

Research Agenda for Hematology

1) Venous Thromboembolism

- a. Identifying and evaluating biomarkers and incorporating such biomarkers into clinical risk assessment scoring algorithms for use in high- (patient) and low- (unprovoked) risk populations.
- b. Evaluate the effectiveness of existing antithrombotic agents in preventing VTE in high-risk populations.
- c. Identifying new therapeutic targets for the development of effective antithrombotics with the ultimate goal of discovering agents that do not cause bleeding.

2) Precision Medicine

- a. Understanding the interaction between genetic mutations and the epigenome in disease predisposition and response to therapy
- b. Assessing existing pre-clinical models for their ability to predict clinical outcomes, developing new models where needed, and developing evidence-based recommendations for the implementation of pre-clinical models.

3) Epigenetics

- a. Targeting/reversing malignant histone modifications.
- b. Development of tools and technologies for locus-specific epigenetic reprogramming e.g., CRISPR/Cas.
- c. Investigate hemoglobin biosynthesis to develop novel approaches to treat sickle cell disease, thalassemia, and other anemias.

4) Stem Cell and Regenerative Medicine

- a. Characterizing hematopoietic stem cell biology and improving strategies for HSC therapies.
- b. Develop an artificial and functional hematopoietic stem cell niche that allows for the expansion of repopulating hematopoietic stem cells.
- c. Develop “designer” hematopoietic cell products and facilitate large-scale production for therapeutic and diagnostic use.

5) Immunologic Treatment for Hematologic Malignancies

- a. Optimize use of CAR T-cell and checkpoint blockade strategies to cure hematologic malignancies and eradicate minimal residual disease.
- b. Improve efficacy and reduce toxicity for CAR T-cell and cellular therapies.
- c. Improve effectiveness of existing curative therapies, specifically allogeneic HSCT.

6) Genome Editing and Gene Therapy

- a. Establish strategies for determining the efficacy, safety, and toxicity of genome editing techniques
- b. Apply genome editing technology to correct HSCs derived from patients with congenital hematologic disease.