



Transcript Details

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www.reachmd.com info@reachmd.com (866) 423-7849

The Future of ITP Care: Exploring New Treatments

Announcer:

You're listening to *Project Oncology* on ReachMD. On this episode, Dr. Michele Lambert will discuss her analysis of new agents for the management of immune thrombocytopenia, or ITP, which she presented at the 2024 American Society of Hematology Annual Meeting. Dr. Lambert is the Medical Director of the Special Coagulation Laboratory and a physician in the Division of Hematology at Children's Hospital of Philadelphia. Let's hear from Dr. Lambert now.

Dr. Lambert:

ITP is an autoimmune disease in which the body starts to destroy and remove platelets from the circulation, and this is a multifaceted disease in that any part of the immune system can be potentially abnormal as a result of this disease. What we find is that patients can have abnormalities in antibody production, or they can have abnormal T-cell responses or a combination of both of those things. And the disease also affects both the megakaryocytes, which are the cells in your bone marrow that make new platelets, and also the platelets themselves.

So it's a really exciting time right now to be taking care of patients with ITP because there are some new treatments that have recently been approved, and then there are a lot of new therapies that are currently in development and being looked at in particular for the use in patients who have ITP. And one of those types of therapies is, for example, treatments that target the BTK inhibitor. BTK inhibitors have been used in cancer therapy for a while now, and a novel BTK inhibitor called rilzabrutinib is now in development in both pediatric and adult ITP. We're looking at whether or not it can be helpful in patients, particularly those who've been refractory or not responsive to other therapies.

There are also other treatments that are in development, for example, that will change how antibodies are recycled in the body. And instead of continuing to recycle bad antibodies, we just stop recycling the antibodies, so those bad antibodies go away faster. Those are called the neonatal Fc receptor inhibitors. And then there's also treatments that are targeting both B- and T-cell interactions in the immune system in order to try to help change how the immune system is responding to platelets. And we're also looking at complement, which is a totally new area in investigation in ITP where we've recently learned that some people's platelets are covered in complement to the degree that that actually plays an important role and is a way to target a whole other part of the immune system.

What makes these new treatments really exciting in ITP is that each of these new treatments that is in development targets a slightly different part of the immune system or the immune response, and they target parts of the immune response that we haven't specifically targeted before, so we're trying to get at what is causing the ITP in different ways. And they also present the potential to combine therapies to try to decrease the side effects but target different parts of the immune system at the same time without suppressing the immune system too much—but also by getting that abnormal immune response down far enough that the platelet count recovers.

I think it's a really good time now for clinician investigators, for students and researchers, and also for patients who are willing to participate in clinical trials because there are a lot of new therapies that we're looking at and new ways of treating ITP that we're investigating. I'm hopeful that in the next couple of years we will be able to do even more targeted individualized medicine and be able to better identify what's wrong with each patient's immune system and then specifically pick a treatment that targets that part of the immune response and is able to help the ITP.

Announcer:

That was Dr. Michele Lambert talking about new agents for managing ITP, which she presented on at the 2024 American Society of Hematology Annual Meeting. To access this and other episodes in our series, visit *Project Oncology* on ReachMD.com, where you can





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