

SCDAA MARAC Statement on Gene Therapy and Bone Marrow/Hematopoietic Stem Cell Transplantation in Sickle Cell Disease (Bone Marrow Therapies)

May 15, 2021 - The Sickle Cell Disease Association of America's Medical and Research Advisory Committee is aware of two cases of leukemia or other cancer-like conditions in people who have undergone gene therapy for sickle cell disease. This is more than would be expected given the small number of individuals who have undergone gene therapy to date. It is unclear why cancer developed in these individuals. The mission of SCDAA is to promote the best interests of individuals living with SCD. Accordingly, SCDAA MARAC urges action in three directions:

1. Informing patients, families and others about the current understanding of cancer risk as it pertains to sickle cell disease in a clear and accurate way.

- 1. Educate individuals with SCD who are participating in gene therapy (gene editing as well as lentiviral gene transfer) and other stem cell transplants (bone marrow therapies). Ensure that the consent forms reflect the recent findings and potential risks of leukemia and MDS.
- 2. Educate the greater SCD community by providing cancer risk estimates in the general population of individuals with SCD treated with other types of therapies.
- 3. Enlist experts in cancer genetic risk communication (e.g., NCI) and SCD stakeholders to develop education about risks of cancer in SCD.

2. Funding for research to better understand and address cancer-related risks of gene therapy and stem cell transplant (bone marrow therapies) in sickle cell disease.

- 1. Understand whether sickle cell disease intrinsically involves an increased risk of cancer; and, if so, what causes the increased risk.
- 2. Identify people living with sickle cell disease who are at increased risk for the development of cancer as they undergo "bone marrow therapies."
- 3. Identify components of "bone marrow therapies" that increase risk of cancer.
- 4. Bring together scientific experts from the fields of SCD, cancer, stem cell transplant and gene therapy to answer these questions.

3. Funding for and creation of a way to collect information about cancer-related risks from all studies that involve "bone marrow therapies" for sickle cell disease globally.

SCDAA Medical and Research Advisory Committee Members

Miguel R. Abboud, MD

Professor of Pediatrics and Pediatric Hematology-Oncology Chairman Department of Pediatrics and Adolescent Medicine American University of Beirut, Lebanon

Biree Andemariam, MD

Vice Chair, Sickle Cell Disease Association of America Director, New England Sickle Cell Institute Associate Professor of Medicine University of Connecticut Health Farmington, Connecticut

Shawn Bediako, PhD

Professor Department of Psychology University of Maryland Baltimore County Baltimore, Maryland

Andrew Campbell, MD

Center for Cancer and Blood Disorders Children's National Health System Associate Professor of Pediatrics George Washington University School of Medicine and Health Sciences Washington, DC

Raffaella Colombatti, MD, PhD

Physician Azienda Ospedaliera-Università di Padova Department of Womens' and Child Health Clinic of Pediatric Hematology Oncology Via Giustiniani 3 35129 Padova Italy

Lori Crosby, PsyD

Co-Director, Innovations in Community Research, Division of Behavioral Medicine & Clinical Psychology
Co-Director, CCTST, Community Engagement Core Psychologist, Research, Behavioral Medicine & Clinical Psychologist
Cincinnati Children's
Professor, UC Department of Pediatrics
Cincinnati, Ohio

Deepika Darbari, MD

Center for Cancer and Blood Disorders Children's National Health System Professor of Pediatrics George Washington University School of Medicine and Health Sciences Washington, DC

Payal Desai, MD

Associate Professor Director of Sickle Cell Research The Ohio State University JamesCare at Ohio State East Hospital Columbus, Ohio

James Eckman, MD

Professor Emeritus, Hematology & Medical Oncology Emory University School of Medicine Department of Hematology and Medical Oncology Atlanta, Georgia

Mark Gladwin, MD

Professor and Chair Department of Medicine Founder, Pittsburgh Heart, Lung, and Blood Vascular Medicine Institute University of Pittsburgh Pittsburgh, Pennsylvania

Jo Howard, MB Bchir, MRCP, FRCPath

Head of Red Cell/Sickle Cell Service Guy's and St Thomas' NHS Foundation Trust London, United Kingdom

Lewis Hsu, MD, PhD

Co-Chair, Medical and Research Advisory Committee, Sickle Cell Disease Association of America Vice Chief Medical Officer, Sickle Cell Disease Association of America Director of Pediatric Sickle Cell Professor of Pediatric Hematology-Oncology University of Illinois at Chicago Chicago, Illinois

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Baba Inusa

Professor of Paediatric Haematology Lead Consultant Paediatric Sickle Cell and Thalassaemia Evelina London Children's Hospital Guy's and St Thomas' NHS Foundation Trust Women and Children's Academic Health Faculty of Life Sciences and Medicine King's College London, United Kingdom

Elizabeth Klings, MD

Associate Professor of Medicine Director, Center for Excellence in Sickle Cell Disease Director, Pulmonary Hypertension Center Boston University School of Medicine Boston, Massachusetts

Lakshmanan Krishnamurti, MD

Professor of Pediatrics Director of Bone Marrow Transplant Joseph Kuechenmeister Aflac Field Force Chair Aflac Cancer and Blood Disorders Center Children's Healthcare of Atlanta/Emory University Atlanta, Georgia

Sophie Lanzkron, MD

Director, Sickle Cell Center for Adults The Johns Hopkins Hospital Baltimore, Maryland

Julie Makani, FRCP, PhD

Associate Professor Department of Haematology and Blood Transfusion Muhimbili University of Health and Allied Sciences Dar es Salaam, Tanzania

Caterina P. Minniti, MD

Director, Sickle Cell Center Montefiore Health System Professor, Departments of Medicine and Pediatrics Albert Einstein College of Medicine Bronx, New York

Genice T. Nelson, DNP, APRN, ANP-BC

Program Director, New England Sickle Cell Institute & Connecticut Bleeding Disorders Programs, UConn Health, Farmington, Connecticut Board Member, Sickle Cell Disease Association of America

Isaac Odame, MB ChB, MRCP(UK), FRCPath, FRCPCH, FRCPC

Professor, Department of Paediatrics University of Toronto The Hospital for Sick Children Division of Haematology/ Oncology Toronto, Ontario

Kwaku Ohene-Frempong, MD

Director Emeritus, Comprehensive Sickle Cell Center Emeritus Professor of Pediatrics, University of Pennsylvania President, Sickle Cell Foundation of Ghana Emeritus Board Member, Sickle Cell Disease Association of America

Gwendolyn Poles, DO

Former Medical Director, Kline Health Center Faculty, Internal Medicine Program UPMC Pinnacle Harrisburg, Pennsylvania Board Member, Sickle Cell Disease Association of America

John D. Roberts, MD

Yale Adult Sickle Cell Program Smilow Cancer Hospital at Yale New Haven New Haven, Connecticut

Wally Smith, MD

Professor Scientific Director, VCU Center on Health Disparities Director, VCU Adult Sickle Cell Program Department of Internal Medicine Division of General Internal Medicine Virginia Commonwealth University Richmond, Virginia

Crawford J. Strunk MD

Director, Sickle Cell Disease and Hemoglobinopathy Clinic Pediatric Hematology/Oncology Program ProMedica Ebeid Children's Hospital Toledo, Ohio

Immacolata Tartaglione, MD PhD

Department of Woman, Child and General and Specialist Surgery Università degli Studi della Campania "Luigi Vanvitelli" Naples, Italy

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Marsha Treadwell, PhD

Director, Sickle Cell Care Coordination Initiative Regional Director, Pacific Sickle Cell Regional Collaborative Professor of Psychiatry and Pediatrics University of California San Francisco Benioff Children's Hospital Oakland Oakland, California

Winfred C. Wang, MD

Emeritus, St. Jude Faculty Member, Department of Hematology St. Jude Children's Research Hospital Memphis, Tennessee

Russell E. Ware, MD, PhD

Director, Division of Hematology Co-Director, Cancer and Blood Diseases Institute Director, Global Health Center Marjory J. Johnson Chair of Hematology Translational Research Cincinnati Children's Professor, UC Department of Pediatrics Cincinnati, Ohio

Julie Kanter Washko, MD

Associate Professor, Division of Hematology Oncology Director, Adult Sickle Cell Clinic University of Alabama at Birmingham Birmingham, Alabama

Kim Smith-Whitley, MD

Professor of Pediatrics Director, Comprehensive Sickle Cell Center Clinical Director, Division of Hematology The Children's Hospital of Philadelphia Philadelphia, Pennsylvania Board Member, Sickle Cell Disease Association of America

Wanda Whitten-Shurney, MD

CEO & Medical Director Sickle Cell Disease Association, Michigan Chapter Inc. Detroit, Michigan Board Member, Sickle Cell Disease Association of America

Ahmar U. Zaidi, MD

Assistant Professor of Pediatrics Comprehensive Sickle Cell Center, Children's Hospital of Michigan Director of Physician Network Development, University Pediatricians Wayne State University/Central Michigan University School of Medicine Detroit, Michigan