WEBVTT

 $00:00:00.000 \longrightarrow 00:00:02.490$ Support for Yale Cancer Answers

NOTE Confidence: 0.857268

 $00:00:02.490 \longrightarrow 00:00:04.980$ comes from AstraZeneca, dedicated

NOTE Confidence: 0.857268

00:00:05.057 --> 00:00:07.432 to advancing options and providing

NOTE Confidence: 0.857268

 $00:00:07.432 \longrightarrow 00:00:10.420$ hope for people living with cancer.

NOTE Confidence: 0.857268

 $00:00:10.420 \longrightarrow 00:00:14.080$ More information at astrazeneca-us.com.

NOTE Confidence: 0.857268

 $00:00:14.080 \longrightarrow 00:00:16.270$ Welcome to Yale Cancer Answers with

NOTE Confidence: 0.857268

00:00:16.270 --> 00:00:18.669 your host doctor Anees Chappar.

NOTE Confidence: 0.857268

 $00:00:18.670 \longrightarrow 00:00:20.650$ Yale Cancer Answers features the

NOTE Confidence: 0.857268

 $00:00:20.650 \longrightarrow 00:00:23.084$ latest information on cancer care by

NOTE Confidence: 0.857268

 $00:00:23.084 \longrightarrow 00:00:24.644$ welcoming oncologists and specialists

NOTE Confidence: 0.857268

 $00:00:24.644 \longrightarrow 00:00:27.258$ who are on the forefront of the

NOTE Confidence: 0.857268

 $00:00:27.258 \longrightarrow 00:00:29.058$ battle to fight cancer. This week,

NOTE Confidence: 0.857268

 $00{:}00{:}29.060 \dashrightarrow 00{:}00{:}31.281$ it's a conversation about Hematologic

NOTE Confidence: 0.857268

00:00:31.281 --> 00:00:33.136 malignancies with Doctor Francesca Montanari.

NOTE Confidence: 0.857268

00:00:33.140 --> 00:00:35.060 Doctor Montanari is an assistant

 $00:00:35.060 \longrightarrow 00:00:36.980$ professor of clinical medicine and

NOTE Confidence: 0.857268

 $00:00:37.041 \longrightarrow 00:00:39.449$ hematology at the Yale School of Medicine,

NOTE Confidence: 0.857268

 $00:00:39.450 \longrightarrow 00:00:41.676$ where Doctor Chagpar is a

NOTE Confidence: 0.857268

00:00:41.676 --> 00:00:43.160 professor of surgical oncology.

NOTE Confidence: 0.857268

 $00:00:43.160 \longrightarrow 00:00:43.530$ Francesca, can we

 $00:00:43.900 \longrightarrow 00:00:46.049$ start off by you telling

NOTE Confidence: 0.8311995

00:00:46.049 --> 00:00:48.391 us a little bit about Hematologic

NOTE Confidence: 0.8311995

 $00:00:48.391 \longrightarrow 00:00:50.626$ malignancies, what they are,

NOTE Confidence: 0.8311995

 $00:00:50.630 \longrightarrow 00:00:54.185$ how common they are, and how people who have

NOTE Confidence: 0.8311995

 $00:00:54.185 \longrightarrow 00:00:57.918$ a hematological malignancy can present?

NOTE Confidence: 0.8118239

 $00:00:57.920 \longrightarrow 00:00:59.483$ Hematological malignancies

NOTE Confidence: 0.8118239

 $00:00:59.483 \longrightarrow 00:01:02.609$ include all types of blood cancers.

NOTE Confidence: 0.8118239

 $00{:}01{:}02.610 \dashrightarrow 00{:}01{:}06.738$ So these are cancers that can affect the

NOTE Confidence: 0.8118239

 $00:01:06.738 \longrightarrow 00:01:10.950$ bone marrow where the blood cells are made,

NOTE Confidence: 0.8118239

 $00:01:10.950 \longrightarrow 00:01:13.584$ blood cells, lymph nodes and other

NOTE Confidence: 0.8118239

00:01:13.584 --> 00:01:16.626 parts of the lymphatic system and

 $00:01:16.626 \longrightarrow 00:01:18.429$ typical hematological malignancies

NOTE Confidence: 0.8118239

 $00:01:18.429 \longrightarrow 00:01:21.434$ or blood cancers are leukemias,

NOTE Confidence: 0.8118239

00:01:21.440 --> 00:01:22.424 lymphomas, Myelomas,

NOTE Confidence: 0.8118239

 $00:01:22.424 \longrightarrow 00:01:26.369$ and others that are rare, such as

NOTE Confidence: 0.8118239

00:01:26.369 --> 00:01:28.834 myelodysplastic and Myeloproliferative disorders,

NOTE Confidence: 0.8118239

 $00:01:28.840 \longrightarrow 00:01:31.300$ and these diseases represent less

NOTE Confidence: 0.8118239

 $00:01:31.300 \longrightarrow 00:01:34.262$ than 10% of all the cancers,

NOTE Confidence: 0.8118239

 $00:01:34.262 \longrightarrow 00:01:36.727$ and there are approximately 1.8

NOTE Confidence: 0.8118239

00:01:36.727 --> 00:01:39.773 million new cases of cancer per year

NOTE Confidence: 0.8118239

00:01:39.773 --> 00:01:42.670 in the United States and approximately

NOTE Confidence: 0.8118239

 $00:01:42.670 \longrightarrow 00:01:45.600$ 180,000 cases of blood cancers.

NOTE Confidence: 0.8118239

 $00:01:45.600 \longrightarrow 00:01:47.392$ So every 3 minutes,

NOTE Confidence: 0.8118239

 $00:01:47.392 \longrightarrow 00:01:50.773$ one person in the US is diagnosed

NOTE Confidence: 0.8118239

 $00:01:50.773 \longrightarrow 00:01:53.109$ with one of these diseases.

NOTE Confidence: 0.8118239

00:01:53.110 --> 00:01:56.547 Approximately half of the blood

NOTE Confidence: 0.8118239

 $00{:}01{:}56.550 \dashrightarrow 00{:}01{:}58.975$ cancers are lymphomas which account

 $00:01:58.975 \longrightarrow 00:02:01.970$ for 86,000 cases per year.

NOTE Confidence: 0.8118239

00:02:01.970 --> 00:02:04.425 They are further divided in Hodgkin

NOTE Confidence: 0.8118239

00:02:04.425 --> 00:02:05.898 and non Hodgkin,

NOTE Confidence: 0.8118239

 $00:02:05.900 \longrightarrow 00:02:08.360$ which are the most common

NOTE Confidence: 0.8118239

 $00:02:08.360 \longrightarrow 00:02:10.328$ and then Hodgkin is

NOTE Confidence: 0.8118239

 $00:02:10.330 \longrightarrow 00:02:13.767$ classified into over 60 distinct subtypes.

NOTE Confidence: 0.8118239

 $00:02:13.770 \longrightarrow 00:02:16.230$ So as you can imagine,

NOTE Confidence: 0.8118239

 $00{:}02{:}16.230 \to 00{:}02{:}19.800$ numbers tend to become very very small

NOTE Confidence: 0.8118239

 $00:02:19.800 \longrightarrow 00:02:23.737$ for the most rare of these subtypes.

NOTE Confidence: 0.8118239

00:02:27.090 --> 00:02:29.550 Leukemia is approximately 60,000 cases

NOTE Confidence: 0.8118239

 $00:02:29.550 \longrightarrow 00:02:33.302$ per year and less than 10% are myelomas,

NOTE Confidence: 0.8118239

 $00{:}02{:}33.302 \dashrightarrow 00{:}02{:}35.226$ so symptoms and manifestation

NOTE Confidence: 0.8118239

 $00:02:35.226 \longrightarrow 00:02:37.600$ of these diseases can vary.

NOTE Confidence: 0.8118239

 $00:02:37.600 \longrightarrow 00:02:40.645$ There is a very wide range of

NOTE Confidence: 0.8118239

 $00:02:40.645 \longrightarrow 00:02:43.084$ symptoms that can be associated

 $00:02:43.084 \longrightarrow 00:02:46.204$ with any of these blood cancers,

NOTE Confidence: 0.8118239

 $00{:}02{:}46.210 \dashrightarrow 00{:}02{:}48.595$ which depends on the specific

NOTE Confidence: 0.8118239

 $00:02:48.595 \longrightarrow 00:02:50.503$ disease and the localization.

NOTE Confidence: 0.8118239

 $00:02:50.510 \longrightarrow 00:02:51.378$ For instance,

NOTE Confidence: 0.8118239

 $00:02:51.378 \longrightarrow 00:02:53.982$ lymphoma can present with the so-called

NOTE Confidence: 0.8118239

 $00:02:53.982 \longrightarrow 00:02:56.720$ constitutional symptoms,

NOTE Confidence: 0.8118239

 $00:02:56.720 \longrightarrow 00:02:58.493$ which are very

NOTE Confidence: 0.8118239

00:02:58.493 --> 00:03:00.857 specific, fever, chills,

NOTE Confidence: 0.8118239

00:03:00.860 --> 00:03:02.740 night sweats,

NOTE Confidence: 0.8118239

 $00:03:02.740 \longrightarrow 00:03:05.560$ unintentional weight loss.

NOTE Confidence: 0.8118239

 $00:03:05.560 \longrightarrow 00:03:08.185$ But there are a lot of other

NOTE Confidence: 0.8118239

 $00:03:08.185 \longrightarrow 00:03:10.809$ symptoms which depend on the specific

NOTE Confidence: 0.8118239

 $00{:}03{:}10.809 \dashrightarrow 00{:}03{:}12.697$ localization of the disease.

NOTE Confidence: 0.8118239

 $00:03:12.700 \longrightarrow 00:03:13.408$ For instance,

NOTE Confidence: 0.8118239

 $00:03:13.408 \longrightarrow 00:03:15.532$ there are lymphomas that like to

NOTE Confidence: 0.8118239

 $00{:}03{:}15.532 \to 00{:}03{:}17.739$ affect the gastroint estinal tract,

 $00:03:17.740 \longrightarrow 00:03:19.840$ and they cause gastrointestinal disturbances.

NOTE Confidence: 0.8118239

 $00:03:19.840 \longrightarrow 00:03:21.905$ Other lymphoma can involve the

NOTE Confidence: 0.8118239

 $00:03:21.905 \longrightarrow 00:03:24.460$ eye or the structures around the

NOTE Confidence: 0.8118239

 $00:03:24.460 \longrightarrow 00:03:26.560$ eye causing trouble with vision,

NOTE Confidence: 0.8118239

 $00:03:26.560 \longrightarrow 00:03:29.080$ or they can affect the skin.

NOTE Confidence: 0.8118239

 $00:03:29.080 \longrightarrow 00:03:31.180$ And as you can imagine,

NOTE Confidence: 0.8118239

00:03:31.180 --> 00:03:34.120 depending upon the organ that is involved,

NOTE Confidence: 0.8118239

 $00:03:34.120 \longrightarrow 00:03:37.330$ you can have very different symptoms.

NOTE Confidence: 0.8118239

 $00:03:37.330 \longrightarrow 00:03:39.365$ Leukemia tends to present with

NOTE Confidence: 0.8118239

 $00:03:39.365 \longrightarrow 00:03:41.912$ symptoms related to the bone marrow

NOTE Confidence: 0.8118239

 $00:03:41.912 \longrightarrow 00:03:44.087$ involvement and the cytopenias such

NOTE Confidence: 0.8118239

00:03:44.087 --> 00:03:46.660 as fatigue from the anemia,

NOTE Confidence: 0.8118239

 $00{:}03{:}46.660 \dashrightarrow 00{:}03{:}48.400$ bleeding from low platelets,

NOTE Confidence: 0.8118239

 $00:03:48.400 \longrightarrow 00:03:51.010$ infection from low blood white cell

NOTE Confidence: 0.8118239

 $00:03:51.087 \longrightarrow 00:03:53.493$ count and multiple myeloma also

 $00:03:53.493 \longrightarrow 00:03:55.989$ can present with fatigue from anemia,

NOTE Confidence: 0.8118239

00:03:55.990 --> 00:03:57.542 infection and bone pain.

NOTE Confidence: 0.8118239

 $00:03:57.542 \longrightarrow 00:04:01.069$ But bone pain is a more distinct

NOTE Confidence: 0.8118239

 $00:04:01.070 \longrightarrow 00:04:03.737$ sign of a multiple myeloma as

NOTE Confidence: 0.8118239

00:04:03.737 --> 00:04:06.655 it involves the bone structure and

NOTE Confidence: 0.8118239

 $00:04:06.655 \longrightarrow 00:04:08.919$ can cause pathological fractures.

NOTE Confidence: 0.8118239

 $00:04:08.920 \longrightarrow 00:04:11.536$ Lethargy and other gastrointestinal

NOTE Confidence: 0.8118239

 $00:04:11.536 \longrightarrow 00:04:13.871$ symptoms related to the hypercalcemia

NOTE Confidence: 0.8118239

 $00:04:13.871 \longrightarrow 00:04:16.937$ also can be present at presentation.

 $00:04:17.420 \longrightarrow 00:04:20.372$ That seems like just an amazing

NOTE Confidence: 0.8141835

00:04:20.372 --> 00:04:23.421 potpourri of symptoms and

NOTE Confidence: 0.8141835

 $00:04:23.421 \longrightarrow 00:04:26.373$ sites that these blood cancers

NOTE Confidence: 0.8141835

 $00:04:26.373 \longrightarrow 00:04:29.220$ can harbor in so how

NOTE Confidence: 0.8141835

 $00:04:29.220 \longrightarrow 00:04:32.993$ do patients find out that they have

NOTE Confidence: 0.8141835

 $00:04:32.993 \longrightarrow 00:04:35.348$ one of these hematologic malignancies?

NOTE Confidence: 0.8141835

 $00:04:35.350 \longrightarrow 00:04:39.270$ It seems like they can be

00:04:39.270 --> 00:04:43.190 anywhere from your bone marrow to your eyes,

NOTE Confidence: 0.8141835

 $00:04:43.190 \longrightarrow 00:04:44.990$ to your gastrointestinal tract,

NOTE Confidence: 0.8141835

 $00:04:44.990 \longrightarrow 00:04:47.690$ and the symptoms can be completely

NOTE Confidence: 0.8141835

00:04:47.761 --> 00:04:50.630 nonspecific, like a little bit of

NOTE Confidence: 0.8141835

 $00:04:50.630 \longrightarrow 00:04:53.400$ fatigue to having visual loss

NOTE Confidence: 0.8141835

 $00:04:53.400 \longrightarrow 00:04:55.928$ or gastrointestinal problems.

NOTE Confidence: 0.8141835

 $00:04:55.930 \longrightarrow 00:05:01.117$ So how is the diagnosis actually made?

NOTE Confidence: 0.8141835

 $00:05:06.230 \longrightarrow 00:05:09.527$ It depends on the various scenarios.

NOTE Confidence: 0.8347193

 $00:05:11.036 \longrightarrow 00:05:13.546$ Some of these blood cancers

NOTE Confidence: 0.8347193

 $00:05:13.546 \longrightarrow 00:05:16.138$ tend to be

NOTE Confidence: 0.8347193

 $00{:}05{:}16.140 \dashrightarrow 00{:}05{:}19.916$ very slow growing and might be picked up

NOTE Confidence: 0.8347193

 $00:05:19.920 \longrightarrow 00:05:20.428$ incidentally,

NOTE Confidence: 0.8347193

 $00:05:20.428 \longrightarrow 00:05:22.968$ just performing some routine blood

NOTE Confidence: 0.8347193

 $00:05:22.968 \longrightarrow 00:05:25.924$ work by the primary care physician

NOTE Confidence: 0.8347193

 $00:05:25.924 \longrightarrow 00:05:28.885$ on occasion of the well being visit.

NOTE Confidence: 0.8347193

 $00{:}05{:}28.890 \dashrightarrow 00{:}05{:}32.173$ So finding a new presence of

 $00{:}05{:}32.173 \dashrightarrow 00{:}05{:}34.655$ increased protein in the blood

NOTE Confidence: 0.8347193

 $00{:}05{:}34.655 {\:\dashrightarrow\:} 00{:}05{:}37.120$ might raise the suspicion of myeloma

NOTE Confidence: 0.8347193

 $00:05:37.120 \longrightarrow 00:05:41.008$ and determine additional

NOTE Confidence: 0.8347193

 $00:05:41.008 \longrightarrow 00:05:43.600$ testing that eventually lead

NOTE Confidence: 0.8347193

 $00:05:43.701 \longrightarrow 00:05:46.809$ to the diagnosis and in other

NOTE Confidence: 0.8347193

 $00:05:46.809 \longrightarrow 00:05:50.062$ cases the symptoms can be more

NOTE Confidence: 0.8347193

00:05:50.062 --> 00:05:52.752 prominent and therefore as part

NOTE Confidence: 0.8347193

 $00:05:52.752 \longrightarrow 00:05:56.016$ of the initial investigation by

NOTE Confidence: 0.8347193

 $00:05:56.016 \longrightarrow 00:05:59.308$ the primary care physician,

NOTE Confidence: 0.8347193

 $00{:}05{:}59.310 \dashrightarrow 00{:}06{:}01.266$ certain signs and symptoms

NOTE Confidence: 0.8347193

 $00:06:01.266 \longrightarrow 00:06:04.200$ might be detected that raise a

NOTE Confidence: 0.8347193

 $00:06:04.290 \longrightarrow 00:06:06.350$ flag for this condition,

NOTE Confidence: 0.8347193

 $00{:}06{:}06{:}06{:}350 \longrightarrow 00{:}06{:}07.859$ and further evaluation

NOTE Confidence: 0.8347193

 $00{:}06{:}07.859 \dashrightarrow 00{:}06{:}09.368$ include imaging studies and

NOTE Confidence: 0.8347193

 $00:06:09.370 \longrightarrow 00:06:12.970$ more in depth blood work

 $00:06:12.970 \longrightarrow 00:06:15.623$ and eventually valuation by a blood

NOTE Confidence: 0.8347193

 $00{:}06{:}15.623 \dashrightarrow 00{:}06{:}18.929$ cancer specialist and so once that

NOTE Confidence: 0.8347369

 $00:06:18.930 \longrightarrow 00:06:22.038$ happens, once they come to

NOTE Confidence: 0.8347369

 $00:06:22.038 \longrightarrow 00:06:26.470$ you as a blood cancer specialist,

NOTE Confidence: 0.8347369

00:06:26.470 --> 00:06:29.680 what's the next thing that happens?

NOTE Confidence: 0.8347369

 $00:06:29.680 \longrightarrow 00:06:31.108$ So typically we

NOTE Confidence: 0.8417714

 $00:06:31.110 \longrightarrow 00:06:34.393$ do really need to run a

NOTE Confidence: 0.8417714

 $00:06:34.393 \longrightarrow 00:06:36.810$ little bit more of a work up,

NOTE Confidence: 0.8417714

 $00{:}06{:}36.810 \dashrightarrow 00{:}06{:}39.180$ and that includes imaging studies,

NOTE Confidence: 0.8417714

00:06:39.180 --> 00:06:43.455 which can be anything from MRI or CT scan,

NOTE Confidence: 0.8417714

 $00{:}06{:}43.460 \dashrightarrow 00{:}06{:}46.956$ even a newer form of CAT scan

NOTE Confidence: 0.8417714

 $00:06:46.956 \longrightarrow 00:06:50.479$ that is called PET Scan where we

NOTE Confidence: 0.8417714

00:06:50.479 --> 00:06:54.046 use glucose to track down in the

NOTE Confidence: 0.8417714

 $00:06:54.046 \longrightarrow 00:06:57.252$ body where there is an increase in

NOTE Confidence: 0.8417714

 $00:06:57.252 \longrightarrow 00:06:59.950$ the metabolic activity that may

NOTE Confidence: 0.8417714

 $00:06:59.950 \longrightarrow 00:07:03.310$ reveal the presence of a cancer.

 $00:07:03.310 \longrightarrow 00:07:05.582$ And ultimately the diagnosis

NOTE Confidence: 0.8417714

00:07:05.582 --> 00:07:08.422 is made through a pathology,

NOTE Confidence: 0.8417714

 $00:07:08.430 \longrightarrow 00:07:13.334$ so we would need a tissue sample either

NOTE Confidence: 0.8417714

 $00:07:13.334 \longrightarrow 00:07:19.357$ from a lymph node or from the bone marrow.

NOTE Confidence: 0.8417714

 $00:07:19.360 \longrightarrow 00:07:23.217$ Or sometimes a blood sample is

NOTE Confidence: 0.8417714

00:07:23.217 --> 00:07:26.599 sufficient where we do run specific

NOTE Confidence: 0.8417714

 $00:07:26.599 \longrightarrow 00:07:30.386$ tests to detect these diseases and

NOTE Confidence: 0.8417714

 $00:07:30.493 \longrightarrow 00:07:34.213$ once we have a pathological confirmation

NOTE Confidence: 0.8417714

 $00:07:34.213 \longrightarrow 00:07:37.752$ then other tests might be warranted

NOTE Confidence: 0.8417714

 $00:07:37.752 \longrightarrow 00:07:41.434$ depending on the nature of the disease

NOTE Confidence: 0.8417714

 $00:07:41.434 \longrightarrow 00:07:45.777$ and typically this test helps us with

NOTE Confidence: 0.8417714

 $00:07:45.777 \longrightarrow 00:07:48.257$ prognostication and with staging.

NOTE Confidence: 0.86975926

 $00:07:49.220 \longrightarrow 00:07:51.746$ Let's talk about that.

NOTE Confidence: 0.86975926

00:07:51.750 --> 00:07:53.850 How do we determine prognosis?

NOTE Confidence: 0.86975926

 $00:07:53.850 \longrightarrow 00:07:55.890$ And in general, what is the

 $00:07:55.890 \longrightarrow 00:07:57.250$ prognosis of these hematological

NOTE Confidence: 0.86975926

 $00{:}07{:}57.315 \dashrightarrow 00{:}07{:}58.899$ malignancies, understanding,

NOTE Confidence: 0.86975926

 $00:07:58.900 \longrightarrow 00:08:01.372$ however, that this is a

NOTE Confidence: 0.86975926

 $00:08:01.372 \longrightarrow 00:08:03.525$ varied group of diseases that

NOTE Confidence: 0.86975926

 $00:08:03.525 \longrightarrow 00:08:06.057$ are lumped into this basket term.

NOTE Confidence: 0.8768639

 $00:08:07.450 \longrightarrow 00:08:11.522$ Right, so there is a lot of variability

NOTE Confidence: 0.8768639

 $00:08:11.522 \longrightarrow 00:08:15.650$ in the behavior of these diseases,

NOTE Confidence: 0.8768639

 $00:08:15.650 \longrightarrow 00:08:19.857$ and as we have improved our knowledge

NOTE Confidence: 0.8768639

 $00{:}08{:}19.857 \dashrightarrow 00{:}08{:}23.366$ in the biology and mechanism

NOTE Confidence: 0.8768639

 $00:08:23.366 \longrightarrow 00:08:26.530$ that drives these diseases,

NOTE Confidence: 0.8768639

 $00{:}08{:}26.530 \dashrightarrow 00{:}08{:}31.549$ we have a very complex way to

NOTE Confidence: 0.8768639

 $00:08:31.549 \longrightarrow 00:08:35.280$ assess prognosis and prognosis

NOTE Confidence: 0.8768639

 $00:08:35.280 \longrightarrow 00:08:40.670$ typically depends on very general

NOTE Confidence: 0.8768639

 $00:08:40.670 \longrightarrow 00:08:42.176$ information

NOTE Confidence: 0.8768639

 $00:08:42.176 \longrightarrow 00:08:45.188$ such as the burden of

NOTE Confidence: 0.8768639

 $00:08:45.188 \longrightarrow 00:08:47.220$ disease at presentation, and

 $00:08:47.220 \longrightarrow 00:08:49.800$ the performance status of the

NOTE Confidence: 0.8768639

 $00{:}08{:}49.800 \dashrightarrow 00{:}08{:}53.586$ patient plays a big role and

NOTE Confidence: 0.8768639

 $00{:}08{:}53.586 \dashrightarrow 00{:}08{:}56.356$ the presence of comorbidities or

NOTE Confidence: 0.8768639

 $00:08:56.356 \longrightarrow 00:08:59.778$ end organ damage from the disease,

NOTE Confidence: 0.8768639

 $00{:}08{:}59.780 \dashrightarrow 00{:}09{:}05.716$ and then there are other markers that we

NOTE Confidence: 0.8768639

 $00{:}05{:}05.720 \longrightarrow 00{:}09{:}09.170$ gather from the pathology evaluation

NOTE Confidence: 0.8768639

 $00:09:09.170 \longrightarrow 00:09:12.735$ and from the genetic makeup through

NOTE Confidence: 0.8768639

 $00:09:12.735 \longrightarrow 00:09:16.239$ molecular studies and based on each

NOTE Confidence: 0.8768639

 $00:09:16.239 \longrightarrow 00:09:19.536$ disease as a specific list of

NOTE Confidence: 0.8768639

 $00:09:19.536 \longrightarrow 00:09:22.572$ features that we pay attention to

NOTE Confidence: 0.8768639

 $00:09:22.580 \longrightarrow 00:09:25.310$ when we determine the risk

NOTE Confidence: 0.8768639

 $00:09:25.310 \longrightarrow 00:09:26.948$ stratification and ultimately

NOTE Confidence: 0.8768639

 $00:09:26.948 \longrightarrow 00:09:29.890$ based on all this information,

NOTE Confidence: 0.8768639

 $00:09:29.890 \longrightarrow 00:09:32.695$ we determine what is the

NOTE Confidence: 0.8768639

00:09:32.695 --> 00:09:34.378 best treatment approach.

 $00:09:35.670 \longrightarrow 00:09:39.065$ What is the treatment

NOTE Confidence: 0.816629

00:09:39.065 --> 00:09:41.290 approach for these cancers

NOTE Confidence: 0.816629

 $00:09:41.290 \longrightarrow 00:09:42.826$ in general?

NOTE Confidence: 0.816629

 $00:09:42.826 \longrightarrow 00:09:46.400$ The type of approach is very variable.

NOTE Confidence: 0.816629

 $00:09:46.400 \longrightarrow 00:09:51.026$ So first of all, the most important

NOTE Confidence: 0.816629

00:09:51.026 --> 00:09:55.593 point that I'd like to make is that,

NOTE Confidence: 0.816629

 $00{:}09{:}55.600 \dashrightarrow 00{:}09{:}58.426$ as I mentioned, the behavior of

NOTE Confidence: 0.816629

 $00:09:58.426 \longrightarrow 00:10:01.220$ blood cancer is very variable.

NOTE Confidence: 0.816629

 $00:10:01.220 \longrightarrow 00:10:04.148$ There are blood cancers that are

NOTE Confidence: 0.816629

00:10:04.148 --> 00:10:06.900 very indolent and slow growing.

NOTE Confidence: 0.816629

 $00{:}10{:}06.900 \mathrel{--}{>} 00{:}10{:}09.890$ And we don't necessarily start

NOTE Confidence: 0.816629

 $00:10:09.890 \longrightarrow 00:10:11.684$ treatment upon diagnosis.

NOTE Confidence: 0.816629

 $00{:}10{:}11.690 \dashrightarrow 00{:}10{:}14.090$ These diseases are considered

NOTE Confidence: 0.816629

00:10:14.090 --> 00:10:17.088 generally not curable, but very,

NOTE Confidence: 0.816629

 $00:10:17.088 \longrightarrow 00:10:19.484$ very manageable and treatable

NOTE Confidence: 0.816629

 $00:10:19.484 \longrightarrow 00:10:21.880$ with certain drugs.

00:10:21.880 --> 00:10:26.092 And the most important thing upon

NOTE Confidence: 0.816629

 $00{:}10{:}26.092 \dashrightarrow 00{:}10{:}30.909$ diagnosis is determining if a patient

NOTE Confidence: 0.816629

 $00:10:30.909 \longrightarrow 00:10:34.683$ requires treatment or can be watched.

NOTE Confidence: 0.816629

 $00{:}10{:}34.690 \dashrightarrow 00{:}10{:}36.870$ We call that

NOTE Confidence: 0.816629

00:10:36.870 --> 00:10:38.505 watchful monitoring,

NOTE Confidence: 0.816629

 $00:10:38.510 \longrightarrow 00:10:41.780$ and once there is an indication

NOTE Confidence: 0.816629

 $00:10:41.780 \longrightarrow 00:10:43.960$ when therapy is warranted,

NOTE Confidence: 0.816629

 $00:10:43.960 \longrightarrow 00:10:48.880$ then the decision of which kind of therapy

NOTE Confidence: 0.816629

 $00{:}10{:}48.880 \dashrightarrow 00{:}10{:}53.597$ depends on the specific type of disease,

NOTE Confidence: 0.816629

 $00:10:53.600 \longrightarrow 00:10:55.825$ the staging of the disease,

NOTE Confidence: 0.816629

00:10:55.825 --> 00:10:57.605 and the predicted behavior,

NOTE Confidence: 0.816629

 $00:10:57.610 \longrightarrow 00:11:00.396$ which is usually based on the genetic

NOTE Confidence: 0.816629

 $00{:}11{:}00.396 \dashrightarrow 00{:}11{:}03.388$ makeup of the specific blood cancer.

NOTE Confidence: 0.816629

 $00:11:03.390 \longrightarrow 00:11:05.170$ Another important factor that

NOTE Confidence: 0.816629

00:11:05.170 --> 00:11:07.840 helps the decision about the best

00:11:07.911 --> 00:11:10.096 strategy is based on patients

NOTE Confidence: 0.816629

 $00{:}11{:}10.096 \dashrightarrow 00{:}11{:}12.281$ characteristics such as the age,

NOTE Confidence: 0.816629

 $00:11:12.290 \longrightarrow 00:11:13.625$ the performance status,

NOTE Confidence: 0.816629

 $00:11:13.625 \longrightarrow 00:11:15.850$ the presence of medical conditions

NOTE Confidence: 0.816629

 $00:11:15.850 \longrightarrow 00:11:17.860$ which might have an impact

NOTE Confidence: 0.816629

 $00:11:17.860 \longrightarrow 00:11:19.870$ on the tolerability of the

NOTE Confidence: 0.816629

00:11:19.953 --> 00:11:22.077 treatment and if transplant,

NOTE Confidence: 0.816629

00:11:22.080 --> 00:11:25.428 if bone marrow transplant can be

NOTE Confidence: 0.816629

 $00:11:25.430 \longrightarrow 00:11:26.693$ used for that

NOTE Confidence: 0.816629

00:11:26.693 --> 00:11:27.956 specific patient,

NOTE Confidence: 0.816629

 $00{:}11{:}27.960 \dashrightarrow 00{:}11{:}30.480$ as part of the treatment strategy.

NOTE Confidence: 0.816629

 $00:11:30.480 \longrightarrow 00:11:33.006$ Another factor that is very important is

NOTE Confidence: 0.816629

 $00{:}11{:}33.010 \dashrightarrow 00{:}11{:}35.300$ a patients preference now that

NOTE Confidence: 0.816629

 $00:11:35.300 \longrightarrow 00:11:37.590$ we have multiple therapy options

NOTE Confidence: 0.816629

00:11:37.660 --> 00:11:39.600 which offer similar results

NOTE Confidence: 0.816629

 $00:11:39.600 \longrightarrow 00:11:42.821$ in the long term but differ in

00:11:42.821 --> 00:11:44.831 terms of administration

NOTE Confidence: 0.816629

 $00{:}11{:}44.831 \dashrightarrow 00{:}11{:}47.071$ modality and side effects profile.

NOTE Confidence: 0.816629

00:11:47.071 --> 00:11:49.456 Patient preference might play a

NOTE Confidence: 0.816629

 $00:11:49.456 \longrightarrow 00:11:52.217$ big role in the final decision.

00:11:55.260 --> 00:11:58.490 During the past year there is another

NOTE Confidence: 0.8295221

 $00:11:58.490 \longrightarrow 00:12:01.806$ factor that has played

NOTE Confidence: 0.8295221

00:12:01.806 --> 00:12:05.026 a big role in our decision making,

NOTE Confidence: 0.8295221

 $00{:}12{:}05.030 \dashrightarrow 00{:}12{:}07.820$ which has been the COVID pandemic.

NOTE Confidence: 0.8295221

 $00:12:07.820 \longrightarrow 00:12:10.898$ So having an aggressive blood cancer

NOTE Confidence: 0.8295221

00:12:10.898 --> 00:12:13.857 that requires treatment and has not

NOTE Confidence: 0.8295221

 $00:12:13.857 \longrightarrow 00:12:16.720$ had any variation.

NOTE Confidence: 0.8295221

00:12:16.720 --> 00:12:18.978 But because of the presence of the COVID pan-

demic,

NOTE Confidence: 0.8295221

 $00:12:18.980 \longrightarrow 00:12:21.350$ for those diseases that are

NOTE Confidence: 0.8295221

00:12:21.350 --> 00:12:23.728 more indolent and not immediately

NOTE Confidence: 0.8295221

00:12:23.728 --> 00:12:25.170 life threatening,

00:12:25.170 --> 00:12:28.182 we have been shifted away from

NOTE Confidence: 0.8295221

 $00{:}12{:}28.182 \dashrightarrow 00{:}12{:}30.913$ using certain drugs or certain

NOTE Confidence: 0.8295221

 $00{:}12{:}30.913 \dashrightarrow 00{:}12{:}34.663$ strategies to maintain the disease in

NOTE Confidence: 0.8295221

 $00:12:34.663 \longrightarrow 00:12:38.060$ remission for longer period of time.

NOTE Confidence: 0.8295221

 $00:12:38.060 \longrightarrow 00:12:40.508$ Unless there was an overall survival

NOTE Confidence: 0.8295221

 $00:12:40.508 \longrightarrow 00:12:43.148$ benefit in order to minimize the

NOTE Confidence: 0.8295221

 $00:12:43.148 \longrightarrow 00:12:45.944$ risks of increasing the severity and

NOTE Confidence: 0.8295221

 $00:12:45.944 \longrightarrow 00:12:48.338$ mortality from the infection.

00:12:50.605 --> 00:12:53.790 There's a few points there that you

NOTE Confidence: 0.84698224

 $00{:}12{:}53.882 \rightarrow 00{:}12{:}56.514$ mentioned that I want to pick up

NOTE Confidence: 0.84698224

00:12:56.514 --> 00:12:59.790 on and the first is that some of

NOTE Confidence: 0.84698224

 $00:12:59.790 \longrightarrow 00:13:01.840$ these diseases are fairly indolent

NOTE Confidence: 0.84698224

 $00:13:01.920 \longrightarrow 00:13:04.120$ and may not require treatment.

NOTE Confidence: 0.84698224

 $00{:}13{:}04.120 \dashrightarrow 00{:}13{:}05.816$ This kind of expectant

NOTE Confidence: 0.84698224

 $00{:}13{:}05.816 \dashrightarrow 00{:}13{:}07.088$ watchful waiting approach.

NOTE Confidence: 0.84698224

 $00:13:07.090 \longrightarrow 00:13:09.215$ How do you determine whether

00:13:09.215 --> 00:13:11.340 that's the case for patients,

NOTE Confidence: 0.84698224

 $00:13:11.340 \longrightarrow 00:13:13.610$ particularly when you mentioned that

NOTE Confidence: 0.84698224

00:13:13.610 --> 00:13:16.840 many of these cancers are not quote

NOTE Confidence: 0.84698224

 $00:13:16.840 \longrightarrow 00:13:19.040$ curable but they are manageable?

NOTE Confidence: 0.84698224

00:13:19.040 --> 00:13:22.670 And do patients get some anxiety over

NOTE Confidence: 0.84698224

 $00{:}13{:}22.670 \dashrightarrow 00{:}13{:}26.660$ the idea that they may have a cancer

NOTE Confidence: 0.84698224

 $00:13:26.660 \longrightarrow 00:13:29.708$ that were simply watching?

NOTE Confidence: 0.878338200000001

 $00:13:29.710 \longrightarrow 00:13:32.770$ It's very important to have that

NOTE Confidence: 0.878338200000001

 $00{:}13{:}32.770 \dashrightarrow 00{:}13{:}35.405$ clear communication with the patient

NOTE Confidence: 0.878338200000001

 $00:13:35.405 \longrightarrow 00:13:37.445$ that initiating treatment earlier

NOTE Confidence: 0.878338200000001

 $00:13:37.445 \longrightarrow 00:13:41.053$ for this kind of cancer does not

NOTE Confidence: 0.878338200000001

 $00{:}13{:}41.053 \dashrightarrow 00{:}13{:}43.488$ necessarily translate in a prolongation

NOTE Confidence: 0.878338200000001

 $00:13:43.488 \longrightarrow 00:13:46.492$ of their life expectancy and the

NOTE Confidence: 0.878338200000001

 $00:13:46.492 \longrightarrow 00:13:50.090$ goal of the treatment in their case

NOTE Confidence: 0.878338200000001

00:13:50.090 --> 00:13:52.826 is to minimize the toxicity related

NOTE Confidence: 0.878338200000001

 $00:13:52.826 \longrightarrow 00:13:56.445$ to the use of certain agents and

00:13:56.445 --> 00:13:59.847 maximizing the effect in terms of

NOTE Confidence: 0.878338200000001

 $00:13:59.847 \longrightarrow 00:14:03.526$ allowing them to live their normal life

NOTE Confidence: 0.878338200000001

 $00:14:03.526 \longrightarrow 00:14:06.570$ without having any side effects from

NOTE Confidence: 0.878338200000001

 $00:14:06.570 \longrightarrow 00:14:09.660$ either the treatment or the disease.

NOTE Confidence: 0.8480717

 $00:14:10.620 \longrightarrow 00:14:12.610$ So important to

NOTE Confidence: 0.8480717

 $00:14:12.610 \longrightarrow 00:14:13.804$ have good communication.

NOTE Confidence: 0.8480717

 $00:14:13.810 \longrightarrow 00:14:16.216$ We're going to learn a

NOTE Confidence: 0.8480717

 $00{:}14{:}16.216 \dashrightarrow 00{:}14{:}17.820$ lot more about hematological

NOTE Confidence: 0.8480717

 $00{:}14{:}17.889 \dashrightarrow 00{:}14{:}20.043$ malignancies right after we take a

NOTE Confidence: 0.8480717

 $00{:}14{:}20.043 \dashrightarrow 00{:}14{:}22.589$ short break for a medical minute.

NOTE Confidence: 0.8480717

00:14:22.590 --> 00:14:25.376 Please stay tuned to learn more with

NOTE Confidence: 0.8480717

 $00:14:25.380 \longrightarrow 00:14:26.706$ my guest Doctor

NOTE Confidence: 0.8480717

 $00{:}14{:}26.706 --> 00{:}14{:}28.474$ Francesca Montanari.

NOTE Confidence: 0.8480717

 $00:14:28.474 \longrightarrow 00:14:30.600$ Support for Yale Cancer Answers comes from

NOTE Confidence: 0.8480717

 $00:14:30.600 \longrightarrow 00:14:32.420$ AstraZeneca, working to eliminate

 $00:14:32.420 \longrightarrow 00:14:34.558$ cancer as a cause of death.

NOTE Confidence: 0.8480717

 $00{:}14{:}34.560 \dashrightarrow 00{:}14{:}37.948$ Learn more at a strazeneca-us.com.

NOTE Confidence: 0.8480717

 $00:14:37.950 \longrightarrow 00:14:39.805$ This is a medical minute

NOTE Confidence: 0.8480717

 $00:14:39.805 \longrightarrow 00:14:41.660$ about head and neck cancers,

NOTE Confidence: 0.8480717

00:14:41.660 --> 00:14:43.575 although the percentage of oral

NOTE Confidence: 0.8480717

 $00{:}14{:}43.575 \dashrightarrow 00{:}14{:}45.910$ and head and neck cancer patients

NOTE Confidence: 0.8480717

00:14:45.910 --> 00:14:48.353 in the United States is only about

NOTE Confidence: 0.8480717

 $00:14:48.353 \longrightarrow 00:14:50.3025\%$ of all diagnosed cancers,

NOTE Confidence: 0.8480717

 $00{:}14{:}50.302 \dashrightarrow 00{:}14{:}52.292$ there are challenging side effects

NOTE Confidence: 0.8480717

 $00:14:52.292 \longrightarrow 00:14:53.739$ associated with these types

NOTE Confidence: 0.8480717

 $00:14:53.739 \longrightarrow 00:14:55.384$ of cancer and their treatment.

NOTE Confidence: 0.8480717

 $00{:}14{:}55.390 \dashrightarrow 00{:}14{:}57.006$ Clinical trials are currently

NOTE Confidence: 0.8480717

 $00:14:57.006 \longrightarrow 00:14:59.026$ underway to test innovative new

NOTE Confidence: 0.8480717

 $00:14:59.026 \longrightarrow 00:15:00.950$ treatments for head and neck cancers,

NOTE Confidence: 0.8480717

 $00:15:00.950 \longrightarrow 00:15:02.960$ and in many cases less radical

NOTE Confidence: 0.8480717

 $00:15:02.960 \longrightarrow 00:15:05.400$ surgeries are able to preserve nerves,

 $00:15:05.400 \longrightarrow 00:15:07.626$ arteries and muscles in the neck,

NOTE Confidence: 0.8480717

 $00{:}15{:}07.630 \dashrightarrow 00{:}15{:}09.600$ enabling patients to move, speak,

NOTE Confidence: 0.8480717

 $00:15:09.600 \longrightarrow 00:15:12.576$ breathe and eat normally after surgery.

NOTE Confidence: 0.8480717

 $00:15:12.580 \longrightarrow 00:15:14.564$ More information is available

NOTE Confidence: 0.8480717

 $00:15:14.564 \longrightarrow 00:15:15.556$ at yale cancercenter.org.

NOTE Confidence: 0.8480717

00:15:15.560 --> 00:15:18.548 You're listening to Connecticut Public Radio.

NOTE Confidence: 0.82719344

00:15:19.530 --> 00:15:21.888 Welcome back to Yale Cancer Answers.

NOTE Confidence: 0.82719344

 $00:15:21.890 \longrightarrow 00:15:24.256$ This is doctor Anees Chagpar

NOTE Confidence: 0.82719344

 $00:15:24.256 \longrightarrow 00:15:26.622$ and I'm joined tonight by my

NOTE Confidence: 0.82719344

 $00{:}15{:}26.622 \dashrightarrow 00{:}15{:}28.194$ guest doctor Francesca Montanari.

NOTE Confidence: 0.82719344

00:15:28.200 --> 00:15:31.161 We're talking about the care of patients

NOTE Confidence: 0.82719344

 $00:15:31.161 \longrightarrow 00:15:32.840$ with hematologic malignacies and

NOTE Confidence: 0.82719344

 $00{:}15{:}32.840 \dashrightarrow 00{:}15{:}34.940$ Francesca right before the break we

NOTE Confidence: 0.82719344

 $00:15:34.940 \longrightarrow 00:15:37.639$ were talking about the fact that these

NOTE Confidence: 0.82719344

 $00:15:37.639 \longrightarrow 00:15:39.619$ hematologic malignancies are so varied,

 $00:15:39.620 \longrightarrow 00:15:42.780$ varied in terms of where they present,

NOTE Confidence: 0.82719344

 $00:15:42.780 \longrightarrow 00:15:45.924$ some being in the bone marrow,

NOTE Confidence: 0.82719344

 $00:15:45.930 \longrightarrow 00:15:47.900$ some being in the lymph nodes,

NOTE Confidence: 0.82719344

00:15:47.900 --> 00:15:50.648 some being organs like

NOTE Confidence: 0.82719344

 $00:15:50.650 \longrightarrow 00:15:53.586$ eyes and GI track and bone and other

NOTE Confidence: 0.82719344

 $00{:}15{:}53.586 \dashrightarrow 00{:}15{:}56.288$ places, they are varied in terms of

NOTE Confidence: 0.82719344

 $00{:}15{:}56.288 \dashrightarrow 00{:}15{:}58.648$ their clinical presentation and the

NOTE Confidence: 0.82719344

 $00:15:58.648 \longrightarrow 00:16:01.300$ symptoms that they cause

NOTE Confidence: 0.82719344

 $00{:}16{:}01.300 \dashrightarrow 00{:}16{:}03.777$ in terms of their clinical course.

NOTE Confidence: 0.82719344

00:16:03.777 --> 00:16:06.039 Some being very indolent and slow

NOTE Confidence: 0.82719344

 $00:16:06.039 \longrightarrow 00:16:08.565$ growing such that they wouldn't even

NOTE Confidence: 0.82719344

 $00{:}16{:}08.565 \dashrightarrow 00{:}16{:}10.329$ warrant necessarily treatment and

NOTE Confidence: 0.82719344

 $00:16:10.329 \longrightarrow 00:16:12.749$ others being far more aggressive.

NOTE Confidence: 0.82719344

 $00:16:12.750 \longrightarrow 00:16:15.459$ Can you tell us a little bit

NOTE Confidence: 0.82719344

 $00:16:15.459 \longrightarrow 00:16:17.430$ more about the cancers,

NOTE Confidence: 0.82719344

 $00:16:17.430 \longrightarrow 00:16:18.854$ specifically what you treat?

 $00:16:18.854 \longrightarrow 00:16:20.990$ Is there a certain type of

NOTE Confidence: 0.82719344

 $00{:}16{:}21.063 \dashrightarrow 00{:}16{:}23.010$ these hematologic malignancies

NOTE Confidence: 0.82719344

 $00:16:23.010 \longrightarrow 00:16:24.230$ that you specialize in?

NOTE Confidence: 0.82052094

 $00:16:25.430 \longrightarrow 00:16:29.830$ Yes, so in terms of blood cancer

NOTE Confidence: 0.82052094

 $00:16:29.830 \longrightarrow 00:16:32.830$ my research interest has

NOTE Confidence: 0.82052094

 $00:16:32.830 \longrightarrow 00:16:36.430$ always been on the lymphoma side.

NOTE Confidence: 0.82052094

 $00:16:36.430 \longrightarrow 00:16:39.200$ So lymphomas by themselves

NOTE Confidence: 0.82052094

 $00:16:39.200 \longrightarrow 00:16:41.970$ constitute the

NOTE Confidence: 0.82052094

 $00{:}16{:}42.073 \dashrightarrow 00{:}16{:}45.229$ biggest part of the blood cancer.

NOTE Confidence: 0.82052094

 $00{:}16{:}45.230 \dashrightarrow 00{:}16{:}46.880$ They are approximately half

NOTE Confidence: 0.82052094

 $00:16:46.880 \longrightarrow 00:16:49.630$ of all the blood cancers,

NOTE Confidence: 0.82052094

 $00:16:49.630 \longrightarrow 00:16:52.708$ but they are very diverse themselves

NOTE Confidence: 0.82052094

 $00:16:52.708 \longrightarrow 00:16:56.499$ and we do typically

NOTE Confidence: 0.82052094

00:16:56.500 --> 00:17:00.308 divide them into big categories,

NOTE Confidence: 0.82052094

00:17:00.310 --> 00:17:02.810 Hodgkin and non Hodgkin,

 $00:17:02.810 \longrightarrow 00:17:05.310$ and then furthermore into

NOTE Confidence: 0.82052094

 $00:17:05.310 \longrightarrow 00:17:08.322$ aggressive and indolent in the

NOTE Confidence: 0.82052094

 $00{:}17{:}08.322 \dashrightarrow 00{:}17{:}11.087$ non Hodgkin lymphoma type and

NOTE Confidence: 0.82052094

 $00:17:11.090 \longrightarrow 00:17:14.394$ so the focus of my research

NOTE Confidence: 0.82052094

 $00:17:14.394 \longrightarrow 00:17:17.817$ has been in trying to better

NOTE Confidence: 0.82052094

 $00{:}17{:}17.817 \dashrightarrow 00{:}17{:}21.597$ understand the biology of the more

NOTE Confidence: 0.82052094

00:17:21.597 --> 00:17:25.040 rare of these lymphoma types.

NOTE Confidence: 0.82052094

 $00:17:25.040 \longrightarrow 00:17:28.864$ And based on the insights in the

NOTE Confidence: 0.82052094

 $00{:}17{:}28.864 \dashrightarrow 00{:}17{:}32.452$ biology to develop new treatment

NOTE Confidence: 0.82052094

 $00:17:32.452 \longrightarrow 00:17:34.976$ strategies that are targeted

NOTE Confidence: 0.82052094

 $00:17:34.976 \longrightarrow 00:17:38.380$ for these less known subtypes.

NOTE Confidence: 0.82052094

00:17:38.380 --> 00:17:39.328 In particular,

NOTE Confidence: 0.82052094

 $00{:}17{:}39.328 \dashrightarrow 00{:}17{:}42.172$ the focus of my research over

NOTE Confidence: 0.82052094

 $00:17:42.172 \longrightarrow 00:17:47.334$ the past decade or so has been on

NOTE Confidence: 0.82052094

00:17:47.334 --> 00:17:49.392 posttransplant lymphoproliferative disorders,

NOTE Confidence: 0.82052094

 $00:17:49.400 \longrightarrow 00:17:52.837$ which are a rare lymphomas that arise

 $00:17:52.837 \longrightarrow 00:17:56.550$ as potentially life threatening complication

NOTE Confidence: 0.82052094

 $00{:}17{:}56.550 \dashrightarrow 00{:}17{:}58.582$ of solid organ transplant.

NOTE Confidence: 0.82052094

 $00:17:58.582 \longrightarrow 00:18:02.315$ These are lymphomas that arise in the

NOTE Confidence: 0.82052094

 $00:18:02.315 \longrightarrow 00:18:05.285$ setting of reactivation of infection

NOTE Confidence: 0.82052094

 $00{:}18{:}05.285 \dashrightarrow 00{:}18{:}08.263$ due to the immunosuppressive treatment

NOTE Confidence: 0.82052094

 $00:18:08.263 \longrightarrow 00:18:11.311$ or due to the chronic dysregulation

NOTE Confidence: 0.82052094

00:18:11.311 --> 00:18:15.008 of the immune system in the setting

NOTE Confidence: 0.82052094

 $00{:}18{:}15.008 \dashrightarrow 00{:}18{:}16.634$ of chronic immunosuppression,

NOTE Confidence: 0.82052094

00:18:16.640 --> 00:18:17.750 and historically,

NOTE Confidence: 0.82052094

 $00{:}18{:}17.750 \dashrightarrow 00{:}18{:}21.080$ the prognosis of these lymphomas have

NOTE Confidence: 0.82052094

00:18:21.080 --> 00:18:24.449 been very poor because of inability

NOTE Confidence: 0.82052094

 $00:18:24.449 \longrightarrow 00:18:27.154$ to deliver full dose treatment.

NOTE Confidence: 0.82052094

 $00:18:27.160 \longrightarrow 00:18:29.904$ And due to the frailty and

NOTE Confidence: 0.82052094

 $00{:}18{:}29.904 \dashrightarrow 00{:}18{:}32.032$ risk of infectious complication

NOTE Confidence: 0.82052094

 $00:18:32.032 \longrightarrow 00:18:36.100$ that this patients experience with a

00:18:36.100 --> 00:18:38.630 regular conventional chemotherapy,

NOTE Confidence: 0.82052094

 $00:18:38.630 \longrightarrow 00:18:41.600$ the risk of dying of infection

NOTE Confidence: 0.82052094

 $00:18:41.600 \longrightarrow 00:18:44.285$ during treatment in this population

NOTE Confidence: 0.82052094

 $00:18:44.285 \longrightarrow 00:18:47.360$ has been estimated around 30%,

NOTE Confidence: 0.82052094

00:18:47.360 --> 00:18:49.675 which is extraordinarily high and

NOTE Confidence: 0.82052094

 $00:18:49.675 \longrightarrow 00:18:53.423$ in order to try to minimize the

NOTE Confidence: 0.82052094

00:18:53.423 --> 00:18:56.095 complication from the treatment,

NOTE Confidence: 0.82052094

00:18:56.100 --> 00:18:58.734 I developed the

NOTE Confidence: 0.82052094

 $00:18:58.734 \longrightarrow 00:19:02.246$ risk stratified treatment adapted

NOTE Confidence: 0.82052094

 $00:19:02.246 \longrightarrow 00:19:07.609$ strategies which are based essentially on

NOTE Confidence: 0.82052094

 $00:19:07.610 \longrightarrow 00:19:08.108$ induction phase

NOTE Confidence: 0.82052094

 $00:19:08.108 \longrightarrow 00:19:11.096$ where we do

NOTE Confidence: 0.82052094

 $00:19:11.096 \longrightarrow 00:19:13.910$ not use cytotoxic chemotherapy but

NOTE Confidence: 0.82052094

00:19:13.910 --> 00:19:16.985 more a targeted antibody approach.

NOTE Confidence: 0.82052094

 $00{:}19{:}16.990 \dashrightarrow 00{:}19{:}20.230$ And then we do reserve escalation

NOTE Confidence: 0.82052094

 $00{:}19{:}20.230 \dashrightarrow 00{:}19{:}22.960$ to chemotherapy only to patients

 $00:19:22.960 \longrightarrow 00:19:26.271$ that do not achieve a full response

NOTE Confidence: 0.82052094

 $00:19:26.271 \longrightarrow 00:19:29.688$ on the least invasive treatment.

NOTE Confidence: 0.82052094

 $00:19:29.690 \longrightarrow 00:19:33.380$ And with these strategies we have

NOTE Confidence: 0.82052094

 $00:19:33.380 \longrightarrow 00:19:35.225$ been able to

NOTE Confidence: 0.82052094

00:19:35.230 --> 00:19:37.996 limit the use of cytotoxic agent

NOTE Confidence: 0.82052094

 $00:19:37.996 \longrightarrow 00:19:41.406$ to less than half of the patient

NOTE Confidence: 0.82052094

 $00:19:41.406 \longrightarrow 00:19:43.358$ population that we do treat.

NOTE Confidence: 0.82052094

 $00:19:43.360 \longrightarrow 00:19:46.228$ Another area

NOTE Confidence: 0.82052094

 $00:19:46.228 \longrightarrow 00:19:48.140$ where I've been conducting

NOTE Confidence: 0.82052094

 $00{:}19{:}48.140 \dashrightarrow 00{:}19{:}50.996$ research is in T cell lymphoma.

NOTE Confidence: 0.82052094

 $00{:}19{:}51.000 \dashrightarrow 00{:}19{:}53.868$ Those are also very rare lymphomas.

NOTE Confidence: 0.82052094

 $00{:}19{:}53.870 \dashrightarrow 00{:}19{:}57.198$ They are much rarer than the B cell

NOTE Confidence: 0.82052094

 $00{:}19{:}57.198 \dashrightarrow 00{:}19{:}59.921$ lymphoma which are the most common

NOTE Confidence: 0.82052094

 $00{:}19{:}59{.}921 \dashrightarrow 00{:}20{:}02{.}171$ non Hodgkin lymphoma out there

NOTE Confidence: 0.82052094

00:20:02.171 --> 00:20:04.623 and unfortunately historically we

 $00:20:04.623 \longrightarrow 00:20:06.540$ have been using

NOTE Confidence: 0.82052094

 $00:20:06.540 \longrightarrow 00:20:08.376$ a treatment

NOTE Confidence: 0.82052094

 $00:20:08.376 \longrightarrow 00:20:10.671$ that has been extrapolated from

NOTE Confidence: 0.82052094

 $00:20:10.671 \longrightarrow 00:20:12.639$ the B cell counterparts,

NOTE Confidence: 0.82052094

 $00:20:12.640 \longrightarrow 00:20:16.042$ so not really specific to these

NOTE Confidence: 0.82052094

00:20:16.042 --> 00:20:19.303 subtypes of lymphomas and the

NOTE Confidence: 0.82052094

 $00{:}20{:}19.303 \dashrightarrow 00{:}20{:}22.418$ results are not as optimal as in

NOTE Confidence: 0.82052094

 $00:20:22.418 \longrightarrow 00:20:24.966$ the B cell counterpart's.

NOTE Confidence: 0.82052094

00:20:24.966 --> 00:20:27.626 Over the past few years,

NOTE Confidence: 0.82052094

 $00:20:27.630 \longrightarrow 00:20:30.262$ 4 new drugs have been approved in

NOTE Confidence: 0.82052094

 $00{:}20{:}30.262 \dashrightarrow 00{:}20{:}32.302$ the space for this, specifically

NOTE Confidence: 0.82052094

 $00:20:32.302 \longrightarrow 00:20:35.214$ for T cell lymphoma and one of

NOTE Confidence: 0.82052094

 $00:20:35.214 \longrightarrow 00:20:38.020$ the challenges that we have now

NOTE Confidence: 0.82052094

 $00:20:38.020 \longrightarrow 00:20:39.868$ are trying to identify

NOTE Confidence: 0.82052094

 $00:20:39.870 \longrightarrow 00:20:42.481$ what is the best sequencing of this

NOTE Confidence: 0.82052094

 $00{:}20{:}42.481 \dashrightarrow 00{:}20{:}45.391$ agent and what is the best way to

 $00:20:45.391 \longrightarrow 00:20:47.792$ combine them to improve the outcome

NOTE Confidence: 0.82052094

 $00{:}20{:}47.792 \dashrightarrow 00{:}20{:}50.837$ of patients with additional malignancies.

NOTE Confidence: 0.86671746

 $00:20:51.690 \longrightarrow 00:20:54.450$ It sounds like in both of those

NOTE Confidence: 0.86671746

 $00:20:54.450 \longrightarrow 00:20:56.660$ scenarios the overarching theme

NOTE Confidence: 0.86671746

 $00:20:56.660 \longrightarrow 00:20:58.584$ is really personalizing treatment

NOTE Confidence: 0.86671746

 $00:20:58.584 \longrightarrow 00:21:01.389$ to the patients individual disease,

NOTE Confidence: 0.86671746

 $00:21:01.390 \longrightarrow 00:21:05.313$ so I wanted to just take a step back

NOTE Confidence: 0.86671746

00:21:05.313 --> 00:21:08.457 and talk a little bit more about

NOTE Confidence: 0.86671746

 $00:21:08.457 \longrightarrow 00:21:11.536$ the intricacies of each of these.

NOTE Confidence: 0.86671746

 $00:21:11.540 \longrightarrow 00:21:14.361$ So with regards to the post transplant

NOTE Confidence: 0.86671746

 $00{:}21{:}14.361 \dashrightarrow 00{:}21{:}16.616$ lymphoma, help us to understand

NOTE Confidence: 0.86671746

00:21:16.616 --> 00:21:19.026 again how these lymphomas occur,

NOTE Confidence: 0.86671746

 $00{:}21{:}19.030 \dashrightarrow 00{:}21{:}21.720$ 'cause certainly there are listeners

NOTE Confidence: 0.86671746

 $00:21:21.720 \longrightarrow 00:21:25.216$ who may have gone through a solid organ

NOTE Confidence: 0.86671746

 $00:21:25.216 \longrightarrow 00:21:28.765$ transplant or may know someone who has and

 $00:21:28.765 \longrightarrow 00:21:32.640$ these patients are on immunosuppressives.

NOTE Confidence: 0.86671746

 $00:21:32.640 \longrightarrow 00:21:34.746$ So does that immunosuppressive

NOTE Confidence: 0.86671746

 $00:21:34.746 \longrightarrow 00:21:36.328$ therapy automatically increase

NOTE Confidence: 0.86671746

00:21:36.328 --> 00:21:38.440 their risk of lymphoma?

NOTE Confidence: 0.86671746

 $00:21:38.440 \longrightarrow 00:21:42.598$ And is there anything that they can do to

NOTE Confidence: 0.86671746

 $00{:}21{:}42.598 \dashrightarrow 00{:}21{:}46.336$ reduce their risk of developing lymphoma

NOTE Confidence: 0.90054584

 $00:21:46.340 \longrightarrow 00:21:47.918$ in that setting?

NOTE Confidence: 0.90054584

00:21:47.918 --> 00:21:50.560 That's a really good question,

NOTE Confidence: 0.90054584

 $00{:}21{:}50.560 \dashrightarrow 00{:}21{:}54.592$ so we do after the transplant patient

NOTE Confidence: 0.90054584

 $00:21:54.592 \longrightarrow 00:21:56.320$ received different immunosuppressive

NOTE Confidence: 0.90054584

 $00:21:56.401 \longrightarrow 00:21:59.943$ treatment which are related to the different

NOTE Confidence: 0.90054584

 $00:21:59.943 \longrightarrow 00:22:03.409$ kind of transplant that they have received.

NOTE Confidence: 0.90054584

 $00:22:03.410 \longrightarrow 00:22:04.546$ For transplant,

NOTE Confidence: 0.90054584

 $00{:}22{:}04.546 \dashrightarrow 00{:}22{:}06.818$ such as intestinal transplant,

NOTE Confidence: 0.90054584

00:22:06.820 --> 00:22:08.593 multi visceral transplant,

NOTE Confidence: 0.90054584

 $00:22:08.593 \longrightarrow 00:22:11.548$ immunosuppressive treatment is much tougher

00:22:11.548 --> 00:22:15.358 and much deeper than a patient that

NOTE Confidence: 0.90054584

 $00:22:15.360 \longrightarrow 00:22:19.128$ for instance receives renal transplant where

NOTE Confidence: 0.90054584

 $00:22:19.128 \longrightarrow 00:22:21.012$ immunosuppresant treatment required

NOTE Confidence: 0.90054584

 $00:22:21.012 \longrightarrow 00:22:24.458$ for the recipient to accept the graft is much less.

 $00:22:33.460 \longrightarrow 00:22:35.852$ And the reason we do see as a

NOTE Confidence: 0.90054584

 $00{:}22{:}35.852 \dashrightarrow 00{:}22{:}38.153$ consequence of the immune suppression

NOTE Confidence: 0.90054584

 $00:22:38.153 \longrightarrow 00:22:40.329$ reactivation of common infection,

NOTE Confidence: 0.90054584

 $00:22:40.330 \longrightarrow 00:22:41.539$ and most important,

NOTE Confidence: 0.90054584

 $00{:}22{:}41.539 \dashrightarrow 00{:}22{:}43.957$ is the Epstein Barr virus,

NOTE Confidence: 0.90054584

 $00:22:43.960 \longrightarrow 00:22:46.788$ which is the virus that causes mononucleosis.

NOTE Confidence: 0.90054584

00:22:46.790 --> 00:22:49.653 Most of the adult population has been

NOTE Confidence: 0.90054584

 $00:22:49.653 \longrightarrow 00:22:52.846$ exposed by adulthood to the virus,

NOTE Confidence: 0.90054584

 $00:22:52.850 \longrightarrow 00:22:55.699$ and the virus is dormant in

NOTE Confidence: 0.90054584

00:22:55.699 --> 00:22:58.100 a silent state in our body,

NOTE Confidence: 0.90054584

 $00:22:58.100 \longrightarrow 00:23:01.736$ and is kept at bay by our immune system.

NOTE Confidence: 0.90054584

 $00:23:01.740 \longrightarrow 00:23:03.860$ So conditions such as immunosupression where

 $00:23:04.710 \longrightarrow 00:23:07.585$ our immune system defenses are lowered

NOTE Confidence: 0.90054584

 $00{:}23{:}07.585 \to 00{:}23{:}11.058$ allow the virus to thrive again

NOTE Confidence: 0.90054584

 $00:23:11.058 \longrightarrow 00:23:14.076$ and replicate and

NOTE Confidence: 0.90054584

00:23:14.080 --> 00:23:16.830 this particular kind of virus,

NOTE Confidence: 0.90054584

 $00{:}23{:}16.830 \dashrightarrow 00{:}23{:}20.876$ in the absence of an immune system

NOTE Confidence: 0.90054584

 $00:23:20.876 \longrightarrow 00:23:25.097$ that fights it and keeps it at bay,

NOTE Confidence: 0.90054584

 $00:23:25.100 \longrightarrow 00:23:29.330$ is able to transform the blood

NOTE Confidence: 0.90054584

 $00:23:29.330 \longrightarrow 00:23:32.660$ cells into lymphoma cells so

NOTE Confidence: 0.90054584

 $00{:}23{:}32.660 \dashrightarrow 00{:}23{:}34.673$ typically in the first year

NOTE Confidence: 0.90054584

 $00:23:34.673 \longrightarrow 00:23:35.876$ after the transplant,

NOTE Confidence: 0.90054584

 $00{:}23{:}35.880 \dashrightarrow 00{:}23{:}39.485$ most of the lymphoma that we do

NOTE Confidence: 0.90054584

 $00{:}23{:}39.485 \dashrightarrow 00{:}23{:}42.900$ see are related to Epstein Barr

NOTE Confidence: 0.90054584

 $00:23:42.900 \longrightarrow 00:23:44.756$ reactivation in the

NOTE Confidence: 0.90054584

 $00:23:44.756 \longrightarrow 00:23:47.076$ setting of the immune suppression,

NOTE Confidence: 0.90054584

 $00:23:47.080 \longrightarrow 00:23:49.852$ the lymphoma that arise after one

 $00:23:49.852 \longrightarrow 00:23:53.158$ year still can be

NOTE Confidence: 0.90054584

 $00{:}23{:}53.158 {\:\dashrightarrow\:} 00{:}23{:}55.882$ linked to the Epstein Barr virus,

NOTE Confidence: 0.90054584

 $00:23:55.890 \longrightarrow 00:23:58.584$ but approximately half of them happen

NOTE Confidence: 0.90054584

00:23:58.584 --> 00:24:01.460 without a reactivation of Epstein virus,

NOTE Confidence: 0.90054584

 $00:24:01.460 \longrightarrow 00:24:04.505$ and they do not hardwire the genetic

NOTE Confidence: 0.90054584

 $00:24:04.505 \longrightarrow 00:24:07.105$ material of the virus and are

NOTE Confidence: 0.90054584

 $00:24:07.105 \longrightarrow 00:24:09.517$ thought to arise in the setting

NOTE Confidence: 0.90054584

00:24:09.517 --> 00:24:12.599 of a chronic immune dysregulation

NOTE Confidence: 0.90054584

 $00:24:12.600 \longrightarrow 00:24:16.110$ due to the longstanding immunosuppression.

 $00:24:16.560 \longrightarrow 00:24:18.530$ Is there anything that

NOTE Confidence: 0.88250816

 $00:24:18.530 \longrightarrow 00:24:21.125$ people can do to limit that

NOTE Confidence: 0.88250816

 $00{:}24{:}21.125 \dashrightarrow 00{:}24{:}23.810$ reactivation of Epstein Barr virus?

NOTE Confidence: 0.88250816

 $00{:}24{:}23.810 \dashrightarrow 00{:}24{:}26.516$ You mentioned that most a dults have

NOTE Confidence: 0.88250816

 $00{:}24{:}26.516 \dashrightarrow 00{:}24{:}28.790$ already experienced Epstein Barr virus,

NOTE Confidence: 0.88250816

 $00:24:28.790 \longrightarrow 00:24:31.490$ and so should have some degree

NOTE Confidence: 0.88250816

 $00:24:31.490 \longrightarrow 00:24:34.230$ of natural immunity to the virus,

 $00:24:34.230 \longrightarrow 00:24:35.990$ although they're on immunosuppresants.

NOTE Confidence: 0.88250816

 $00:24:35.990 \longrightarrow 00:24:39.154$ So has anybody looked at ways that

NOTE Confidence: 0.88250816

 $00:24:39.154 \longrightarrow 00:24:41.449$ people who are on immunosuppresants

NOTE Confidence: 0.88250816

 $00:24:41.449 \longrightarrow 00:24:43.740$ can prevent that reactivation?

NOTE Confidence: 0.88250816

 $00:24:43.740 \longrightarrow 00:24:46.590$ That is a really good question, and

NOTE Confidence: 0.88250816

 $00:24:46.590 \longrightarrow 00:24:48.910$ indeed,

NOTE Confidence: 0.88250816

 $00:24:48.910 \longrightarrow 00:24:52.256$ a part of these

NOTE Confidence: 0.88250816

 $00:24:52.256 \longrightarrow 00:24:56.078$ strategies in the period after transplant

NOTE Confidence: 0.88250816

 $00:24:56.080 \longrightarrow 00:24:58.800$ include close monitoring of the

NOTE Confidence: 0.88250816

 $00:24:58.800 \longrightarrow 00:25:02.160$ EBV presence in the blood.

NOTE Confidence: 0.88250816

 $00{:}25{:}02.160 \longrightarrow 00{:}25{:}05.466$ So after a solid organ transplant,

NOTE Confidence: 0.88250816

 $00{:}25{:}05.470 \longrightarrow 00{:}25{:}09.646$ depending on the kind of solid

NOTE Confidence: 0.88250816

 $00:25:09.646 \longrightarrow 00:25:12.430$ organ transplant there are

NOTE Confidence: 0.88250816

 $00:25:12.430 \longrightarrow 00:25:14.266$ algorithms

NOTE Confidence: 0.88250816

 $00:25:14.266 \longrightarrow 00:25:18.550$ and there is a monitoring of the

NOTE Confidence: 0.88250816

 $00:25:18.665 \longrightarrow 00:25:22.788$ EBV which is done

 $00:25:22.788 \longrightarrow 00:25:26.260$ in certain cases twice a month.

NOTE Confidence: 0.88250816

 $00:25:26.260 \longrightarrow 00:25:28.920$ Other cases once a month,

NOTE Confidence: 0.88250816

 $00:25:28.920 \longrightarrow 00:25:32.136$ depending on the nature of the

NOTE Confidence: 0.88250816

 $00:25:32.136 \longrightarrow 00:25:33.744$ immunosuppression and preemptive

NOTE Confidence: 0.88250816

 $00:25:33.744 \longrightarrow 00:25:35.299$ strategies to intervene.

NOTE Confidence: 0.82128894

 $00:25:37.790 \longrightarrow 00:25:40.742$ Treating the EBV before the lymphoma

NOTE Confidence: 0.82128894

 $00:25:40.742 \longrightarrow 00:25:43.148$ appears has been attempted,

NOTE Confidence: 0.82128894

 $00:25:43.148 \longrightarrow 00:25:46.660$ but the results are not optimal

NOTE Confidence: 0.82128894

 $00:25:46.660 \longrightarrow 00:25:50.108$ because there is a lot of variation in

NOTE Confidence: 0.82128894

 $00{:}25{:}50.108 \dashrightarrow 00{:}25{:}54.020$ the levels of EBV that is noted

NOTE Confidence: 0.82128894

 $00{:}25{:}54.020 \dashrightarrow 00{:}25{:}57.154$ in patients post transplant and not

NOTE Confidence: 0.82128894

 $00:25:57.154 \longrightarrow 00:25:59.839$ every body that experience a reactivation

NOTE Confidence: 0.82128894

 $00{:}25{:}59.839 \dashrightarrow 00{:}26{:}04.040$ of the virus end up developing a

NOTE Confidence: 0.82128894

 $00:26:04.040 \longrightarrow 00:26:07.100$ lymphoma and therefore there is not

NOTE Confidence: 0.82128894

00:26:07.100 --> 00:26:10.010 good guidance out there regarding

 $00:26:10.010 \longrightarrow 00:26:12.920$ who to treat preemptively

NOTE Confidence: 0.82128894

 $00:26:12.920 \longrightarrow 00:26:15.332$ and who to observe.

NOTE Confidence: 0.82128894

 $00{:}26{:}15.332 \dashrightarrow 00{:}26{:}19.610$ When I was at Columbia University prior

NOTE Confidence: 0.82128894

00:26:19.610 --> 00:26:23.978 to joining the group here at Yale

NOTE Confidence: 0.82128894

 $00:26:23.980 \longrightarrow 00:26:28.372$ I was leading the effort to come up with

NOTE Confidence: 0.82128894

 $00{:}26{:}28.372 \dashrightarrow 00{:}26{:}33.078$ with guidelines to help clinician in the

NOTE Confidence: 0.82128894

 $00{:}26{:}33.078 \dashrightarrow 00{:}26{:}37.659$ solid organ transplant team to trouble shoot

NOTE Confidence: 0.82128894

 $00:26:37.660 \longrightarrow 00:26:39.499$ these problems,

NOTE Confidence: 0.82128894

00:26:39.499 --> 00:26:43.177 meaning want to check the EBV

NOTE Confidence: 0.82128894

00:26:43.177 --> 00:26:46.585 at what intervals and what

NOTE Confidence: 0.82128894

 $00:26:46.585 \longrightarrow 00:26:50.738$ is the threshold of the

NOTE Confidence: 0.82128894

00:26:50.738 --> 00:26:54.118 virus to consider potentially

NOTE Confidence: 0.82128894

 $00:26:54.120 \longrightarrow 00:26:57.963$ leading to a lymphoma and when

NOTE Confidence: 0.82128894

 $00:26:57.963 \longrightarrow 00:27:00.610$ to utilize treatment to reduce

NOTE Confidence: 0.82128894

 $00{:}27{:}00.610 \dashrightarrow 00{:}27{:}04.186$ that virus level and it is still a

NOTE Confidence: 0.82128894

 $00{:}27{:}04.294 \dashrightarrow 00{:}27{:}08.158$ discussion and a work in progress.

 $00:27:09.020 \longrightarrow 00:27:11.480$ And do we know what factors

NOTE Confidence: 0.84995484

00:27:11.480 --> 00:27:14.113 kind of trigger that EBV

NOTE Confidence: 0.84995484

00:27:14.113 --> 00:27:16.807 to turn into a lymphoma?

NOTE Confidence: 0.84995484

 $00:27:16.810 \longrightarrow 00:27:18.542$ Because potentially that's another

NOTE Confidence: 0.84995484

 $00:27:18.542 \longrightarrow 00:27:21.140$ place to intervene in thinking about

NOTE Confidence: 0.84995484

 $00:27:21.140 \longrightarrow 00:27:24.060$ is there a way to

NOTE Confidence: 0.84995484

 $00:27:24.060 \longrightarrow 00:27:28.128$ potentially mitigate that transformation.

NOTE Confidence: 0.84995484

 $00:27:28.130 \longrightarrow 00:27:30.070$ That is an excellent

NOTE Confidence: 0.7932247

 $00:27:30.070 \longrightarrow 00:27:32.600$ question, and unfortunately the reason

NOTE Confidence: 0.7932247

 $00:27:32.600 \longrightarrow 00:27:37.070$ why EBV can turner in vitro

NOTE Confidence: 0.7932247

 $00:27:37.070 \longrightarrow 00:27:39.390$ into malignant cells is because

NOTE Confidence: 0.7932247

 $00:27:39.390 \longrightarrow 00:27:42.728$ one side triggers

NOTE Confidence: 0.7932247

 $00{:}27{:}42.728 \dashrightarrow 00{:}27{:}45.616$ the proliferation of these cells and

NOTE Confidence: 0.7932247

 $00{:}27{:}45.616 \dashrightarrow 00{:}27{:}48.694$ the other side blocks an important

NOTE Confidence: 0.7932247

 $00:27:48.694 \longrightarrow 00:27:51.849$ mechanism that is called apoptosis,

 $00:27:51.850 \longrightarrow 00:27:55.458$ by which the cells die but alone is

NOTE Confidence: 0.7932247

00:27:55.458 --> 00:27:59.308 not able to induce lymphoma in vivo.

NOTE Confidence: 0.7932247

 $00:27:59.310 \longrightarrow 00:28:03.230$ And the thought is that there are,

NOTE Confidence: 0.7932247

 $00:28:03.230 \longrightarrow 00:28:08.147$ like in all the other kinds of cancer,

NOTE Confidence: 0.7932247

 $00:28:08.150 \longrightarrow 00:28:11.832$ a multi step process where the

NOTE Confidence: 0.7932247

00:28:11.832 --> 00:28:14.220 cells progressively gain additional

NOTE Confidence: 0.7932247

 $00:28:14.220 \longrightarrow 00:28:16.389$ mutation and overtime

NOTE Confidence: 0.7932247

 $00:28:16.390 \longrightarrow 00:28:19.450$ the addition of this mutation together

NOTE Confidence: 0.7932247

00:28:19.450 --> 00:28:24.048 sort of cause the transformation into cancer,

 $00:28:27.200 \longrightarrow 00:28:30.735$ but we are not able in 2021 to predict

NOTE Confidence: 0.7932247

00:28:30.735 --> 00:28:33.689 which mutation and when these

NOTE Confidence: 0.7932247

00:28:33.689 --> 00:28:35.690 mutations are acquired.

NOTE Confidence: 0.8649993

 $00{:}28{:}36.350 \dashrightarrow 00{:}28{:}38.395$ Doctor Francesca Montanari is assistant

NOTE Confidence: 0.8649993

 $00{:}28{:}38.395 \dashrightarrow 00{:}28{:}40.440$ professor of clinical medicine and

NOTE Confidence: 0.8649993

 $00:28:40.504 \longrightarrow 00:28:42.828$ hematology at the Yale School of Medicine.

NOTE Confidence: 0.8649993

 $00:28:42.830 \longrightarrow 00:28:44.358$ If you have questions,

 $00{:}28{:}44.358 \dashrightarrow 00{:}28{:}45.886$ the address is canceranswers@yale.edu

NOTE Confidence: 0.8649993

 $00{:}28{:}45.886 \dashrightarrow 00{:}28{:}47.995$ and past editions of the program

NOTE Confidence: 0.8649993

 $00{:}28{:}47.995 \dashrightarrow 00{:}28{:}49.921$ are available in audio and written

NOTE Confidence: 0.8649993

 $00:28:49.982 \longrightarrow 00:28:51.590$ form at yalecancercenter.org.

NOTE Confidence: 0.8649993

 $00{:}28{:}51.590 \dashrightarrow 00{:}28{:}54.398$ We hope you'll join us next week to

NOTE Confidence: 0.8649993

 $00:28:54.398 \longrightarrow 00:28:57.137$ learn more about the fight against

NOTE Confidence: 0.8649993

 $00{:}28{:}57.137 \dashrightarrow 00{:}29{:}00.071$ cancer here on Connecticut Public Radio.