MYELOPROLIFERATIVE NEOPLASMS:
THE CHALLENGES, SUCCESSES
AND STRATEGIES FOR 2012

A CME symposium at the 6th International Congress on Myeloproliferative Diseases and Myelodysplastic Syndromes

Thursday, November 3, 2011
New York Marriott at the Brooklyn Bridge Hotel
333 Adams Street
Brooklyn, NY 11201
Salon A-D

Wine & Cheese Reception: 5:30 pm
Symposium: 6:00 pm – 8:30 pm

Chairmen:
Jerry L. Spivak, MD, FACP
Sidney Kimmel Comprehensive Cancer Center
Johns Hopkins University School of Medicine
Baltimore, MD

Richard T. Silver, MD, FACP
Weill Cornell Medical College
New York-Presbyterian Hospital/
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Faculty:
Tiziano Barbui, MD
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Bergamo, Italy

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The University of Texas
M. D. Anderson Cancer Center
Houston, Texas

John Goldman, DM, FRCP
Hammersmith Hospital
Imperial College London
London, United Kingdom
Program Overview

Over the past two decades, we have witnessed some of the most dramatic advances in understanding the biology and development of new therapies in hematologic malignancies. For ‘classic’ myeloproliferative neoplasms (MPN), this has resulted in the introduction of tyrosine kinase inhibitors (TKIs) for patients with CML which has improved the overall 10-year survival. More recently, several JAK-2 inhibitors have been tested in patients with MF, and current evidence suggests, that though they might not eradicate the malignant clone, they provide clinically significant benefits. This inaugural CME-certified symposium will offer up-to-date information relevant to our research and clinical practice in MPN. For many patients with MPN, given that the current clinical management is often minimally effective, this should be of interest to all medical professionals in this field.

Target Audience
This activity has been designed to meet the medical educational needs of hematologists, oncologists, and other healthcare professionals involved in the care of patients with myeloproliferative neoplasms (MPN).

Educational Objectives
After completing this activity, the participant should be better able to:
• Discuss cellular and molecular biology of MPN including the relevance of the somatic mutations such as JAK2, MPL, LNK and others
• Compare the novel prognostic classifications for patients with MPN
• Contrast the significance of JAK2 allelic burden in JAK2 positive MPN
• Review the risk factors for thrombosis, including the leukemic transformation in MPN
• Outline recent clinical trial data for candidate JAK-2 inhibitors and other novel agents in clinical trials for the treatment of MPN, including SAR302503, CYT387, CEP701, ruxolitinib and others
• Outline novel agents in clinical trials in MPN: panobinostat, pomalidomide, mTOR inhibitors, pegylated interferon alfa and others
• Review the clinical management of patients with CML, in particular, current and future generation TKIs
• Appraise the treatment of T315I CML subclone
• Evaluate updated management guidelines for patients with MPN

Physician Continuing Education

Accreditation Statement
This activity has been planned and implemented in accordance with the Essential Areas and policies of the Accreditation Council for Continuing Medical Education through the joint sponsorship of Postgraduate Institute for Medicine and Alpine Oncology. The Postgraduate Institute for Medicine is accredited by the ACCME to provide continuing medical education for physicians.

Credit Designation
The Postgraduate Institute of Medicine designates this live activity for a maximum of 2.5 AMA PRA Category 1 Credit(s)™. Physicians should claim only the credit commensurate with the extend of their participation in this activity.

Disclosure of Conflicts of Interest
Postgraduate Institute for Medicine (PIM) requires instructors, planners, managers and other individuals who are in a position to control the content of this activity to disclose any real or apparent conflicts of interest they may have as related to the content of this activity. All identified conflicts of interest are thoroughly vetted by PIM for fair balance, scientific objectivity of studies mentioned in the materials or used as the basis for content, and appropriateness of patient care recommendations.

Jointly sponsored by Postgraduate Institute for Medicine and Alpine Oncology AG.
This activity is supported by an independent education grant from Incyte Corp.