

Building Bridges in Coagulation

GTH 2024

68th Annual Meeting of
the Society of Thrombosis
and Haemostasis Research

WIEN

27 Feb – 1 Mar



TABLE OF CONTENT

Congress information .....	.4
Information from A to Z .....	.6
Information for speakers and presenters .....	.8
Floor plans .....	.10
Scientific programme	
Session types .....	.13
Programme Overview – Tuesday, 27 February 2024 .....	.14
Programme Overview – Wednesday, 28 February 2024 .....	.16
Programme Overview – Thursday, 29 February 2024 .....	.18
Programme Overview – Friday, 1 March 2024 .....	.20
Guided poster overview .....	.23
Poster List .....	.24
Exhibition and sponsoring .....	.32
Programme Overview – Tuesday, 27 February 2024 .....	.34
Programme Overview – Wednesday, 28 February 2024 .....	.36
Programme Overview – Thursday, 29 February 2024 .....	.38
Exhibitor index numerical sequence .....	.41
Exhibitor index alphabetical sequence .....	.42
Sponsor Index .....	.44
Exhibition floor plan .....	.48
Imprint .....	.50

WELCOME ADDRESS OF THE CONGRESS PRESIDENTS

DEAR COLLEAGUES,

It is our great pleasure to welcome you to GTH 2024- the 68th Annual Meeting of the Society of Thrombosis and Haemostasis Research (GTH e.V.)- in Vienna, Austria. The GTH 2024 meeting is taking place from the 27th February–1st March 2024 in the Hofburg Conference Center, located in the historical heart of the city.

“Building Bridges in Coagulation” is the motto of the GTH 2024 meeting, which in current days has implications going beyond science and medicine. The highly interdisciplinary field of thrombosis and haemostasis is experiencing many advances and developments in basic research that are translated to improve patient care. The GTH 2024 congress offers a unique opportunity for all scientists and health care professionals working in the field of coagulation to join and share their latest research, knowledge and practical experience, and to use this opportunity to interact and to extend their networks.

The congress program covers a broad range of topics (bleeding and thrombosis, basic science and clinical care, diagnosis and therapy, across age groups, across genders, between medical specialties, and many more) in various formats (plenary and state-of-the art lectures, pro/con and practical “How I do” sessions). Moreover, almost 200 abstracts submitted to the GTH 2024 will be presented as oral communications or during guided poster tours. Together with you we want to cross bridges in coagulation with the goal to develop more comprehensive and synergistic approaches to the scientific evaluation, diagnosis, prophylaxis and treatment of coagulation disorders and related diseases.

Another important bridge we want to strengthen is the collaboration with the neighboring countries of Austria in the East (Czech Republic, Hungary, Slovenia), with whom we have strong historical bonds. We have invited colleagues from these countries into our scientific committee and have organized special joint symposia. Thereby, we want to facilitate the exchange between these countries and the GTH countries, widening the scope of Central European collaboration.

We are very happy that you have come to Vienna to join the GTH 2024 congress and hope that you will enjoy the scientific and educational program as well as the networking opportunities to connect with your colleagues and peers.



Christoph Male
Congress President



Cihan Ay
Congress President



CONTACTS

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GTH Executive Board

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Prof. Dr. med. Manuela Albisetti Pedroni, Co-Chair (Zurich, Switzerland)
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Dr. med. Charis von Auer, Treasurer (Mainz, Germany)
Prof. Dr. med. Florian Langer, Secretary (Hamburg, Germany)

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Cihan Ay, Congress President
Johanna Gebhart, Scientific Congress Secretary
Katharina Thom, Scientific Congress Secretary
Tanja Altreiter, Congress Administrator
Medical University of Vienna, Vienna, Austria

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Werner Streif (Innsbruck, Austria)
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Zsuzsa Bagoly

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Manuela Albisetti (Zurich, Switzerland)
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Andreas Tiede (Hannover, Germany)
Barbara Zieger (Freiburg, Germany)

Local Scientific Committee

Ingrid Pabinger (Vienna, Austria)
Sabine Eichinger (Vienna, Austria)
Paul Kyrle (Vienna, Austria)
Paul Knöbl (Vienna, Austria)
Johannes Thaler (Vienna, Austria)
Julia Riedl (Vienna, Austria)
Oliver Königsbrügge (Vienna, Austria)
Clemens Feistritz (Innsbruck, Austria)
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Marianne Brodmann (Graz, Austria)
Thomas Gary (Graz, Austria)
Oliver Schlager (Vienna, Austria)
Eva Schaden (Vienna, Austria)
Herbert Schöch (Mattsee, Austria)
Benedikt Weber (Vienna, Austria)

Abstracts

All submitted abstracts will be published in the online supplement „Hämostaseologie“ from the Georg Thieme Verlag KG.

App

The GTH 2024 app is available for Android and IOS. All relevant congress information, such as the scientific programme, speakers as well as the exhibiting companies, are easily accessible via your mobile device. Additionally, you can create your own personal schedule by marking sessions in advance. The most submitted abstracts can be viewed by clicking on the respective titles. Enjoy browsing, discovering and planning with the app!



Download the congress app here:
eventclass.it/app/gth2024/

Alternatively you can scan this QR code to get to the site directly.

Please don't forget to **vote** for the most sustainable booth for the **GTH 2024 Sustainability Award**.

Certificate of attendance

You will receive a respective e-mail with the further instructions how to receive your certificate within four weeks after the congress.

Cloakroom

The cloakroom is located at the Hofburg Foyer (across the registration desk).

Tuesday, 27 February 2024	8:00–19:30
Wednesday, 28 February 2024	7:00–19:30
Thursday, 29 February 2024	7:00–19:00
Friday, 1 March 2024	7:30–13:45

CME accreditation

The congress has been accredited by the national authority "Österreichische Akademie der Ärzte" with a maximum of 21 credits for all national and German delegates. For all international participants GTH 2024 has been accredited by the EACCME® for a maximum of 17.0 European CME credits (ECMEC®s). **Please note that you do not have to scan any barcode on your participant badge** in order to receive any credits.

Grants and awards of the GTH

The following prizes will be awarded at the 68th Annual Meeting of the Society of Thrombosis and Haemostasis Research (GTH e.V.) in Vienna, Austria within the opening ceremony on February, 27, 17:00–18:15 at Zeremoniensaal:

Rudolf Marx Grant

for young scientists from German-speaking countries in areas of haemostaseology and vascular biology/medicine.

Alexander Schmidt Award

for excellent research in the field of haemostaseology and vascular biology.

Advancement Award for Young Researchers in the field of Thrombosis Research and Vascular Medicine

Advancement Award for Young Researchers in the field of Blood Coagulation

Help desk

The help desk is in the Hofburg Foyer at the registration area. In case you have issues or questions regarding your registration or general questions, please approach the desk.

Opening hours

Tuesday, 27 February 2024	8:00–18:30
Wednesday, 28 February 2024	7:30–18:30
Thursday, 29 February	7:30–16:00
Friday, 1 March 2024	7:30–12:30

Helpful phone numbers

Taxis: +43 1 60 160 or +43 1 40 100

Police: 133

Fire service/ambulance: 122

How to get there

Hofburg Vienna
Heldenplatz
1010 Vienna, Austria
T: +43 1 5873666

Air travel

Airport Vienna International Airport

Please take the City Airport Train (CAT) to "Wien-Mitte" train station. Change to the U3/U4 underground lines. Exit the train at Herrengasse. The Congress Center is located three minutes away from the underground station.

Transfer time:

Car/Taxi: 24 minutes, € 40-50

CAT – City Airport Train: 16 min

Public transport

Plan your individual travel via public transport by accessing the website of the Vienna Public Transport at www.wien.gv.at/english/transportation-urbanplanning/public-transport/. In addition, the app "Wien Mobil" provides fast, clear live updates free of charge. It can be downloaded with iOS and Android.

Vienna Central Train Station (Hauptbahnhof)

Please take the U1 underground line until you reach 'Stephansplatz'. The Congress Center is located seven minutes away from the station.

Transfer time:

Car/Taxi: 12 minutes, € 10-20

Public transport: 20 minutes

Parking facilities & fees

The "Hofburg Vienna" has no own parking space. But you can park in the 'Hanauschgasse' right in front of the Hofburg.

You can get further information on the website:

www.hofburg.com/informieren/anreise/lageplan_hofburg_vienna

Industry exhibition

Tuesday, 27 February 2024 9:00–19:30

Wednesday, 28 February 2024 8:00–18:30

Thursday, 29 February 2024 8:00–17:00

Language

The official congress language is English. Any translation of sessions is not provided.

Mobile phone use, photography, sound and video recordings

Mobile phones must be switched off whilst attending sessions. For copyright reasons, audio, photo and video recording with any device (e.g. cameras, laptops, PDAs, mobile phones, watches) is strictly prohibited during all oral and poster sessions, unless prior permission has been obtained from the congress organiser.

During the congress and the networking events, pictures will be taken by a professional photographer. If you do not want any photos to be taken of yourself on-site, please inform him directly. These pictures will be published within a password protected area on the congress website, accessible to attendees of the congress only. On request we remove photos from the gallery. Please contact MCI Deutschland GmbH.

Name badges

All delegates, exhibitors and guests will receive a name badge at the registration desk. The name badge is the official ticket and must be worn at all times to access meeting rooms and exhibition halls. In case you have lost your badge, please contact the help desk in the Hofburg Foyer.

Poster Awards

All prizes will be awarded during the closing ceremony, 1 March 2024, 12:15–13:15, in the Zeremoniensaal.

Best Poster prizes are each awarded with € 250 and a free registration for the GTH 2025.

Programme changes

The organiser reserves the right to make changes to the programme if necessary. No full or partial refunds are made to attendees in the event of cancellation or other changes to the programme. Please note that changes will be posted at the registration desk and as well as through the app.

Registration

On-site registration is available. In case of any questions or issues with your existing registration, please contact the Help Desk in the Hofburg Foyer.

Smoking

Smoking inside the congress venue is prohibited by law.

Schedule your congress online

Make the most of your time at this year's GTH Congress – use the online programme planner! Take the opportunity to select the sessions you want to attend and you will automatically see them in your personal planner. Create your personal appointments, export your schedule into your calendar or simply print it out. Start planning today.

Sustainability Award

At this year's congress you will once again be able to vote on the Sustainability Award for the most sustainable booth in the exhibition



The decision about the award will be made based solely on the vote of the attendee.

Please vote via the Congress App.

INFORMATION FOR SPEAKERS AND PRESENTERS

Speaker preview centre – Radetzky Apartment II

The speaker preview centre is located at the first floor in the Radetzky Apartment II. Speakers are kindly asked to bring **their presentation** to the speaker preview centre **at least 2 hours before the corresponding session starts**.

Speakers holding a presentation first thing in the morning are asked to hand in their slides the day before. The speaker preview centre is **crucial to ensure that the presentation is displayed properly**, especially if it contains videos and/or animations. Presentations can be handed in on a USB flash drive. All submitted presentations will be deleted directly after the congress.

Opening hours

Tuesday, 27 February 2024	8:00–18:00
Wednesday, 28 February 2024	7:00–18:30
Thursday, 29 February 2024	7:00–17:30
Friday, 1 March 2024	7:30–12:00

Technical requirements

The speaker preview centre and all meeting rooms will be equipped with Microsoft Windows based PCs. The presentation format is 16:9. A network-based presentation system is used to ensure that the sessions run smoothly. **It is not possible to connect your own notebooks** or upload data in the lecture rooms. Presentations containing videos or animations must be checked in advance. Technicians are available for necessary adjustments to fonts, pictures, etc. in the speaker preview centre on site.

Mac presentations (PowerPoint and Keynote) will be converted to Windows PowerPoint presentations. Please avoid using Mac fonts and animations. Embedded films or graphics must be placed in the same folder as the presentation. Kindly pay attention to fonts, images and animations, as well as audio and video clips to make sure they appear as intended.

Presentation via overhead projector or slide projector is not possible. The provided computers support all common PowerPoint® presentation formats for Windows. If fonts are used in the presentation that are not provided on standard installations of MS Windows, they should be saved as embedded fonts in the final version of the presentation. Movies integrated in PowerPoint should be saved as external files in the same folder as the PowerPoint file.

Accepted presentation file types

Microsoft Office: PowerPoint, Word, Excel (.ppt, .pptx, .doc, .docx, .xls, .xlsx)
Adobe Acrobat (.pdf)
Media Files (.wmv, .mpg, .avi, .swf, .wav, .mov, .mp3)

Oral presentations

Presenters are advised to finalize their presentations well in advance. You will find your exact presentation time in your personalized speaker information e-mail. Please make sure your presentation does not take longer. Chairpersons are advised to strictly follow the schedule and to interrupt if necessary.

Poster exhibition

The poster exhibition is located on the first floor in the room Wintergarten. Poster presenters are asked to put up their poster to the corresponding poster board until Tuesday, 27 February 2024, 3:00 p.m.

In case an author would like to keep the own poster, please collect it between 15:00–17:00 on Thursday, 29, but not earlier. After 17:00 the remaining posters will be taken down for disposal.

Guided poster sessions

There will be two guided poster sessions held in the poster areas on the first floor in the room Wintergarten

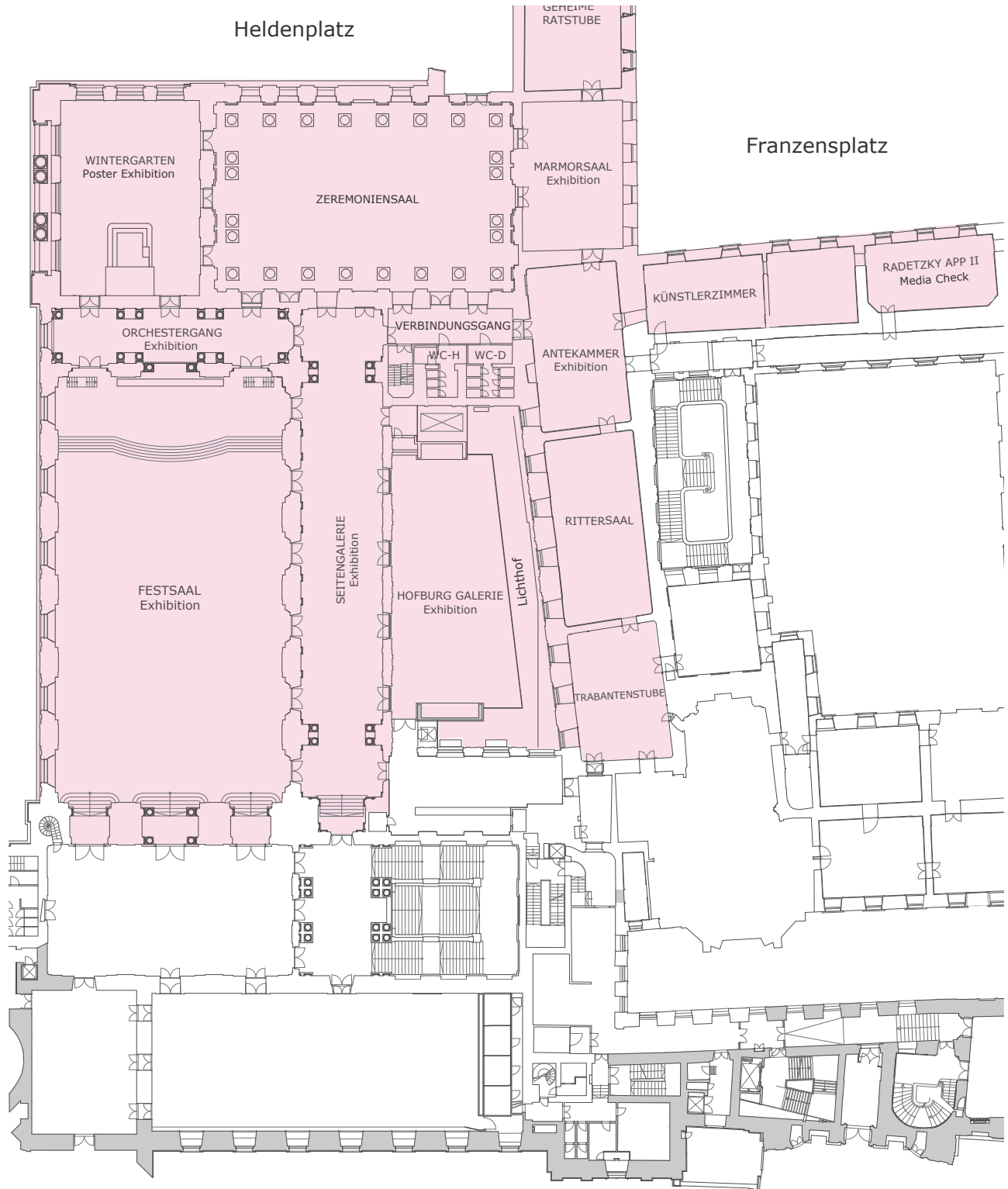
Wednesday, 28 February 2024	18:15–19:15
Thursday, 29 February 2024	14:00–15:00

During these sessions, poster presenters are available for discussion and questions. Poster presenters are kindly asked to arrive at the poster exhibition 10 minutes prior to the respective poster session. Please refer to the date of your presentation in the scientific programme.

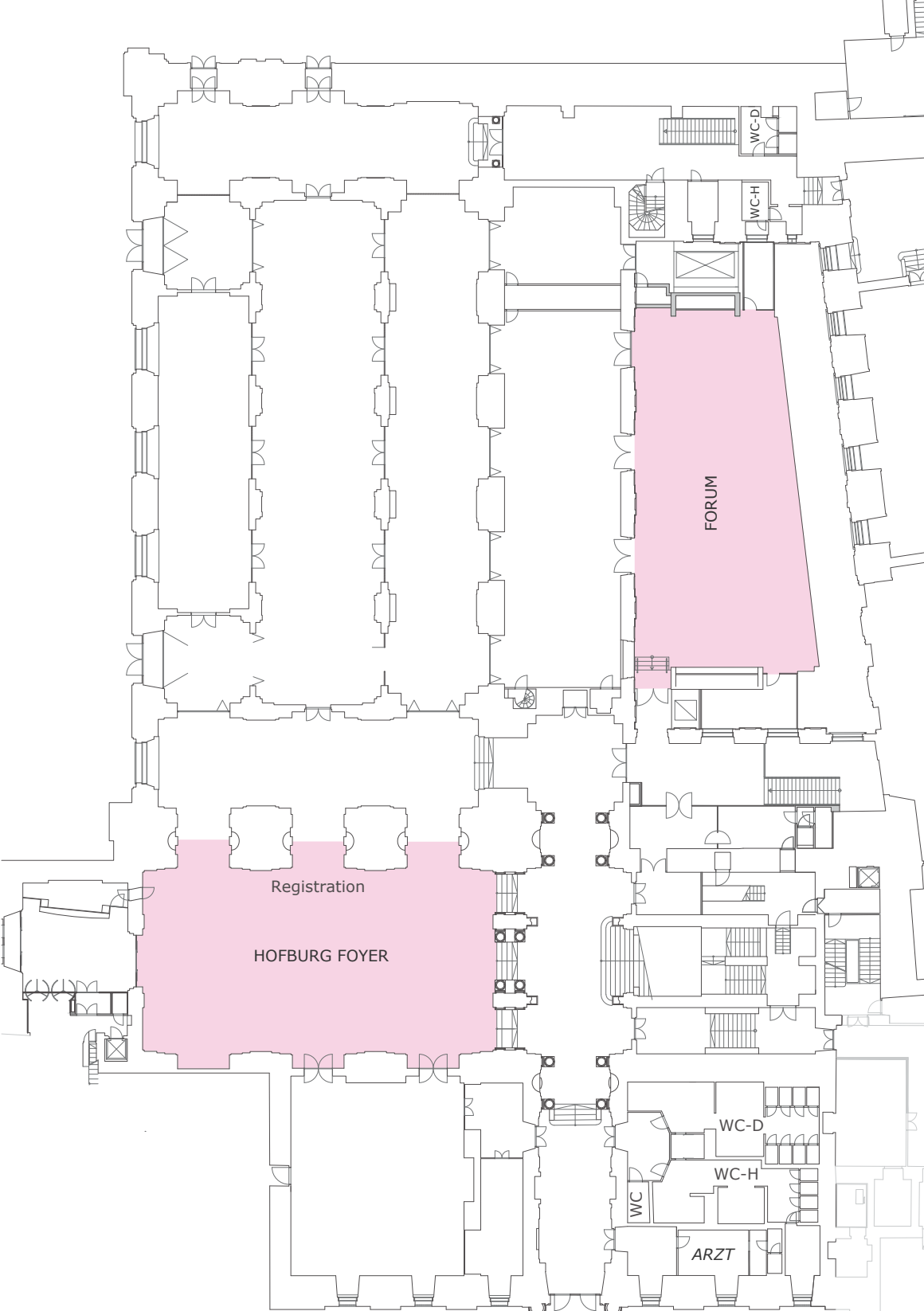
For more details on Poster Exhibition and Sessions, please see page 23.

FLOORPLAN

Congress Center Hofburg Vienna



FLOORPLAN





SCIENTIFIC PROGRAMME

Session Types & Overviews

SESSION FORMATS

Plenary Session

The plenary lectures by renowned invited speakers will provide updates on the main topics of the meeting and showcase some of the latest clinical and basic science.

Industry Symposium

There will be a set of interesting satellite and lunch symposia sponsored by our industrial partners. Thematically, they will outline some of the most innovative treatment options in haemostasis, thrombosis and vascular medicine.

Workshops

On the first day, we offer workshops for health care professionals.

Oral Communication

Submitted abstracts that were selected for oral presentation on the latest findings from basic and clinical research.

Joint Symposium

Lorem ipsum dolor sit amet, consetetur sadipscing elitr, sed diam nonumy eirmod tempor invidunt ut labore et dolore magna aliquyam erat, sed diam voluptua. At vero eos et accusam et justo duo dolores et ea

Poster Session

During these guided sessions, poster presenters are available for discussion and questions.

Miscellaneous

Meetings, opening ceremony, general assembly, study groups.

Pros & Cons

Experts in the field provide practical guidance and address unmet clinical needs to help bridge the gap between evidence-based medicine and everyday patient care.

State of the Art with Oral Communications

State-of-the-art lectures by renowned scientists are followed by select oral presentations on the latest findings from basic and clinical research.

Spotlight – Challenges across the Lifespan

Disorders of thrombosis and haemostasis affecting patients throughout their entire life are approached from different angles and discussed by an interdisciplinary expert panel.

Keynote Lecture

A case-based practical approach to challenging issues in the diagnosis and treatment of bleeding and thrombotic disorders.

How I treat (HIT)

Established scientists share their knowledge and personal experience on how to build a career in a rapidly changing research environment.

Session Types

	Plenary Session
	Industry Symposium
	Workshop
	Oral Communication
	Joint Symposium
	Poster Session
	Miscellaneous
	Pros & Cons
	State of the Art with Oral Communications
	Spotlight – Challenges across the Lifespan
	Keynote
	How I treat (HIT)

TUESDAY, 27 FEBRUARY 2024

	ZEREMONIENSAAL	GEHEIME RATSTUBE	RITTERSAAL	
8:00				
8:15				
8:30				
8:45				
9:00		09:00–12:30	09:00–10:00	
9:15		Haemochrom MTLA Workshop	KDHO Sitzung	
9:30				
9:45				
10:00				
10:15				
10:30				
10:45				
11:00			11:00–12:30	
11:15			Ständige Kommission Hämophilie	
11:30				
11:45				
12:00				
12:15				
12:30				
12:45				
13:00			13:00–13:45	
13:15			AG Gene Therapy	
13:30		13:30–15:45		
13:45		Wet Workshop		
14:00				
14:15	14:15–15:45			
14:30	IND SYM-01*			
14:45				
15:00				
15:15				
15:30				
15:45				
16:00	16:00–16:45			
16:15	Keynote			
16:30	Artificial intelligence in medical research and practice			
16:45				
17:00	17:00–18:15			
17:15	Opening Ceremony			
17:30				
17:45				
18:00				
18:15		Get Together 18:15–19:00		
18:30				
18:45				
19:00				

*Please find the details on Industry Symposia in Industry Programme from page 32.

FORUM	TRABANTENSTUBE	
		8:00
		8:15
		8:30
		8:45
	09:00–10:30	9:00
	Erworbene Hämophilie	9:15
		9:30
		9:45
		10:00
		10:15
		10:30
		10:45
11:00–12:00	11:00–12:30	11:00
Sitzung der Ständigen Kommission Labour (STAEKOLA)	Thrombikid Plus	11:15
		11:30
		11:45
		12:00
		12:15
	12:30–14:00	12:30
	Ständige Kommission Pädiatrie	12:45
13:00–14:00		13:00
AG Women health issues in thrombosis and hemostasis		13:15
		13:30
		13:45
		14:00
14:15–15:45	14:15–15:30	14:15
IND SYM-04*	IND SYM-03*	14:30
		14:45
		15:00
		15:15
		15:30
		15:45
		16:00
		16:15
		16:30
		16:45
		17:00
		17:15
		17:30
		17:45
		18:00
Get Together 18:15–19:00		18:15
		18:30
		18:45
		19:00

*Please find the details on Industry Symposia in Industry Programme from page 32.

WEDNESDAY, 28 FEBRUARY 2024

	ZEREMONIENSAAL	GEHEIME RATSTUBE	RITTERSAAL
8:00	08:00–09:00	08:00–09:00	08:00–09:00
8:15	SOA-01	SOA-02	Oral communications: bleeding
8:30	Advanced therapies for acute venous thrombo- embolism	Cancer and cardiovascular disease	
8:45			
9:00			
9:15	09:15–10:00		
9:30	Plenary 02		
9:45	Clonal hematopoiesis and cardiovascular risk		
10:00			
10:15			
10:30	10:30–12:00	10:30–12:00	10:30–12:00
10:45	SOA-03-Spotlight 100 Years Thrombotic Thrombocytopenic Purpura—a story of death and life	SOA-04 Bleeding in women	Joint Sym-01 Marko Gerbec Symposium – Joint Symposium with Slovenia: Atherosclerosis and Hemostasis
11:00			
11:15			
11:30			
11:45			
12:00			
12:15	12:15–13:45	12:15–13:45	12:15–13:45
12:30	IND SYM-05*	IND SYM-06*	IND SYM-07*
12:45			
13:00			
13:15			
13:30			
13:45			
14:00	14:00–15:00	14:00–15:00	
14:15	P/C-02 Pregnancy and thrombophilia: thrombosis prophylaxis	SOA-07 Antithrombotic management in extracorporeal devices: ECMO and LVAD	
14:30			
14:45			
15:00	Break and Expert Opinion Industry slots in the Exhibition 15:00–15:30		
15:15			
15:30	15:30–16:15		
15:45	Plenary-03		
16:00	Bleeding disorder of unknown cause		
16:15			
16:30	16:30–18:00	16:30–18:00	16:30–18:00
16:45	IND SYM-10*	IND SYM-11*	IND SYM-12*
17:00			
17:15			
17:30			
17:45			
18:00	Poster-Session I (Wintergarten) 18:15–19:15		
18:15			
18:30			
18:45			
19:00			

*Please find the details on Industry Symposia in Industry Programme from page 32.

FORUM	TRABANTENSTUBE	
08:00–09:00	08:00–09:30 (öffentlich)	8:00
P/C-01 Is immune tolerance induction therapy still necessary in the era of non-factor therapy?	BDDH-Sitzung	8:15
		8:30
		8:45
		9:00
		9:15
	09:30–10:15	9:30
	BDDH-Sitzung Mitgliederversammlung geschlossene Sitzung	9:45
		10:00
		10:15
10:30–12:00	10:30–12:00	10:30
SOA-06 Emerging therapies in hemophilia	SOA-05 Symposium of the GTH laboratory working group	10:45
		11:00
		11:15
		11:30
		11:45
		12:00
12:15–13:45	12:15–13:30	12:15
IND SYM -09*	IND SYM-08*	12:30
		12:45
		13:00
		13:15
		13:30
		13:45
14:00–15:00	14:00–15:00	14:00
SOA-09 Novelties in the management of primary immune thrombocytopenia	Networking Session of the Young GTH	14:15
		14:30
		14:45
Break and Expert Opinion Industry slots in the Exhibition 15:00–15:30		15:00
		15:15
		15:30
		15:45
		16:00
		16:15
16:30–17:45	16:30–18:00	16:30
IND SYM-13*	IND SYM-18*	16:45
		17:00
		17:15
		17:30
		17:45
		18:00
Poster-Session I (Wintergarten) 18:15–19:15		18:15
		18:30
		18:45
		19:00

*Please find the details on Industry Symposia in Industry Programme from page 32.

THURSDAY, 29 FEBRUARY 2024

	ZEREMONIENSAAL	GEHEIME RATSTUBE	RITTERSAAL
8:00	08:00–09:00	08:00–09:00	08:00–09:00
8:15	SOA-10 Next generation of anticoagulants	SOA-11 Symposium of the GTH working group on Women's health issues in thrombosis and hemostasis	HIT-01 How I manage rare hereditary coagulation disorders
8:30			
8:45			
9:00			
9:15	09:15–10:00		
9:30	Plenary-04 Epidemiology of venous thromboembolism: Implications for prevention and management		
9:45			
10:00			
10:15			
10:30	10:30–12:00	10:30–12:00	10:30–12:00
10:45	Joint Sym-02 Gregor–Mendel–Symposium–Joint Symposium with Czech Republic: Genetics in Thrombosis and Hemostasis	SOA-08 Treatment of atypical thrombosis	SOA-12 Laboratory diagnosis in hemostasis and platelet disorders
11:00			
11:15			
11:30			
11:45			
12:00			
12:15	12:15–13:45	12:15–13:45	12:15–13:30
12:30	IND SYM-14*	IND SYM-15*	IND SYM-16*
12:45			
13:00			
13:15			
13:30			
13:45			
14:00	Poster-Session II (Wintergarten) 14:00–15:00		
14:15	Break and Expert Opinion Industry slots in the Exhibition 15:00–15:30		
14:30			
14:45			
15:00			
15:15			
15:30		15:30–16:30	15:30–16:30
15:45		SOA-16 Venous disease beyond venous thromboembolism	HIT-02 How I manage thrombosis
16:00			
16:15			
16:30	16:30–18:30		
16:45	GTH Mitgliederversammlung		
17:00			
17:15			
17:30			
17:45			
18:00			
18:15			
18:30			
18:45	Networking Evening (Weltmuseum) 18:45-00:00		
19:00			

*Please find the details on Industry Symposia in Industry Programme from page 32.

SCIENTIFIC PROGRAMME

FORUM	TRABANTENSTUBE	
08:00–09:00		8:00
		8:15
P/C-03 Monitoring and individualization of treatment in hemophilia non-factor therapy		8:30
		8:45
		9:00
		9:15
		9:30
		9:45
	10:00–10:30	10:00
	GEPHARD Studiengruppe (nicht öffentlich)	10:15
10:30–12:00	10:30–12:00	10:30
		10:45
SOA-14 Coagulation out of balance: How to monitor and manage	SOA-13 Anticoagulation in children	11:00
		11:15
		11:30
		11:45
		12:00
	12:15–13:30	12:15
		12:30
	IND SYM-17*	12:45
		13:00
		13:15
		13:30
		13:45
Poster-Session II (Wintergarten) 14:00–15:00		14:00
		14:15
		14:30
		14:45
Break and Expert Opinion Industry slots in the Exhibition 15:00–15:30		15:00
		15:15
15:30–16:30	15:30–16:30	15:30
SOA-17 Antithrombotic therapy in cardiovascular diseases– which drug, which patient, how long?	SOA-15 International research networks and their impact on clinical practice	15:45
		16:00
		16:15
		16:30
		16:45
		17:00
		17:15
		17:30
		17:45
		18:00
		18:15
		18:30
Networking Evening (Weltmuseum) 18:45–00:00		18:45
		19:00

*Please find the details on Industry Symposia in Industry Programme from page 32.

FRIDAY, 1 MARCH 2024

	ZEREMONIENSAAL	GEHEIME RATSTUBE	RITTERSAAL
8:00	08:00–09:00	08:00–09:00	08:00–09:00
8:15	P/C-04	SOA-18	Oral communications:
8:30	Will the DOACs replace standard anticoagulants	Current musculo–skeletal aspects in patients	thrombosis
8:45	in children?	with bleeding disorders	
9:00			
9:15	09:15–10:00		
9:30	Plenary-05		
9:45	Acquired hemophilia: past, present and future		
10:00			
10:15			
10:30	10:30–12:00	10:30–12:00	10:30–12:00
10:45			
11:00	Joint Sym-03		SOA-20
11:15	Ignaz Semmelweis–Symposium – Joint Symposium with Hungary: Crosslink between infection, inflammation and coagulation	SOA-19	Symposium of the GTH working group on gene therapy
11:30		Cancer and hemostasis	
11:45			
12:00			
12:15	12:15–13:15		
12:30			
12:45	Closing Ceremony		
13:00			
13:15			

FORUM	TRABANTENSTUBE	
08:00–09:00	08:00–09:00	8:00
HIT-03 Management of at risk patients on antithrombotic treatment	Deutschsprachiges Symposium: Wie die In-Vitro-Diagnostika-Regulative (IVD-R) unser tägliches (Arbeits-) Leben bestimmt	8:15
		8:30
		8:45
		9:00
		9:15
		9:30
		9:45
		10:00
		10:15
10:30–11:30		10:30
SOA-21 No patient left behind—antithrombotic treatment in special populations		10:45
		11:00
		11:15
		11:30
		11:45
		12:00
		12:15
		12:30
		12:45
		13:00
		13:15

POSTER

Post Overviews & Poster List

POSTER OVERVIEW



LEGENDE

PW-01.01	Hemophilia: Factor and non-factor therapy
PW-02.01	Hemophilia: Gene therapy and molecular biology
PW-02.02	VWD and other bleeding disorders
PW-01.02	Hemophilia: Joint issues and other aspects
PW-01.03	Platelets: ITP, TTP and HIT
PW-02.03	Acquired bleeding
PW-01.04	Laboratory 1
PW-01.05	Atherosclerosis and inflammation
PW-02.05	Arterial and venous thrombosis
PW-01.06	Hemostasis and thrombosis in children and women
PW-02.04	Laboratory 2
PW-02.06	Platelets

POSTER-NO.	ABSTRACT TITLE
T-01-09	Multisite thrombosis in a patient with paroxysmal nocturnal hemoglobinuria <i>Lennart Beckmann, Hamburg; Germany</i>
T-01-10	Anxiety and quality of life in the acute and post-acute phase after venous thromboembolism <i>Daniel Steiner, Vienna; Austria</i>
T-01-11	Gut microbiota does not influence NETosis via Toll-like receptor 2 in a mesenteric ischemia-reperfusion injury mouse model <i>Zhenling Gao, Mainz; Germany</i>
T-01-12	Platelet glycoprotein IIb- and IIIa levels are altered in persistently lupus anticoagulant positive patients with a history of thrombosis <i>Theresa Schramm, Vienna; Austria</i>
T-02-03	Dietary supplements: Anti-coagulatory and anti-oxidative effects of powdered fruit, vegetable and berry juice powder concentrates. <i>Melina Tsiountsioura, Graz; Austria</i>
T-02-04	Insights into the molecular basis and mechanism of heme-triggered TLR4 signaling <i>Dhruv Rathod, Bonn; Germany</i>
T-02-05	Diet and gut microbiota orchestrate the hepatic endothelial transcriptome in atherosclerosis <i>Olga Dremova, Mainz; Germany</i>
T-03-07	HIT-IgGs induce a heparin-dependent pro-thrombotic phenotype in a novel endothelialized microfluidic disease model <i>Andreas Witzemann, Tuebingen; Germany</i>
T-03-08	Concurrent interference of thrombin and fibrin fiber generation by a novel nanobody <i>Siyu Sun, Maastricht; Netherlands</i>
T-03-09	Thromboembolic (TE) Events in Cold Agglutinin Disease (CAD): Post-hoc Analysis PRE- and ON-sutimlimab Treatment in the Phase 3 CARDINAL and CADENZA Studies <i>Alexander Röth, Essen; Germany</i>
T-03-10	Investigating platelet-leukocyte-aggregate formation under shear stress conditions in vitro and in vivo <i>Tobias Flieder, Bad Oeynhausen; Germany</i>
T-03-11	Prevalence of GPIIb/IIIa-enriched membrane protrusions (Tether) in hospitalized patients <i>Martina Wolff, Greifswald; Germany</i>
T-03-12	The polyphosphate/ factor XII pathway drives the thrombo-inflammatory fat embolism syndrome <i>Sandra Konrath, Hamburg; Germany</i>
T-04-03	The impact of extracorporeal life support and therapeutic anticoagulation on the platelet count in the acute phase of cardiogenic shock <i>Aydin Huseynov, Mannheim; Germany</i>
T-04-04	Structural analysis of VWF gain-of-function variants by atomic force microscopy <i>Jakob Derksen, Siegen; Germany</i>
T-05-02	Platelet function during platelet-rich plasma sequestration in complex cardiac surgery <i>Roman Hajek, Olomouc; Czech Republic</i>
T-05-03	Acquired δ-storage pool deficiency and increased GPV shedding impair thrombus formation and predict outcome in ECMO patients <i>Lukas Weiss, Würzburg; Germany</i>

T-06-07	Cellular Components in Whole Blood Contribute to the Development of Thromboembolic Events in Patients with Pancreatic Cancer <i>Ruth Willems, Maastricht; Netherlands</i>
T-06-08	Growth differentiation factor-15 is associated with bleeding risk in patients with cancer: results from a prospective cohort <i>Cornelia Englisch, Wien; Austria</i>
T-06-09	Endogenously produced factor XI (FXI) contributes to hepatic cancer cell-induced coagulation activation <i>Lennart Beckmann, Hamburg; Germany</i>
T-07-08	A simulation study to provide guidance for individuals transitioning from emicizumab to valoctocogene roxaparvovec <i>Wolfgang Miesbach, Frankfurt; Germany</i>
T-07-09	Bleeding Outcomes in Participants with Factor VIII Activity ≥ 5 IU/dL post-gene transfer in GENER8-1 <i>Simon Harris, Novato; USA</i>
T-07-10	New inSight Joint Health tool: Focusing on long-term joint health <i>Georg Goldmann, Bonn; Germany</i>
T-07-11	Molecular, structural, and functional insights into the interaction of coagulation factor VIII with hemorrhage-derived heme <i>Marie-T. Hopp, Koblenz; Germany</i>
T-07-12	Detection and domain characterization of anti-FVIII antibodies: Comparative evaluation of NBA and immunoassays <i>Behnaz Pezeshkpoor, Bonn; Germany</i>
T-07-13	Lonoctocog alfa vs. octocog alfa: incremental recovery and extended coagulation analysis <i>Jens Müller, Bonn; Germany</i>
T-07-14	An update on real-world use of rVIII SingleChain in patients with haemophilia A in Germany: Interim results from a prospective, non-interventional study <i>Martin Olivieri, Munich; Germany</i>
T-07-15	Staphylococcus aureus infection restimulates inhibitor production in tolerized hemophilia A mice <i>Amina Abdelmageed, Bonn; Germany</i>
T-07-16	Change in Hemophilia Joint Health Score (HJHS) During the Phase 3 XTEND-1 Study of Efanesoctocog Alfa in Patients With Severe Hemophilia A <i>Johannes Oldenburg, Bonn; Germany</i>
T-07-17	Development of a digital patient decision aid for bleeding prophylaxis in severe hemophilia A <i>Florian Langer, Hamburg; Germany</i>
T-07-18	Treatment of Bleeding Episodes With Efanesoctocog Alfa in Patients With Severe Haemophilia A in the Phase 3 XTEND-1 Study <i>Christoph Königs, Frankfurt; Germany</i>
T-07-19	Real-world use of rIX-FP in patients with haemophilia B: Interim results from a prospective, non-interventional study in Germany <i>Christian Pfrepper, Leipzig; Germany</i>
T-07-20	In-detail AFM analysis of the different conformational states of full-length coagulation Factor VIII and FVIII-vWF complex. <i>Samhitha Urs Ramaraje Urs, Bonn; Germany</i>
T-07-21	Evaluation of primary haemostasis in children and young adults with haemophilia <i>Ralf Knöfler, Dresden; Germany</i>
T-07-22	Interleukin-6 as a Plasma Marker of Bleeding in Patients with Hemophilia <i>Jan Pilch, Homburg/Saar; Germany</i>

T-07-23	Development of a low-titer inhibitor in a boy with congenital mild hemophilia A: clinical and immunological follow up of 1 year <i>Ivonne Wieland, Hannover; Germany</i>
T-07-24	A Pooled Analysis of Treatment with a Plasma-Derived von Willebrand Factor (VWF) Almost Devoid of Factor VIII in Paediatric Patients with Von Willebrand Disease (VWD) <i>Andrea Hüsing, Muenster; Germany</i>
T-07-25	Association of telomere length, a marker of biological aging, with hemophilia severity <i>Marina Trappl, Vienna; Austria</i>
T-07-26	The change in factor VIII therapy since the introduction of mandatory pharmacy reporting in the GSAV in Germany - a retrospective data analysis from smart medication ScanDoc over 3 years <i>Andreas Rösch, Frankfurt Am Main; Germany</i>
T-07-27	Platelet-dependent thrombin generation in hemophilia A patients may compensate low FVIII levels <i>Sophie Kieninger, Tuebingen; Germany</i>
T-07-28	Artrial fibrillation - a challenge in patients with hemophilia A <i>Karina Althaus, Tuebingen; Germany</i>
T-07-29	Downregulation of von Willebrand factor induces endothelial barrier dysfunction <i>Muhammad Arshad, Siegen; Germany</i>
T-07-30	Von Willebrand disease in Hungary - results of the national von Willebrand registry <i>Anna Selmeczi, Budapest; Hungary</i>
T-07-31	Physical activity, bone mineral density, and lean mass in patients with haemophilia <i>Pia Ransmann, Wuppertal; Germany</i>
T-07-32	Emicizumab Prophylaxis for the Treatment of Infants with Severe Haemophilia A without Factor VIII Inhibitors: Primary Analysis of the HAVEN 7 Study <i>Johannes Oldenburg, Bonn; Germany</i>
T-07-33	Unraveling the Molecular Pathogenesis and Mutation Spectrum of Quantitative VWD: Type 1, Low VWF, and Type 3 <i>Hamideh Yadegari, Bonn; Germany</i>
T-07-34	A Unique Clinical Case of Using Emicizumab as an Effective Therapeutic Approach for Refractory Acquired Hemophilia <i>Liana Hambardzumyan, Yerevan; Armenia</i>
T-07-35	Phenotype-genotype correlation in patients with non-severe haemophilia A and intronic variants of F8 <i>Dana Provaznikova, Prague; Czech Republic</i>
T-07-36	Assessing Adherence to Prophylactic Treatment in Patients with Haemophilia from Five European Countries <i>Peter Milanov, Frankfurt am Main; Germany</i>
T-07-37	The miRNAs present in LSECs play pivotal role in defining their cellular identity and have an impact on the regulation of F8 gene expression <i>Rawya Al Rifai, Bonn; Germany</i>
T-07-38	Vitamin D and Parathyroid Hormone in Hemophilia <i>Daniel Kraemmer, Vienna; Austria</i>
T-07-39	Evaluation of Quantitative Osteodensitometry in children and young adults with hemophilia - Results of the EQUOHÄM Study of the KHDO <i>Karim Kentouche, Jena; Germany</i>
T-07-40	Angiodysplasia and other Vascular Structural Changes in Von Willebrand Disease <i>Stefanie Lehner, Hannover; Germany</i>
T-07-41	Changes in hemophilia treatment in the eastern part of Germany between 2015 and 2021 – data from the Kompetenznetz Hämorrhagische Diathese Ost (KHDO) <i>Annika Siecke, Leipzig; Germany</i>

T-07-42	Enhancing Joint Health in Hemophilic Patients: A Retrospective Cohort Study on Early Detection and Intervention for Synovitis <i>Susan Halimeh, Duisburg; Germany</i>
T-07-43	Understanding the Psychosocial Impact on Hemophilia Carriers <i>Dirk Heinrichs, Duisburg; Germany</i>
T-07-44	Investigating the Role of GABARAP in FVIII Trafficking: A Comparative Study of Cellular Responses to Pathway Disturbances <i>Salime El Hazzouri, Bonn; Germany</i>
T-07-45	Blood viscoelastic testing could support the management of patients with hemophilia A <i>Stefanie Hammer, Tübingen; Germany</i>
T-07-46	HEM-POWR study: Fourth interim analysis evaluating real-world effectiveness and safety of damoctocog alfa pegol in previously treated patients with haemophilia A in Germany <i>Wolfgang Miesbach, Frankfurt am Main; Germany</i>
T-07-47	HIV Comorbid Infection and Etranacogene Dezaparvovec Therapy: Efficacy and Safety Results From Phase 2b and Pivotal Phase 3 HOPE-B Trials 3 Years after Administration <i>Sandra le Quellec, King of Prussia; USA</i>
T-07-48	German Paediatric Haemophilia Research Database - Update 2023 <i>The GEPHARD Study Group, Frankfurt am Main; Germany</i>
T-08-04	Novel non-synonymous coding MPL-gene variants in two unrelated infants with congenital amegakaryocytic thrombocytopenia <i>Doris Boeckelmann, Freiburg; Germany</i>
T-08-05	Heterozygous RUNX1-gene deletion in a patient with mild thrombocytopenia and a platelet granule secretion defect <i>Hannah Glonnegger, Freiburg; Germany</i>
T-08-06	Endemic Struma Nodosa in European Patients with Factor XI Deficiency <i>Susan Halimeh, Duisburg; Germany</i>
T-09-05	First patient with hereditary thrombomodulin-deficiency and transaldolase-deficiency <i>Michael Raum, Munich; Germany</i>
T-09-06	Complex malformation of the inferior vena cava vein can be caused by thrombosis in utero <i>Grit Brodt, Jena; Germany</i>
T-09-07	Cerebral sinus venous thrombosis in a teenage girl with heterozygous Protein C deficiency – Experience with rivaroxaban for secondary thromboprophylaxis <i>Judith Lohse, Dresden; Germany</i>
T-09-08	Joint Bleed as an uncommon bleeding event in a 7-years old Patient with Bernard-Soulier-Syndrom <i>Johannes Holzapfel, Augsburg; Germany</i>
T-09-09	A congenital disorder of fibrinogen consumption associated with neonatal bleeding and thrombosis <i>Christoph Male, Vienna; Austria</i>
T-10-03	Platelet function analyzer (PFA-100) in patients with bleeding disorder of unknown cause <i>Dino Mehic, Vienna; Austria</i>
T-11-04	Identification of an Unmet Medical Need – Height of Depression, Hypersomnia and Sleep Apnea Positively Correlate with the Level of Fatigue in Patients with Immune Thrombocytopenia <i>Rosa Alesci, Bad Homburg; Germany</i>
T-11-05	USP25 Regulates Platelet Function During Aging by Stabilizing Talin-1 <i>Xuemei Jia, Shanghai; China</i>

T-11-06	GPVI deficiency in a 17-year-old girl, congenital or acquired? <i>Pavla Bradáčová, Ústí nad Labem; Czech Republic</i>
T-11-07	Myeloablation and allogeneic hematopoietic stem cell transplantation causes a marked GPIIb/IIIa activation defect and procoagulant platelet phenotype <i>Kristina Mott, Würzburg; Germany</i>
T-11-08	Differential binding of recombinant factor VIII concentrates to platelets may impact platelet functionality <i>Fabrizio Pennacchio, Zurich; Switzerland</i>
T-11-09	Mitochondrial calcium uniporter as a Key Regulator in the Generation of Procoagulant COAT Platelets <i>Alessandro Aliotta, Lausanne; Switzerland</i>
T-11-10	High risk of thromboembolic events in adult with primary immune thrombocytopenia: results from a prospective cohort study <i>Jasmin Rast, Vienna; Austria</i>
T-11-11	The role of Inflammation in platelet activation (and in anti-neutrophil cytoplasmic antibody (ANCA) vasculitis) <i>Shaghayegh Rashvand, London; UK</i>
T-11-12	Platelets with antibacterial properties – a case for smaller platelets? <i>Silas Schwarz, Greifswald; Germany</i>
T-11-13	Evaluation of the MCMDM-1 VWD Bleeding Questionnaire score for the detection of coagulation abnormalities in an outpatient setting <i>Simon Metternich, Hamburg; Germany</i>
T-12-04	Characterization of Pre-existing Immunity to AAV5 <i>Brian Long, Novato; USA</i>
T-12-05	Efficacy and Safety of Fidanacogene Elaparvec in Adults with Moderately Severe or Severe Hemophilia B: Results from the Phase 3 BENEENE-2 Gene Therapy Trial <i>Robert Klamroth, Berlin; Germany</i>
T-12-06	smart medication Gene – a collaboration and documentation tool for the patient journey according to hub & spoke modell in gene therapy of hemophilia A/B <i>David Schmoldt, Frankfurt Am Main; Germany</i>
T-12-07	Adults With Haemophilia B and History of Chronic HCV/HBV Infection Receiving Etranacogene Dezaparvec Gene Therapy in the HOPE-B Clinical Trial Demonstrate Long-Term Bleeding Protection and Sustained FIX Activity 3 Years After Administration <i>Sandra le Quellec, King of Prussia (USA)</i>
T-13-03	Prevalence of Anti-PF4/Heparin Antibodies After Second COVID-19 Vaccination in Healthcare Workers <i>Günalp Uzun, Tuebingen; Germany</i>
T-13-04	Emicizumab for the treatment of acquired hemophilia A – consensus recommendations from the GTH-AHA working group <i>Christian Pfrepper, Leipzig; Germany</i>
T-13-05	Long term observation of therapy and outcome in acquired hemophilia A <i>Lisa Dreier, Frankfurt am Main; Germany</i>
T-13-06	Cerebral venous sinus thrombosis and thrombocytopenia after adenovirus infection due to heparin-independent anti-PF4 antibodies <i>Günalp Uzun, Tuebingen; Germany</i>
T-13-07	Thrombin generation parameters accurately predict liver cirrhosis decompensation <i>Maxime Zermatten, Lausanne; Switzerland</i>
T-13-08	Dynamic changes in Factor XIII activity as predictors of mortality in critically ill COVID-19 patients <i>Christopher Cibis, Frankfurt am Main; Germany</i>
T-13-09	Daratumumab as a Well-Tolerated Treatment Option for Acquired Hemophilia A in a Frail Elderly Patient <i>Lea Kausche, Linz; Austria</i>

T-13-10	Thromboprophylaxis in 474 pregnancies in women with a positive family history or symptomatic VTE: a prospective two center follow-up study <i>Rafael Beck, Kiel; Germany</i>
T-13-11	Long-term outcome in patients with acquired von-Willebrand-disease receiving ECMO or LVAD implants: a comparative cohort study <i>Tido Bajorat, Kiel; Germany</i>
T-13-12	Prevention of haemostatic complications Myeloproliferative Neoplasms: retrospective mutational and haemostatic profile study in Western Estonia <i>Ines Vaide, Tartu; Estonia</i>
T-14-02	The Factor VII activating protease stimulates fibrinolysis by increasing plasmin generation on the fibrin surface <i>Michael Etscheid, Langen; Germany</i>
T-14-03	A Novel Plasminogen Activator Anti-fibrin-uPA Increases the Sensitivity of the Plasmin Generation Assay to Therapeutic Target PAI-1 <i>Ilaria De Simone, Maastricht; Netherlands</i>
T-14-04	Dysregulations of fibrinolysis system can be detected in frozen plasma samples using thrombelastography <i>Leah Heuer, Tuebingen; Germany</i>
T-15-01	Fibrinolysis resistance in a patient with Streptococcus pyogenes associated septic shock and necrotizing fasciitis. <i>Klaus Hofmann, Jena; Germany</i>
T-15-02	Incidence and risk factors of portal vein thrombosis in patients who underwent hepatectomy <i>Chatree Chai-Adisaksopha, Chiang Mai; Thailand</i>
T-15-03	FXIII – slow recovery after liver transplant surgery? <i>Tina Tomić Mahečić, Zagreb; Croatia</i>
T-15-04	Accuracy of DOAC Dipstick urine test from patients treated peri-operatively with DOACs compared to UH-PLC-MS/MS <i>Julie Vassart, Namur; Belgium</i>
T-16-01	Successful management of refractory immune-mediated thrombotic thrombocytopenic purpura during pregnancy and delivery using the anti-VWF nanobody caplacizumab <i>Roman Schimmer, Zurich; Switzerland</i>
T-16-02	First diagnosed inherited TTP combined with inherited thrombophilia in a pregnant woman <i>Olha Kostenchak-Svystak, Uzhhorod; Ukraine</i>
T-16-03	Markers of Coagulation Activation in Pregnant Women from a Thrombosis & Hemostasis Clinic – a First Step Towards “Target Levels”? <i>Jan Beyer-Westendorf, Dresden; Germany</i>
T-16-04	Priming of maternal platelets during pregnancy – the role of pregnancy specific beta-1-glycoprotein 11 in platelet activation <i>Désirée Forstner, Graz; Austria</i>
T-16-05	Exploratory analysis of thrombophilic risk markers in histology-defined placental thromboembolism. <i>Elisabeth Hertrampf, Frankfurt am Main; Germany</i>
T-16-06	Maternal platelet activation at the maternal-fetal interface affects placental mitochondrial and endocrine activity <i>Nadja Kupper, Graz; Austria</i>
T-16-07	Comparison of two automated thrombin generation methods, ST Genesia® and Ceveron® alpha, during pregnancy with inherited thrombophilia. <i>Julia Luterán, Leipzig; Germany</i>

T-18-04	A new method to determine the cleavage of von Willebrand Factor by recombinant ADAMTS13 under physiological shear-stress conditions <i>Gerald Schrenk, Vienna; Austria</i>
T-18-05	Detection and quantification of heme and hemoglobin for diagnosis of intravascular hemolysis <i>Sonali Vaidya, Bonn; Germany</i>
T-18-06	Pilot study of ADAMTS13 activity and anti-ADAMTS13 antibodies stability <i>Anamarija Bogić, Zagreb; Croatia</i>
T-18-07	Assessment of Emicizumab and Factor VIII using Clot Waveform Analysis <i>Thomas Siegemund, Magdeburg; Germany</i>
T-18-08	A normal range study for the T-TAS(R) with three different chips <i>Hans-Jürgen Kolde, Seefeld; Germany</i>
T-18-09	False normalisation of Antithrombin in Type II-Heparin Binding Site defects in DOAC treated patients <i>Kieron Hickey, Sheffield; UK</i>
T-18-10	Expert consensus on an algorithm for rapid exclusion of clinically relevant plasma levels of direct oral anticoagulants in patients using the DOAC Dipstick <i>Job Harenberg, Heidelberg; Germany</i>
T-18-11	Platelet phenotyping by immunofluorescence microscopy on the blood smears in patients with myeloproliferative neoplasms <i>Carlo Zaninetti, Greifswald; Germany</i>
T-18-12	T-TAS HD-Chip in patients with myeloid neoplasia and thrombocytopenia <i>Katharina Freitag, Leipzig; Germany</i>
T-18-13	Evaluation of digital measuring device with an ADAMTS13 Activity Screening Test <i>Margaret Griffiths, Vienna; Austria</i>
T-18-14	LA detection with new taipan snake venom time and ecarin time reagents insensitive to warfarin, heparin and direct FXa inhibitors. <i>Martin Unterberger, Vienna; Austria</i>
T-18-15	Follow-on products of pentosan polysulfate differ chemically from the original one and activate the contact system similar to the heparin falsification OSCS <i>Susanne Alban, Kiel; Germany</i>
T-18-16	Thrombin generation measured with ST Genesis in patients undergoing thrombophilia testing <i>Alina Okhrem, Leipzig; Germany</i>
T-18-17	Flow cytometry-based method to detect aggregates of non-muscle myosin IIA in erythrocytes <i>Martina Wolff, Greifswald; Germany</i>
T-18-18	A method for real-time thrombin generation measurement in rat and porcine plasma <i>Sandra Konrath, Hamburg; Germany</i>
T-18-19	Thrombin generation with ST Genesis in patients with bleeding tendency <i>Jonathan Konkolewski, Leipzig; Germany</i>
T-19-01	Erythropoietin and thrombopoietin release kinetics in clinical settings <i>Folker Wenzel, Villingen-Schwenningen; Germany</i>
T-19-02	Apoptosis Inhibition in Cold-stored Platelet Concentrates Preserves Thrombus Formation <i>Johanna Kirschall, Tuebingen; Germany</i>
T-19-03	Cold stored platelets – investigations of thrombus formation in a microfluidic system <i>Nina Wolska, Tuebingen; Germany</i>

T-19-04 **Andexanet alfa versus 4-factor prothrombin complex concentrate for factor Xa inhibitor reversal in patients with intracranial hemorrhage; a systematic review and meta-analysis**
Chatree Chai-Adisaksopha, Chiang Mai; Thailand

T-20-02 **The role of DUOX2 and intestinal epithelial TLR2 in villus vascularization**
Nadja Paeslack, Mainz; Germany

T-21-03 **Relevance of the vWF C4 domain for gain-of-function variants**
Angelika Mojzisch, Hamburg; Germany

T-21-04 **Changes in the Proteome of Platelets from Patients with Critical Progression of COVID-19**
Mathias Zimmermann, Bad Oeynhausen; Germany

T-21-05 **PAR4 activation promotes osteoclast formation and resorptive function**
Tanja Strini, Graz; Austria

T-21-06 **In vitro generated megakaryocytes for the detection of human platelet antigen-specific alloantibodies**
Günalp Uzun, Tuebingen; Germany

T-21-07 **Insights into the differential role of GABARAPs proteins at the proteomic level**
Mira Ibrahim, Bonn; Germany



INDUSTRY

Sponsor Index, Overview and Floorplan

BEHANDLUNG VON BLUTUNGSEPIDODEN UND PRÄVENTION VON BLUTUNGEN WÄHREND CHIRURGISCHER EINGRIFFE BEI PATIENTEN MIT HÄMOPHILIE A ODER B (ERWACHSENE UND JUGENDLICHE AB 12 JAHREN) MIT HEMMKÖRPERN³



GTH – Wir freuen uns auf Sie!
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an unserem Stand Nr. 6
am 28. und 29.02.2024

Stop the bleed Not the patient

- ✓ **Schnelle Blutungskontrolle** mit nur einer initialen Dosis von 225 µg/kg bei > 80 % der in der Zulassungsstudie PERSEPT 1 mit dem entsprechenden Dosisregime behandelten Blutungsepisoden¹
- ✓ **24h nachhaltige und wirksame Blutungskontrolle^{1,2,*}**

CEVENFACTA® (Eptacog beta) ist zugelassen zur Behandlung von **Erwachsenen und Jugendlichen** (ab 12 Jahren) mit Hämophilie A oder B mit Inhibitoren sowohl für die akute **Behandlung von Blutungsepisoden als auch zur Prävention von Blutungen, die im Rahmen von Operationen oder invasiven Eingriffen auftreten**. Dies gilt für Patienten mit angeborener Hämophilie:

- mit **hochtitrigen Inhibitoren** gegen die Faktoren VIII oder IX (≥ 5 Bethesda-Einheiten, BE);
- und für Patienten mit **niedrigtitrigen Inhibitoren** (< 5 BE), bei denen mit einem **hohen anamnestischen Inhibitor-Anstieg** oder mit einer refraktären Reaktion auf hohe Dosen von FVIII oder FIX zu rechnen ist.

1. Wang M., Lawrence J. B., Quon D. V. et al. PERSEPT 1: a phase 3 trial of activated eptacog beta for on-demand treatment of haemophilia inhibitor-related bleeding. Haemophilia. 2017;23:832–43 - 2. Fachinformation CEVENFACTA®, Stand Juli 2022 - 3. Das zugelassene Anwendungsgebiet von CEVENFACTA® lautet wie folgt: Patienten mit angeborener Hämophilie mit hoch-titrigen Inhibitoren gegen die Gerinnungsfaktoren VIII oder IX (≥ 5 Bethesda-Einheiten [BE]) und Patienten mit angeborener Hämophilie mit niedrig-titrigen Inhibitoren (BE < 5), bei denen mit einem hohen anamnestischen Inhibitor-Anstieg oder mit einer refraktären Reaktion auf hohe Dosen von FVIII oder FIX zu rechnen ist.

* In der Zulassungsstudie PERSEPT 1 wurde die Mehrzahl der Blutungsepisoden nach 24 Stunden mit „gut“ oder „hervorragend“ bewertet: Zu 96,7% [93,3%, 100%] bei der Dosierung 75 µg/kg bzw. 99,5% [98,6%, 100%] bei einem initialen Dosierungsregime von 225 µg/kg.

FACHKURZINFORMATION

CEVENFACTA® 1 mg (45 KIE) / 2 mg (90 KIE) / 5 mg (225 KIE), Pulver und Lösungsmittel zur Herstellung einer Injektionslösung. **Wirkstoff:** Eptacog beta (aktiviert). **Qualitative und quantitative Zusammensetzung:** Eine Durchstechflasche enthält nominell 1 mg (45 KIE/Durchstechflasche) / 2 mg (90 KIE/Durchstechflasche) / 5 mg (225 KIE/Durchstechflasche) Eptacog beta (aktiviert), entsprechend einer Konzentration von etwa 1 mg/ml (45 KIE/ml) nach Rekonstitution mit 1,1 ml / 2,2 ml / 5,2 ml Wasser für Injektionszwecke. **Sonstige Bestandteile:** Argininhydrochlorid, Isoleucin, Trinatriumcitrat-Dihydrat, Glycin, Lysinhydrochlorid, Polysorbat 80, Salzsäure (zur Einstellung des pH-Wertes). Lösungsmittel: Wasser für Injektionszwecke **Anwendungsgebiete:** CEVENFACTA wird bei Erwachsenen und Jugendlichen (ab 12 Jahren) angewendet zur Behandlung von Blutungsepisoden und zur Prävention von Blutungen bei Operationen oder invasiven Eingriffen in folgenden Patientengruppen: - Patienten mit angeborener Hämophilie mit hoch-titrigen Inhibitoren gegen die Gerinnungsfaktoren VIII oder IX (≥ 5 Bethesda-Einheiten [BE]); - Patienten mit angeborener Hämophilie mit niedrig-titrigen Inhibitoren (BE < 5), bei denen mit einem hohen anamnestischen Inhibitor-Anstieg oder mit einer refraktären Reaktion auf hohe Dosen von FVIII oder FIX zu rechnen ist. **Pharmakotherapeutische Gruppe:** Blutgerinnungsfaktoren; ATC-Code: B02BD08. **Gegenanzeigen:** Überempfindlichkeit gegen den Wirkstoff oder einen der oben genannten sonstigen Bestandteile. Überempfindlichkeit gegen Kaninchen oder Kaninchenproteine. **Nebenwirkungen:** **Häufig:** Schwindelgefühl, Kopfschmerz, Beschwerden an der Injektionsstelle, Hämatom an der Injektionsstelle, erhöhte Körpertemperatur, Hämatom nach einem Eingriff, Injektionsbezogene Reaktion. **Warnhinweise:** Arzneimittel hergestellt aus Kaninchenmilch. Arzneimittel für Kinder unzugänglich aufbewahren. **Verkaufsabgrenzung/Rezept-/Apothekenpflicht:** Verschreibungspflichtig/Rezept- und apothekenpflichtig, wiederholte Abgabe verboten. **Inhaber der Zulassung:** Laboratoire Français du Fractionnement et des Biotechnologies, Tour W, 102 Terrasse Boieldieu, 19^{ème} Étage, 92800 Puteaux, Frankreich. Weitere Angaben zu Dosierung, Art und Dauer der Anwendung, Besondere Warnhinweise und Vorsichtsmaßnahmen für die Anwendung, Wechselwirkungen mit anderen Arzneimitteln und sonstige Wechselwirkungen, Schwangerschaft und Stillzeit sowie Nebenwirkungen entnehmen Sie bitte der veröffentlichten Fachinformation.

Stand der Information: 07/2022.



TUESDAY, 27 FEBRUARY 2024

	ZEREMONIENSAAL	GEHEIME RATSTUBE	RITTERSAAL
8:00			
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14:15	14:15–15:45		
14:30	IND SYM-01 CSL Behring Wiener Blut – Praxisfälle aus der Hämostaseologie		
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15:45			
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18:00			
18:15	Get Together (in the Industrial Exhibition) 18:15–19:00		
18:30			
18:45			
19:00			

FORUM	TRABANTENSTUBE	
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14:15–15:45	14:15–15:30	14:15
IND SYM-04 BMS Pfizer Thromboserisiko richtig einschätzen – durch gezielte Diagnose früh behandeln	IND SYM-03 VIATRIS Austria GmbH Herausforderungen im Thrombose Management – Behandlungsoptionen für OVT und HIT	14:30
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Get Together (in the Industrial Exhibition) 18:15–19:00		18:15
		18:30
		18:45
		19:00

WEDNESDAY, 28 FEBRUARY 2024

	ZEREMONIENSAAL	GEHEIME RATSTUBE	RITTERSAAL
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11:45			
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12:15	12:15–13:45	12:15–13:45	12:15–13:45
12:30	IND SYM-05 Roche Hämophilie A im Fokus: Eine interaktive Session zu aktuellen Fragestellungen	IND SYM-06 Novo Nordisk Rebalancing: Neue Prophylaxe für Patienten mit Hämophilie und Hemmkörper	IND SYM-07 CSL Behring The Future is now - Gentherapie in der Hämophilie B
12:45			
13:00			
13:15			
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14:45			
15:00	Break and Expert Opinion Industry Slots from Florio, LFB, and Sysmex in the Exhibition		
15:15	15:00–15:30		
15:30			
15:45			
16:00			
16:15	16:30–18:00	16:30–18:00	16:30–18:00
16:30	IND SYM-10 BioMarin The curious mind: 4 stories that matter	IND SYM-11 Sobi Barrieren in der cITP überbrücken: Avatrombopag – Stark und Patientenfreundlich	IND SYM-12 Novo Nordisk Es gibt kein one-fits-all in der Hämophilie (Und das ist auch gut so!)
16:45			
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FORUM	TRABANTENSTUBE	
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12:15–13:45	12:15–13:30	12:15
IND SYM -09 Takeda Das Potential der rekombinanten Therapie freisetzen – Neue Therapieansätze bei VWS und cTTP	IND SYM-08 Kedrion Biopharma Substitutionstherapie (Coagadex®) bei Patienten mit hereditärem Faktor-X-Mangel	12:30
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Break and Expert Opinion Industry Slots from Florio, LFB, and Sysmex in the Exhibition 15:00–15:30		15:00
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16:30–17:45	16:30–17:30	16:30
IND SYM-13 Octopharma Into the Spotlight: milde/moderate Hämophilie, erworbene Hämophilie A und erworbene Von-Willebrand-Erkrankung	IND SYM-18 AstraZeneca Eine interdisziplinäre Diskussion zur Behandlung von lebensbedrohlichen Blutungen bei DOAK-Patienten:Innen	16:45
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		19:00

THURSDAY, 29 FEBRUARY 2024

	ZEREMONIENSAAL	GEHEIME RATSTUBE	RITTERSAAL
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12:15	12:15–13:45	12:15–13:45	12:15–13:30
12:30	IND SYM-14 Sobi Mit Sobi hoch hinaus!	IND SYM-15 Pfizer Unlocking the Future: Transformative Ansätze in der Hämophilie-Therapie	IND SYM-16 Novartis Die klassische Hämatologie im Wandel - was können wir erwarten?
12:45			
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15:00	Break and Expert Opinion Industry Slots from Sobi, Roche, and LFB in the Exhibition		
15:15	15:00–15:30		
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FORUM	TRABANTENSTUBE	
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	12:15–13:30	12:15
	IND SYM-17 Leo Pharma 9 Empfehlungen zur Antikoagulation bei Niereninsuffizienz, Krebs und Polypharmazie	12:30
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Break and Expert Opinion Industry Slots from Sobi, Roche, and LFB in the Exhibition 15:00–15:30		15:00
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EXHIBITOR · NUMERICAL

Booth number	Exhibitor
3	Grifols Deutschland GmbH
4	Florio GmbH
5	Sobi
6	LFB GmbH
7.1	Bristol-Myers Squibb & Pfizer (Inter-national Medicine)
7.2	Sysmex Austria GmbH
8	Pfizer Pharma GmbH
9	Octapharma GmbH
11	Viartis Austria GmbH
12	DiaSys Deutschland Vertriebs-GmbH
15	Roche Pharma AG
16	Technoclone GmbH
17	CSL Behring GmbH
18	AstraZeneca Österreich GmbH
21	Axon Lab AG
22	Bayer Vital GmbH
23	BioMarin Deutschland GmbH
24	LEO Pharma GmbH











Booth number	Exhibitor
25	Stago
27	Mitsubishi Tanabe Pharma GmbH
28	Sanofi-Aventis GmbH
29	ECAT Foundation
30	CoaChrom Diagnostica
31	Kedrion Biopharma GmbH
32	Haemochrom Diagnostica
33	Loxo GmbH
34	Takeda Pharma Vertrieb GmbH & Co. KG
35	Iatro/ Hemmo App
40	Novo Nordisk Pharma GmbH
41	Werfen GmbH
44	Intersero GmbH
45	Pentapharm AG
46	Siemens Healthineers
47	Biotest AG
51	Diagon GmbH







EXHIBITOR · ALPHABETICAL











Exhibitor	Booth number
AstraZeneca Österreich GmbH	18
Axon Lab AG	21
Bayer Vital GmbH	22
BioMarin Deutschland GmbH	23
Biotest AG	47
Bristol-Myers Squibb & Pfizer (International Medicine)	7.1
CoaChrom Diagnostica	30
CSL Behring GmbH	17
Diagon GmbH	51
DiaSys Deutschland Vertriebs-GmbH	12
ECAT Foundation	29
Florio GmbH	4
Grifols Deutschland GmbH	3
Haemochrom Diagnostica	32
Iatro/Hemmo App	35
Intersero GmbH	44
Kedrion Biopharma GmbH	31
LEO Pharma GmbH	24



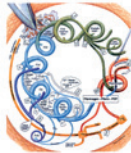





Exhibitor	Booth number
LFB GmbH	6
Loxo GmbH	33
Mitsubishi Tanabe Pharma GmbH	27
Novo Nordisk Pharma GmbH	40
Octapharma GmbH	9
Pentapharm AG	45
Pfizer Pharma GmbH	8
Roche Pharma AG	15
Sanofi-Aventis GmbH	28
Siemens Healthineers	46
Sobi	5
Stago	25
Sysmex Austria GmbH	7.2
Takeda Pharma Vertrieb GmbH & Co. KG	34
Technoclone GmbH	16
Werfen GmbH	41
Viatris Austria GmbH	11

SPONSOR INDEX

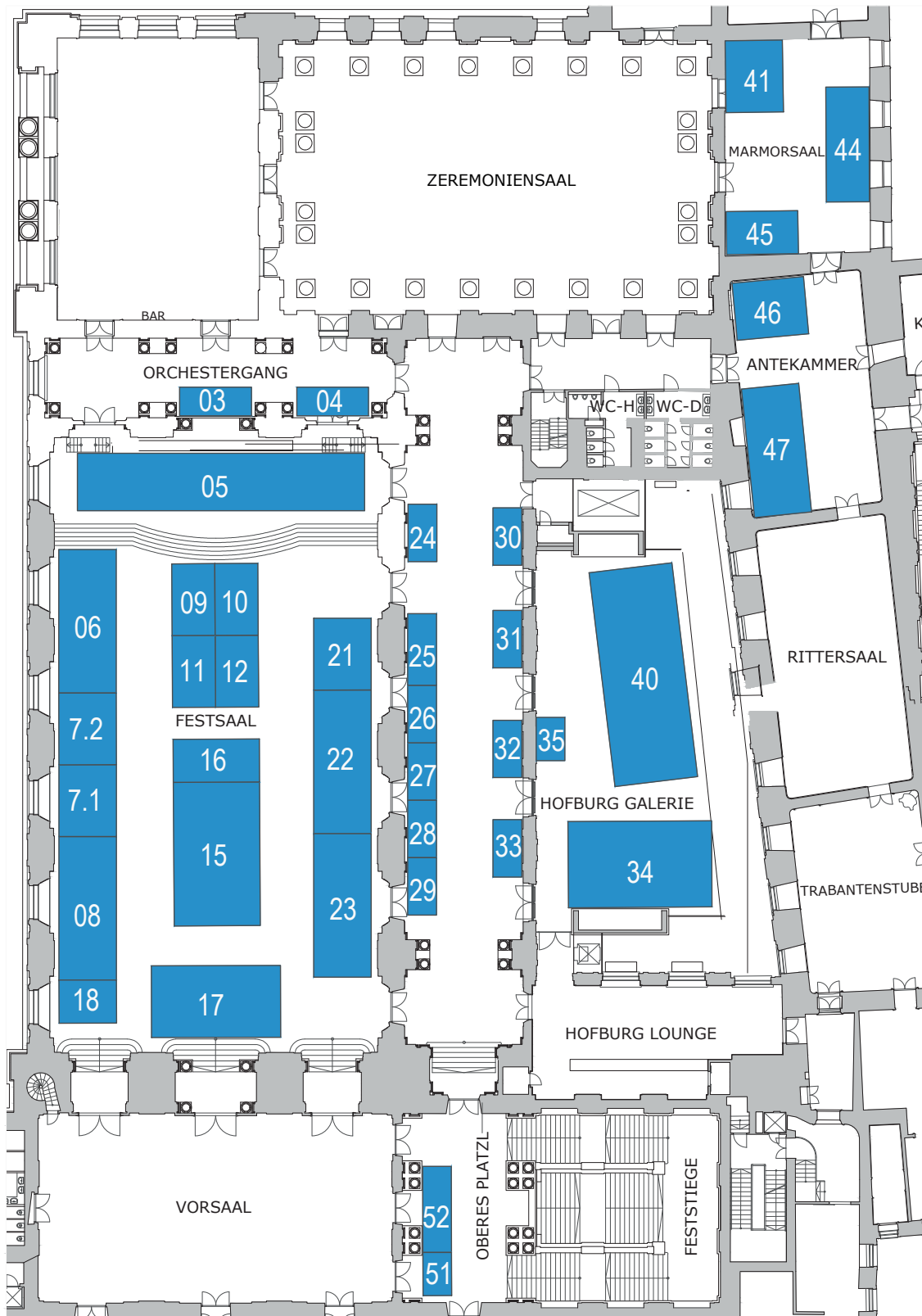
Company		FSA sum
Sobi		75.200,00 €
Takeda Pharma Vertrieb GmbH & Co. KG		70.000,00 €
Roche Pharma AG		65.450,00 €
Novo Nordisk Pharma GmbH		64.475,00 €
CSL Behring GmbH		49.125,00 €
BioMarin Deutschland GmbH		40.500,00 €
LFB GmbH		34.400,00 €
Pfizer Pharma GmbH		33.275,00 €
Octapharma GmbH		25.750,00 €
Novo Nordisk Österreich		25.500,00 €

Company		FSA sum
LEO Pharma GmbH	 <small>cat-algorithmus.de</small>	24.900,00 €
Bristol-Myers Squibb & Pfizer		23.500,00 €
Viartis Austria GmbH		21.875,00 €
Florio GmbH		21.450,00 €
Biotest AG	 <small>From Nature for Life</small>	19.250,00 €
Bayer Vital GmbH		17.000,00 €
Kedrion Biopharma GmbH		16.400,00 €
Sysmex Austria GmbH	 <small>Together for a better healthcare journey</small>	14.200,00 €
Novartis Pharma GmbH Austria		13.000,00 €

Company		FSA sum
Intersero GmbH		10.200,00 €
Astra Zeneca GmbH		8.600,00 €
Axon Lab AG		8.500,00 €
Siemens Healthcare GmbH		8.500,00 €
Werfen GmbH		8.500,00 €
Stago		7.650,00 €
Technoclone GmbH		7.650,00 €
DiaSys Deutschland Vertriebs-GmbH		6.375,00 €
Pentapharm AG		5.100,00 €
Grifols Deutschland GmbH		4.250,00 €

Company		FSA sum
CoaChrom Diagnostica GmbH	 <p>COACHROM DIAGNOSTICA IHRE EXPERTEN FÜR GERINNUNGSDIAGNOSTIK</p>	3.400,00 €
ECAT Foundation	 <p>ECAT FOUNDATION</p>	3.400,00 €
Haemochrom Diagnostica GmbH	 <p>Haemochrom Diagnostica</p>	3.400,00 €
Loxo GmbH	 <p>LOXO GMBH IMMUNOLOGIE • MOLEKULARBIOLOGIE BIOCHEMIE • PRODUKTE UND SYSTEME</p>	3.400,00 €
Mitsubishi Tanabe Pharma GmbH	 <p>Mitsubishi Tanabe Pharma</p>	3.400,00 €
Sanofi-Aventis Österreich GmbH	 <p>sanofi</p>	3.400,00 €
Diagon GmbH	 <p>DIAGON® Solutions beyond imagination</p>	2.550,00 €
Iatro/Hemmo App	 <p>Hemmo</p>	2.550,00 €

EXHIBITOR · FLOORPLAN



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