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SEGRETERIA SCIENTIFICA

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1st BOLOGNA WORKSHOP on IMMUNOTHERAPY FOR ACUTE MYELOID LEUKEMIA

Bologna, Royal Hotel Carlton
May 21, 2024

MAY 21, 2023

8.30 **Welcome**
M. Cavo (Bologna), M. Seri (Bologna)

8.40 **Introduction**
Rationale and goals of the workshop
A. Curti (Bologna)

8.50 **Lecture**
Metabolic communication in the tumor-immune microenvironmen
Chairman: *M. Cavo (Bologna)*
P.C. H, (Lausanne, Switzerland)

SESSION 1
AML IMMUNOTHERAPY: WHERE WE STAND/ RESULTS FROM CLINICAL STUDIES

Chairmen: *A. Curti (Bologna), F. Pane (Napoli)*

9.20 Clinical development of immune checkpoint inhibitors for AML
N. Daver (Houston, USA)

9.40 Clinical development of BiTes for AML
M. Subklewe (Munich, Germany)

10.00 Clinical development of macrophage blockers
C. Papayannidis (Bologna)

10.20 Clinical development of adoptive immunotherapy with NK cells for AML
Off-the-shelf NK cell therapy for AML
K. Malmberg (Oslo, Norway)

10.40 Enhancing T cell therapy against AML
V. Fetsch (Freiburg, Germany)

11.00 Coffee break

11.20 Immunotherapy for AML: the lesson from allogeneic stem cell transplantation
C. Toffalori (Milano)

11.40 Discussion on Session 1 – round table

SESSION 2
AML IMMUNOTHERAPY: PRECLINICAL MODELS AND BIOLOGICAL EVIDENCE

Chairmen: A. Curti (Bologna), R.M. Lemoli (Genova)

12.00 Immune exhaustion and senescence as dominant dysfunctional states of effector T cells
S. Rutella (Nottingham, United Kingdom)

12.20 From T-Rex to Tregs: Understanding Immunosuppression in MDS as a Potential Model for AML
S. Kordasti (London, United Kingdom)

12.40 Role of the inflammatory niche in Juvenile Myelomonocytic Leukaemia
E. Louka (Oxford, United Kingdom)

13.00 Regulating plasticity of leukemia-associated macrophages in bone marrow niche
B.T. Gjertsen (Bergen, Norway)

13.20 Light Lunch

14.20 3D models for the characterization of bone marrow microenvironment
D. Passaro (Paris, France)

14.40 Role of stroma-and clone-related mechanisms of immunosuppression and aggressiveness in AML
S. Sangaletti (Milano)

15.00 Discussion on Session 2 – round table

SESSION 3
AML IMMUNOTHERAPY: PERSPECTIVES AND CHALLENGES

Chairmen: *A. Curti (Bologna)*

15.20 Exploring the circuits connecting neural-derived factors and Innate Lymphoid Cells (ILCs) in AML
S. Trabanelli (Geneve, Switzerland)

15.40 Artificial intelligence and machine learning as novel tools for the investigation of bone marrow microenvironment
G. Castellani (Bologna)

16.00 Immunoshaping of leukemia microenvironment via mesenchymal stromal cells in AML
M. Ciciarello (Bologna)

16.20 TP53 mutant AML and the immunometabolic perspective
V. Salvestrini (Bologna)

16.40 **Final discussion and Concluding remarks**
Proposal for the creation of a multidisciplinary working group on immunotherapy in AML
A. Curti (Bologna)

RATIONALE AND BACKGROUND

Acute Myeloid Leukemia (AML) is a heterogeneous clonal disease deriving from a rare population of bone marrow leukemic stem cells. Although new and potent drugs have recently entered the clinical stage, the 5-year patient overall survival is largely unsatisfactory, reaching 30% and dropping to 5-10% in the elderly. Therefore, there is an urgent and unmet need for effective new treatment modalities for AML. In the last years, cancer immunotherapy is gaining much interest due to its unique characteristics, such as the absence of conventional drug resistance mechanisms and low grade of toxicity. In AML, the immunotherapy field is evolving and expanding. In particular, immunological drugs, i.e. immune checkpoint inhibitors, have been tested in early clinical trials and monoclonal antibodies as well as adoptive immunotherapy strategies are under active investigation. Despite a strong rationale, the clinical results of these approaches have not been satisfactory, and several questions need to be answered for a full exploitation of immune interventions in AML. Among them, the immunological effects of intrinsic drivers gene mutations, such as FLT3, IDH1, ASXL, TP53, on the immune microenvironment and their relevance for immunotherapy are still poorly investigated. Moreover, the ideal clinical setting for a full exploitation of immunotherapeutic approaches, such as measurable residual disease and maintenance therapy, is far to be settled.
Based on these premises, the aim of the workshop is to move from the current state of art of immunotherapy in AML and discuss recent biological findings, which strongly indicate the specificity of bone marrow immune microenvironment as a critical issue for an effective biology-driven development of immunotherapies in AML. The workshop also aims to bring together researchers and clinicians for the creation of a permanent working group that may represent an advanced and comprehensive forum for the implementation of future strategies in the field.