



RiseMPN 2026

Can we engineer disease trajectories in MPNs?

6–7 November 2026 | Courtyard by Marriott Rome Central Park

Congress Presidents: Alessandro Lucchesi · Gerardo Musuraca

IL CONGRESSO È RIVOLTO A 50 Specialisti:

Professione	Discipline	Elimina
MEDICO CHIRURGO	ANATOMIA PATOLOGICA; EMATOLOGIA; FARMACOLOGIA E TOSSICOLOGIA CLINICA; GENETICA MEDICA; MALATTIE INFETTIVE; MEDICINA INTERNA; MEDICINA TRASFUSIONALE; PATOLOGIA CLINICA (LABORATORIO DI ANALISI CHIMICO-CLINICHE E MICROBIOLOGIA);	

Rationale

Over the past decade, myeloproliferative neoplasms (MPNs) have moved from being viewed as indolent chronic disorders to paradigmatic models of clonal haematopoiesis, vascular injury and systemic inflammation. In RiseMPN 2025 we explored this evolving landscape by focusing on inflamed vessels and clonal survival: how “fire in the blood” and niche remodeling shape thrombosis, fibrosis and disease progression. That meeting asked *why* disease trajectories diverge. RiseMPN 2026 will ask a bolder question: **Can we engineer disease trajectories in MPNs?**

The therapeutic toolkit in MPNs is expanding rapidly. JAK inhibition has transformed symptom control and splenomegaly, but has only partially delivered on the promise of disease modification. At the same time, a new generation of agents is emerging: interferons and other immunomodulators; anti-inflammatory and anti-fibrotic approaches; hepcidin and activin-ligand–targeting drugs; epigenetic and transcriptional modulators; p53/MDM2 and BCL2 family inhibitors; rational antithrombotic and cardiometabolic strategies. The central challenge for the next decade is no longer merely *what works*, but **which combinations, in which patients, at which time-point, can genuinely rewrite the natural history of disease.**

RiseMPN 2026 is designed as a translational dialogue across three axes: **Mechanism → Combination → Trajectory**. First, we will map the pathway constellations that matter most for synergy – from JAK/STAT and inflammatory signalling to metabolic stress, niche reprogramming and immune escape. Second, we will critically appraise emerging combination strategies in MF, PV and ET, moving beyond single-agent narratives to consider how layering therapies can achieve fibrosis regression, molecular clearance, vascular protection and durable haematologic remissions. Third, we will confront the strategic questions that increasingly shape daily practice: early versus delayed intensification, add-on versus switch, integration with allogeneic transplant, and the role of real-world data and AI-driven models in guiding these choices.

Central to this discussion is the need to define **what we mean by “disease modification” in MPNs**. Across the programme we will revisit our endpoints: from spleen volume and symptom scores to dynamic



measures of allele burden, bone marrow architecture, clonal competition, cardiovascular risk and quality of life. We will examine how to design disease-modifying trials, how to read intermediate signals along a trajectory, and how to balance efficacy, safety, cost and feasibility in a field where many patients will never see a transplant but all deserve a rational long-term plan.

RiseMPN 2026 therefore aims to be more than an update meeting. It is an invitation to the MPN community to think and act as “trajectory engineers”: to integrate mechanism with clinical reality, combination design with strategic positioning, and innovative endpoints with meaningful benefit for patients. By bringing together basic scientists, translational researchers, trialists, transplant physicians, cardiologists and young investigators around a single guiding question – **“Can we engineer disease trajectories in MPNs?”** – we hope to co-create the conceptual and practical framework that will define the next era of MPN care.

SCIENTIFIC PROGRAMME

DAY 1 — Friday, 6 November 2026

08:50–08:55 Welcome

Alessandro Lucchesi & Gerardo Musuraca — Congress Presidents

08:55–09:15 **RISE LECTURE I** [20 min]

Distinguished Chair: Sara Galimberti

Tiziano Barbui — Risk as a trajectory: from static scores to dynamic disease engineering in MPNs

09:20–10:35 Session 1— Blueprint: the biological levers we can actually pull [75 min]

Chairs: Alessandro Lucchesi, Elena Masselli

1. **Hans Hasselbalch** — From clonal aging to early interception: CHIP clinics as a model for MPN prevention
2. **Francisca Ferrer-Marín** — Inflammasome activation and IL-1 in MPNs: inflammation as a targetable biological lever
3. **Nageswara Rao Tata** — Metabolic vulnerabilities of the JAK2-mutant clone: immune evasion and therapeutic windows
4. **Daniele Tibullo** — Metabolic reprogramming in the MPN niche: lactate, immune escape, and targetable vulnerabilities

Discussion: “Which lever first: clone, niche, vessel, or host?”

10:35–10:50 Coffee Break

10:50–12:05 Session 2 — MF: build the platform, then add the modifier [75 min]

Chairs: Francesco Passamonti, Giuseppe Palumbo

1. **Alessandro Lucchesi** — Dynamic risk in myelofibrosis: anaemia as trajectory sensor and the first readable signal of disease modification
2. **Francesca Palandri** — First-line MF: phenotype-guided JAK platform selection and the anaemia trade-off
3. **John Mascarenhas** — MF combination landscape: emerging combinations and where they fit the platform
4. **Florian Heidel** — MDM2/p53 and clone-stress strategies: from biology to combination rationale in MF

12:05–12:20 BRIDGE LECTURE I [15 min]

Standalone — connects the MF therapeutic platform (Session 2) to the strategic discussion.

Haifa Kathrin Al-Ali — Thrombotic recurrence in MPNs: the unmet need that proves disease modification is not yet complete

12:20–12:50 STRATEGIC DIALOGUE — Engineering the MF trajectory: a transatlantic perspective [30 min]

Moderator: Alessandro Maria Vannucchi

Francesco Passamonti — European perspective: sequencing in the real world, registry signals, and the pragmatic framework (10 min)

Tania Jain — US perspective: molecular risk architecture, transplant positioning, and the MDS/MPN boundary as a trajectory signal (10 min)

Moderated exchange: 10 min

12:50–14:05 Session 3 — The rational add-on toolbox: epigenetic, signalling, and erythroid targets [75 min]

Chairs: Barbara Mora, Jennifer O'Sullivan

1. **Andrea Patriarca** — BET/HDAC/LSD1 inhibitors in MF: what epigenetic modifiers really change
2. **Michael Loschi** — Non-JAK resistance nodes as combo targets: PI3K δ , PIM, and CDK8-19 inhibitors in the synergy playbook
3. **Domenico Girelli** — Iron metabolism as a biological lever: hepcidin, erythroferrone, and the logic of pathway interference
4. **Giuseppe Palumbo** — Activin ligand traps and TGF- β pathway modulators for MF anaemia: clinical evidence and positioning

Discussion: “Mechanism $\rightarrow$ positioning: how to avoid ‘combo tourism’.”

14:05–15:00 Lunch + Industry Lunch Symposium (Slot 1) [55 min] Sponsor tbd.

15:00–16:15 Session 4 — PV and ET: upstream trajectory change (before it becomes irreversible) [75 min]

Chairs: Claudio Cerchione, Srinivas Tantravahi

1. **Erika Morsia** — ET beyond cytoreduction: where epigenetic modifier strategies belong
2. **Elena Rossi** — Deceptive calm: acquired coagulopathy in ET, from occult bleeding risk to

unpredictable thrombotic phenotypes

3. Heinz Gisslinger — Masked polycythaemia vera and long-term interferon response: recognising the hidden trajectory and modifying it (20 min)

4. Marina Kremyanskaya — Iron-axis therapeutics in PV: hepcidin mimetics and TMPRSS6-silencing agents — clinical data and positioning

Discussion: “Can PV/ET be engineered like CML was?”

16:15–17:15 Session 5 — Vessel-first reality check: thrombosis, cardiovascular burden, and pragmatic prevention [60 min — 3 talks]

Chairs: Hans Hasselbalch, Guglielmo Mariani

1. Mariasanta Napolitano — Thrombotic emergencies in MPNs: acute management, atypical sites, and what changes practice

2. Giulio Giordano — Platelets, niche and advanced MF phenotypes: why thrombocytopenia is a biology signal

3. Olga Demska — Atrial fibrillation in MPNs: an underrecognised complication reshaping vascular management

Discussion: “What do we treat first when the ‘vessel’ is screaming?”

17:35–18:40 Session 6 — Preclinical Spotlight: why the next trials should work [65 min]

Distinguished Chairs: Sara Galimberti, Thomas Fischer

Invited Talk (15 min):

Elena Masselli — Transcriptomic rewiring of CD34⁺ cells in myelofibrosis: extracellular matrix dysregulation as a driver of marrow fibrosis

Tutor + Emerging Talent — Pair 1 (10 + 10 min):

Sara Galimberti — Contextualising splenic microenvironment research: from biology to transplant implications (*Distinguished Chair / Tutor*)

Edoardo Peroni — Spatially Resolved Transcriptomics Profiling Reveals Compartmentalised Inflammatory and Fibrogenic Circuits in the Myelofibrosis Spleen (*Best Abstract Winner #1, RiseMPN 2025*)

Tutor + Emerging Talent — Pair 2 (10 + 10 min):

Thomas Fischer — Contextualising oxidative stress and signalling in MPN neutrophils: the pathway landscape (*Distinguished Chair / Tutor*)

Enrico La Spina — Uncoupled NRF2 Activation and Persistent Unfolded Protein Response Characterise Neutrophils in Myelofibrosis (*Best Abstract Winner #2, RiseMPN 2025*)

Discussion (10 min):

Discussion: “From bench to trial: what these findings change for combination design.”

18:40–18:50 Closing Day 1

Key take-aways and “questions to answer tomorrow.”



DAY 2 — Saturday, 7 November 2026

08:45–08:50 Welcome Back

08:50–10:00 Session 7 — Patients that force the strategy to be real [70 min — 4 talks]

Chairs: Federica Frabetti, Marina Kremyanskaya

1. **Novella Pugliese** — Recurrent miscarriage in MPNs: decisions, trade-offs, trajectories
2. **Marta Sobas** — AYA-MPN: lifelong trajectory engineering starts here
3. **Giorgia Micucci** — Bleeding syndromes in MPN: the ‘other side’ of vascular medicine
4. **Giovanni Caocci** — Quality of life in polycythaemia vera: iron bioavailability, the phlebotomy burden, and the perception gap between physicians and patients

Discussion: “Personalised strategy is not a slogan: what changes Monday morning?”

10:05–10:25 RISE LECTURE II [20 min]

Distinguished Chair: Thomas Fischer

Giovanni Martinelli — How to starve a myeloid clone: metabolic constraints as therapeutic opportunity

10:25–10:40 Coffee Break

10:40–11:55 Session 8 — Precision diagnostics to steer combos (and prove modification) [75 min]

Chairs: Francesco Malaspina, Nicola Gentili

1. **Jennifer O’Sullivan** — Spatial / imaging-omics of MPN microenvironment: what we can measure now
2. **Ciro Rinaldi** — CALR and CD47 dynamics: immunologic targets and anti-CALR logic
3. **Paola Guglielmelli** — NGS architecture and response-adaptive monitoring: making trials ‘trajectory-aware’
4. **Andrea Duminuco** — Interpretable scores and composite vascular risk to guide strategy

Discussion: “If you can’t measure it, you can’t engineer it.”

11:55–12:10 BRIDGE LECTURE II [15 min]

Standalone — connects diagnostic precision (Session 8) to clinical decision-making (Session 9).

Fabio Gori — From diagnostic signal to treatment decision: AI-driven dynamic risk models as the engine of trajectory engineering

12:10–13:25 Session 9 — When the trajectory accelerates: transplant, blast phase, and the limits of modification [75 min]

Chairs: Gerardo Musuraca, John Mascarenhas



1. **Selene Guerzoni** — Bridge-to-transplant in MF: how modern therapy changes candidacy and timing
2. **Francesco Saraceni** — Allo-SCT in older MF: realistic pathways and decision thresholds
3. **Patrizia Chiusolo** — Predicting post-SCT outcomes: how ‘modification’ shows up after the cure attempt
4. **Jose Torregrosa** — Accelerated and blast phase MPN: recognising the turning point and rewriting the endgame

Expert Discussant: Tania Jain (Johns Hopkins) — structured commentary on transplant timing and molecular risk integration

Discussion: “When is ‘enough improvement’ enough to move?”

13:25–14:55 Session 10 — Beyond classical MPN: lessons from CML, mastocytosis, HES [90 min — 5 talks]

Chairs: Elisabetta Abruzzese, Gianantonio Rosti

1. **Mario Tiribelli** — CML: positioning third-generation TKIs and allosteric BCR-ABL1 inhibitors in 2026 practice
2. **Srinivas Tantravahi** — New clinical trials in CML: what they teach us about deep targets and MRD
3. **Carmen Fava** — CML monitoring in 2026: methodologies, treatment-free remission, and the challenge of atypical transcripts
4. **Daniela Cilloni** — Systemic mastocytosis: targeted therapies and real endpoints in advanced disease
5. **Massimo Breccia** — HES: targeted approaches and trajectory control in eosinophil-driven disease

Discussion: “What can MPN steal (ethically) from these playbooks?”

14:55–15:40 Lunch + Poster Walk + Best Poster Award + Industry Symposium 2 [45 min]

Posters displayed in the networking/lunch area.

Poster Walk co-led by Monica Poggiaspalla and Giovanni Martinelli on behalf of the Scientific Committee.

Industry Symposium 2 runs as a parallel option. Sponsor tbd.

Best Poster Award (~15:15) — Presented by the RiseMPN Scientific Committee. The award includes full hospitality for RiseMPN 2027.

15:40–15:50 Closing Remarks [10 min]

Moderators: Alessandro Lucchesi, Gerardo Musuraca

Key messages, acknowledgements, and preview of RiseMPN 2027.

The RiseMPN Trajectory Statement 2026 will be developed as a post-congress publication.

ACRONIMI

- **MPN** – Myeloproliferative Neoplasms
- **JAK** – Janus Kinase
- **JAK/STAT** – Janus Kinase/Signal Transducer and Activator of Transcription
- **MF** – Myelofibrosis
- **PV** – Polycythaemia Vera
- **ET** – Essential Thrombocythaemia
- **CHIP** – Clonal Hematopoiesis of Indeterminate Potential
- **IL-1** – Interleukin-1
- **MDM2** – Mouse Double Minute 2
- **BCL2** – B-cell Lymphoma 2
- **BET** – Bromodomain and Extra-Terminal proteins
- **HDAC** – Histone Deacetylase
- **LSD1** – Lysine-Specific Demethylase 1
- **PI3Kδ** – Phosphoinositide 3-Kinase delta
- **PIM** – Proviral Integration site for Moloney murine leukemia virus kinase
- **CDK8/19** – Cyclin-Dependent Kinases 8 e 19
- **TGF-β** – Transforming Growth Factor beta
- **TMPRSS6** – Transmembrane Serine Protease 6
- **CML** – Chronic Myeloid Leukemia
- **AYA** – Adolescent and Young Adult
- **CALR** – Calreticulin
- **CD47** – Cluster of Differentiation 47
- **NGS** – Next Generation Sequencing
- **AI** – Artificial Intelligence
- **Allo-SCT** – Allogeneic Stem Cell Transplantation
- **MRD** – Measurable (Minimal) Residual Disease
- **BCR::ABL1** – Breakpoint Cluster Region–Abelson 1 fusion gene



- **HES** – *Hypereosinophilic Syndrome*
- **NRF2** – *Nuclear Factor Erythroid 2–Related Factor 2*
- **MDS/MPN** – *Myelodysplastic/Myeloproliferative Neoplasms*

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