Conference details

Dates
1 – 3 October 2014

Venue
The Hilton Tower Bridge
5 More London Place
Tooley Street
London
SE1 2BY

Introduction
The annual conference is now in its 8th year and is well established as one of the leading events in the world, providing an ideal forum for dialogue and interaction between the leading world experts in Sickle Cell Disease (SCD) and the professionals at the frontline of care.

Who should attend?
This three day conference is aimed at all those with a common interest in sickle cell and thalassaemia, including specialist registrars, consultant haematologists, paediatricians and clinical nurse specialists.

Overall aims and objectives
This conference is intended to update those who are working with patients across the world with SCD, to consider the most efficient and safe way to manage these vulnerable patients.

The 2014 SCD conference will focus on:
- Latest developments in the diagnosis and treatment of SCD and thalassaemia
- Improving the quality of life for patients and families affected by SCD and thalassaemia
- Global Health Issues in Sickle Cell and Thalassaemia
- Therapeutic interventions: Hydroxyurea, Blood transfusion & Iron Overload, Bone Marrow transplantation and Gene Therapy

Format
The theme for this year’s conference is global health with seminars, debates and consensus sessions on key management issues, including poster sessions and abstracts.

Abstracts
The Abstract Sessions are a key part of the learning and networking opportunities of the Conference.

If you would like to submit an Abstract, please visit the website for further details:
www.guysandstthomasevents.co.uk

The closing date for Abstracts is 17th August 2014.
Conference Director

Dr Baba Inusa, Consultant Paediatrician (Haematology)

Dr Inusa is a senior lecturer with King’s College London and leads the paediatric sickle cell and thalassaemia team at Evelina London Children’s Hospital, Guy's and St Thomas’ NHS Foundation Trust, London.

Sickle Cell and Thalassaemia – Outline Programme

This programme will provide participants with an overview of the key issues in sickle cell disease and thalassaemia, including a look at the pathology of sickle cell disease and thalassaemia, diagnostic testing, the impact of environmental factors and genetic modifiers on disease severity, managing acute and chronic sickle cell crises, and dealing with major complications in patients including stroke, renal, liver and cardiac problems and the treatment options available.

Day One: Wednesday 1st October 2014

Conference Welcome
Pathophysiology of sickle cell disease
Laboratory diagnostics in haemoglobinopathies -Choosing appropriate methods.
Haemostatic abnormalities and clinical complications in sickle cell disease.
Discussion
Patient Public Involvement in service delivery: what needs to be addressed:
- Patient – User Perspective
- Sickle Society
- UK Thalassaemia Society

Blood Transfusion Therapy in Haemoglobinopathies

Alloimmunisation in sickle cell and thalassaemia: strategies for better prevention
Evaluation and treatment of transfusional iron overload in sickle cell and thalassaemia
Silent Cerebral Infarct in Sickle Cell Anaemia – Applying the lessons from SIT study
Discussion

Welcome reception
Day Two: Thursday 2nd October 2014

Special Symposia

Track I: Consensus on TCD / MRI - in sickle cell disease

- TCD imaging: should this become the gold standard for stroke screening SCD?
- Intracranial stenosis and silent cerebral infarcts in children with sickle cell anaemia and low risk of stroke
- Developing a diagnostic categorisation of MRI, MRA scans in SCD
- Stroke screening in adults with sickle cell disease

Discussion

Track II: Transition planning symposium

- Issues of adherence with therapies, addressing challenges in adolescence
- Preparing young people for transfer from paediatrics to adult services

Abstracts

Discussion

Track III: Emerging issues sickle cell disease

- Neuropsychological dysfunction and neuro-imaging abnormalities in neurologically intact adults with sickle cell anaemia
- Transfusion perioperatively in sickle cell disease

Track IV: Nursing Management

Thalassaemia

- Pathophysiology of Thalassaemia major
- Guidelines for the management of non-transfusion dependent thalassaemia
- Zinc supplementation improves bone density in patients with thalassemia: a double-blind, randomized, placebo-controlled trial
- Education and employment status of children and adults with thalassemia in North America

Discussion

Practice Session: An evidence-based approach to the SCD treatment in the community

- Paediatric and Adult perspectives
- Transition from paediatric to adult services - an educational model
- Bone fragility: Osteoporosis, and vitamin D deficiency in haemoglobinopathies

Discussion Forum

Special Interest Meetings
Day Three: Friday 3\textsuperscript{rd} October 2014

The Burden of Sickle Cell Disease - Predicting the future

Priorities for Sub-Saharan Africa: Kumasi Experience
Prospects for Comprehensive Sickle Cell Disease Care in Africa: The Situation in Nigeria

Abstracts plenary
Coinheritance of sickle cell anaemia and a-thalassemia delays disease onset and could improve survival in Cameroonian's patients (Sub-Saharan Africa)
Differences in the clinical and genotype presentation of sickle cell disease around the world

Athens University thalassemia expertise unit: evolution, structure, perspectives and patients' expectations

Discussion Forum

Hematopoietic stem cell transplantation in thalassemia major and sickle cell disease: indications and management recommendations from an international expert perspective
Preimplantation Genetic Diagnosis in Haemoglobinopathies
Gene therapy for haemoglobinopathies: limitations, expectations and possibilities

Discussion

Debate: Blood marrow transplant and Hydroxyurea therapy; what is the priority – cost effective and patient quality of life?

Hydroxyurea
Blood marrow transplantation
Discussion

Close
Conference Faculty

Baba Inusa, Evelina London Children’s Hospital
Deepa Manwani, Albert Einstein College of Medicine, New York
Yvonne Daniel, Guy’s and St Thomas’ Hospital, London
Joan Henthorn, National Screening UK
Kenneth Ataga, Chapel Hill, North Carolina
John James, Sickle Cell Society
Stella Chou, Children’s Hospital, Philadelphia
John Porter, UCLH, London
Soundrie Padayachee, Guy’s and St Thomas’ Hospital, London
Janet Kwiatkowski, Children’s Hospital, Philadelphia
Renzo Manara, Italy
Moji Awogbade, King’s College Hospital, London
Kofi Anie, Central Middlesex University Hospital, London
Luhanga Musumadi, Guy’s and St Thomas’ Hospital, London
Lynne Neumayr, Children’s Hospital Oakland’s Research Institute, San Francisco
Jo Howard, Guy’s and St Thomas’ Hospital, London
Lola Oni, Central Middlesex University Hospital, London
Neill Westerdale, Guy’s and St Thomas’ Hospital, London
Paul Telfer, The Royal London and St Bart’s NHS Trust, London
Antonis Kattamis, University of Athens, Greece
Marsha Treadwell, Children’s Hospital Oakland’s Research Institute, San Francisco
David Rees, King’s College Hospital, London and KCL
Mariane Montalembert, Hôpital Necker-Enfants Malades, Université Paris Descartes, France
Kathryn Hassell, University of Colorado, Denver
Jean Benoit Alet, Hôpital Necker-Enfants Malades, Université Paris Descartes, France
Fred Piel, Oxford University
Kwaku Ohene-Frempong, Children’s Hospital, Philadelphia
Adekunle Adekile, Kuwait University
Ambroise Wonkam, University of Cape Town, South Africa
Andrew Campbell, University of Michigan
Antonis Kattamis, University of Athens, Greece
Vanderson Rocha, Oxford University
Alison Lashwood, Guys and St Thomas’ Hospital, London
Marina Cavazzana-Calvo, Hôpital Necker-Enfants Malades, Université Paris Descartes, France
Winfred Wang, St Jude’s Children’s Hospital, Memphis Tennesse
Adetola Kassim, Vanderbilt, Nasville

www.guysandstthomasevents.co.uk
Conference fees

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We recommend attending all three days but delegates can elect to attend for one day if preferred.

To register

To secure your place on the 2014 Sickle Cell and Thalassaemia Advanced Conference, or for further information, please visit:

www.guysandstthomasevents.co.uk

If you have any enquiries about the course, please contact the events team on 020 7188 1622 or email events@gstt.nhs.uk.
Guy’s and St Thomas’ NHS Foundation Trust

Guy’s and St. Thomas’ NHS Foundation Trust is one of the largest Foundation Trusts’ in the UK. It consists of St. Thomas’ Hospital, Evelina London Children’s’ Hospital and Guy’s Hospital.

The Trust provides a full range of hospital services, as well as specialist services including cancer, cardiothoracic, women and children’s services, kidney care and orthopaedics. Guy’s is a major centre for cancer and renal services with the UK’s largest kidney donor programme, and is also a leading centre for genetics, stem cell and allergy research. St Thomas’ is a leading centre for the treatment of cardiovascular disease, stroke, HIV and dermatology. The Trust has one of the largest critical care units in the UK and one of the busiest A & E departments in London. It has an annual turnover of £1.2 billion and employs 13,200 staff.

The Trust handles around 2 million patient contacts a year including:

- 956,000 outpatients
- 83,000 inpatients
- 74,000 day case patients
- 176,000 accident and emergency attendances
- 790,000 in community services.
- And we deliver 6,800 babies

The Trust has 665 beds at St. Thomas’, 288 at Guy’s, 144 at the Evelina London Children’s Hospital and 64 in the community.

NHS statistics show that our patient survival rates are nearly 25 per cent better than the national average. This is one of the lowest standardised mortality rates in the NHS and provides an important indication of the quality of care provided by our clinical staff.

Evelina London Children’s Hospital

At Evelina London, we provide a comprehensive range of children’s healthcare services so that we are able to look after patients from antenatal diagnosis through childhood, into adolescence and on into adult life.

The Evelina coordinates complex care for children across the South Thames region, working in partnership with King’s College Hospital, the Royal Marsden Hospital and St George’s Hospital.

We are the second largest provider of children’s services in London. Children’s services provided in Evelina London and St Thomas’ Hospital treat around 55,000 children a year.

We have 130 inpatient and day case beds, 20 paediatric intensive care beds, 46 neonatal cots, six operating theatres and a kidney dialysis unit.
For booking and further information on future courses and events, please visit

www.guysandstthomasevents.co.uk