------------------------|---|--|
| | Ashish Bajel, Disease Group Co- Lead – Acute Leukemia and MDS, Peter MacCallum Cancer Centre and Royal Melbourne Hospital, Melbourne, Vic | in young and fit patients Describe the most commonly used treatment regimens for AML and their place in therapy |
| | Part 3: Management in older or unfit patients Ashish Bajel, Disease Group Co-Lead – Acute Leukemia and MDS, Peter MacCallum Cancer Centre and Royal Melbourne Hospital, Melbourne, Vic | Identify limitations of AML treatment in older/unfit patients Describe treatment options for patients unfit for standard induction Describe the most commonly used regimens for AML and understand their place in therapy |
| Acute Lymphoblastic Leukaemia | Part 1: ALL overview and management of ALL in young and fit patients Dr Shaun Fleming, Clinical & Laboratory Haematologist, Alfred Health, Melbourne, Vic | Describe of the pathophysiology of acute lymphoblastic leukaemia Appreciate the principles of disease risk stratification and how this affect treatment decisions Understand treatment paradigm for acute lymphoblastic leukaemia in young and fit adult patients Detail common complications from intense treatment regimens for acute lymphoblastic leukaemia |
| | Part 2: Management of ALL in older or unfit patients Dr Shaun Fleming, Clinical & Laboratory Haematologist, Alfred Health, Melbourne, Vic | Understand treatment paradigm for acute lymphoblastic leukaemia in older or unit patients not appropriate for AYA protocols. Describe the most commonly used regimens and understand their place in therapy Recognise limitations of treatment in older/unfit patients |
| Lymphoma | Part 1: DLBCL overview Dr Nick Murphy, Consultant Haematologist, Royal Hobart Hospital, Tas | Describe the pathophysiology of relapsed/refractory Diffuse Large B-cell Lymphoma (DLBCL) Describe poor prognostic factors for DLBCL |
| | Part 2: treatment of relapsed/refractory DLBCL Dr Nick Murphy, Consultant Haematologist, Royal Hobart Hospital, Tas | Understand treatment options and approaches for RR DLBCL in Australia Recognise emerging therapies in RR DLBCL |



| | Part 3: CNS lymphoma Dr Aarya Murali, Advanced trainee Haematology Princess Alexandra hospital, Qld | Pathophysiology of CNS lymphoma including primary and secondary Diagnosis and work up for CNS lymphoma Principles of management and emerging therapies |
|--------------------------------|---|---|
| Myeloma | Part 1: Prognosis Dr Michael Low, Consultant Haematologist, Myeloma Lead & Head of Haematology training, Monash Health; Director of Physician Education Casey Hospital, Melbourne, Vic | Describe the disease course of myeloma Explain when to treat patients with multiple myeloma Describe poor prognostic factors for multiple myeloma Recognise the impact of treatment response on prognosis |
| | Part 2: Treatment of relapsed/refractory multiple myeloma Dr Michael Low, Consultant Haematologist, Myeloma Lead & Head of Haematology training, Monash Health; Director of Physician Education Casey Hospital, Melbourne, Vic | Identify factors that impact treatment selection for patients with relapsed/refractory multiple myeloma Rationalise combination therapy options based on mechanism of action Evaluate different combination therapy treatment options for relapsed multiple myeloma Recognise the role of BCMA targeting therapies and CAR-T in the treatment of relapsed/refractory multiple myeloma |
| Supportive care and toxicities | Philip Selby, Senior Clinical Pharmacist, Haematology, Royal Adelaide Hospital; PHD Candidate, University of Adelaide, School of Medicine | Recognise supportive care requirements in patients undergoing treatment for acute leukaemia Recognise and understand how to manage potential drug interactions, problematic toxicities and practical issues with supportive care medications in acute leukaemia Briefly describe differing supportive care requirements with different acute leukaemia treatment regimens |
| | Supportive care in bone marrow transplant Shevon Fernando, Senior Haematology Pharmacist, Alfred Health, Vic | Explain the reasons supportive care is needed in bone marrow transplant. Describe the role of antimicrobial prophylaxis in bone marrow transplant and the therapeutic agents utilised. Outline preventative strategies for mucositis, neutropenia, hepatic sinusoidal obstruction syndrome in bone marrow transplant. Discuss the principles of graft versus host disease and the therapeutic agents utilised for its prevention |



Preliminary program

Live seminar: Saturday 31 August 2024

All times listed are in AEST

| Time (AEST) | Session | |
|-------------|---|--|
| 0850-0855 | Online login available | |
| 0855-0900 | Welcome, introduction, housekeeping Maggie Chau & Kris Johnstone | |
| 0900-0940 | Review of self-paced learning package material and Q&A Maggie Chau & Kris Johnstone | |
| 0940-0945 | Case session overview and introduction | |
| 0945-1100 | Case session 1: AML | |
| 1100-1115 | Case session 1 Recap and Q&A | |
| 1115-1130 | Break | |
| 1130-1245 | Case session 2: Haemophilia | |
| 1245-1300 | Case session 2 Recap and Q&A | |
| 1300-1330 | Lunch Break | |
| 1330-1430 | Case session 3: CNS lymphoma | |
| 1430-1440 | Case session 3 Recap and Q&A | |
| 1440-1540 | Case session 4: RR Multiple myeloma | |
| 1540-1550 | Case session 4 Recap and Q&A | |
| 1550-1600 | Break | |
| 1600-1645 | Recap and Q&A with competition quiz | |
| 1645-1650 | Close of live virtual seminar | |

Please note: presentation recordings from the live virtual seminar will not be available.