

Giornate **AIEOP**

RIMINI

Hotel Savoia

13-14 aprile 2026

Insufficienze Midollari

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IRCCS Istituto Giannina Gaslini-Genova

Disclosures of Name Surname

Company name	Research support	Employee	Consultant	Stockholder	Speakers bureau	Advisory board	Other
No disclosures							

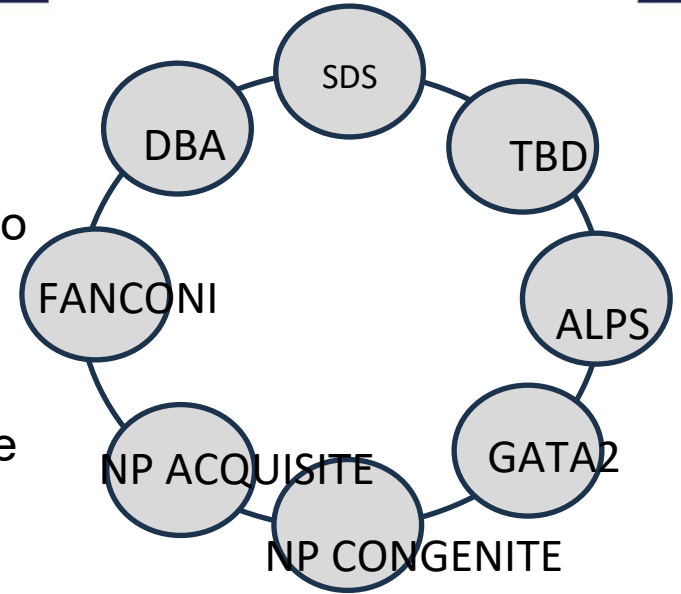


OBIETTIVI

Alto il profilo assistenziale/scientifico
Inclusivita'

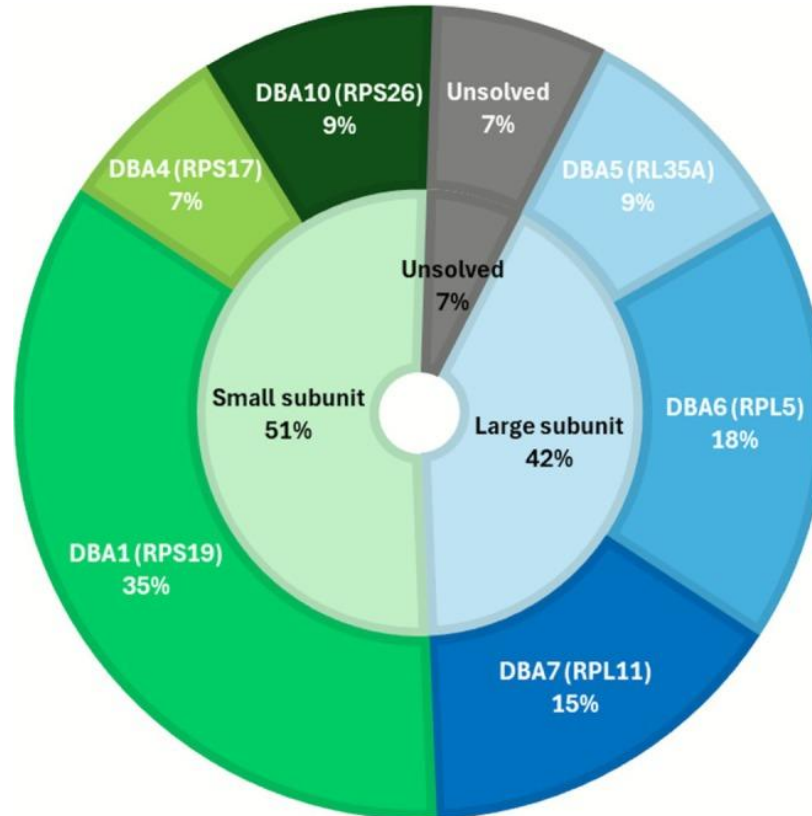
Mantenimento « in salute » dei registri e
degli Studi retrospettivi/prospettici

- Piattaforma Redcap
- Comitati etici
- Aggiornamento dati di follow-up

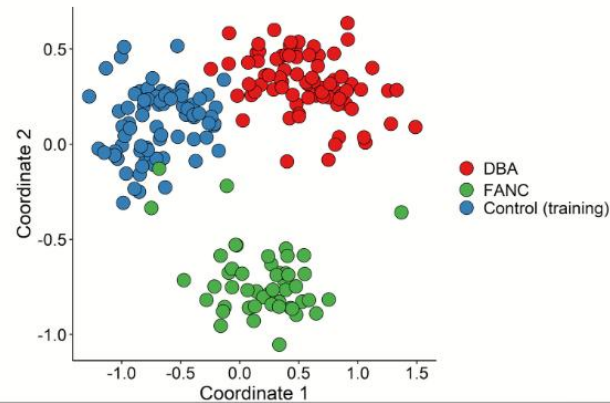
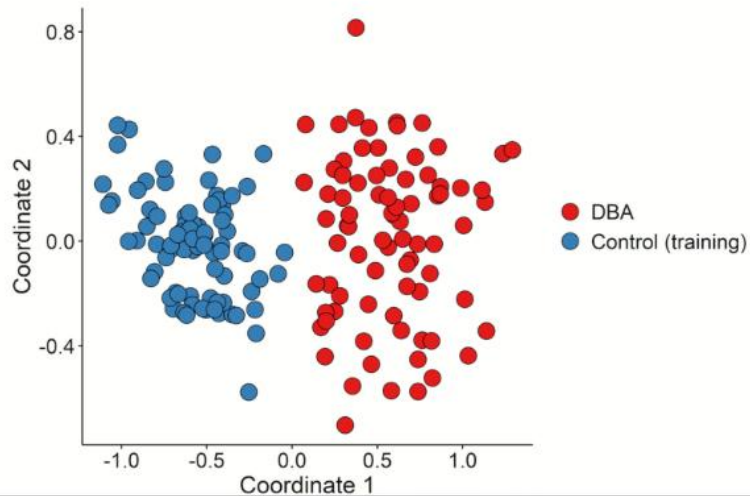


Profilo di metilazione in DBA

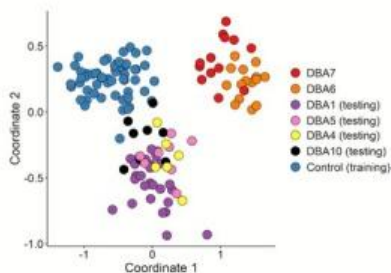
Corte di 80 pazienti
6 orfani di gene



DBA Profilo di metilazione: differenze ed analogie

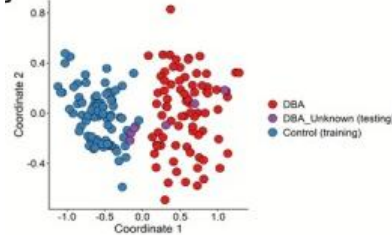


B



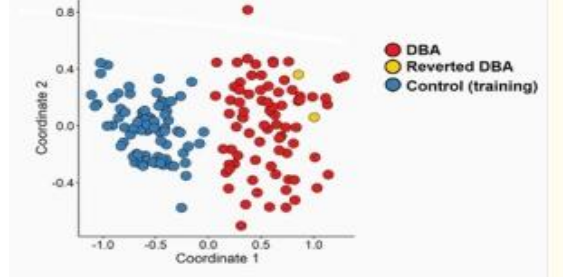
D

3



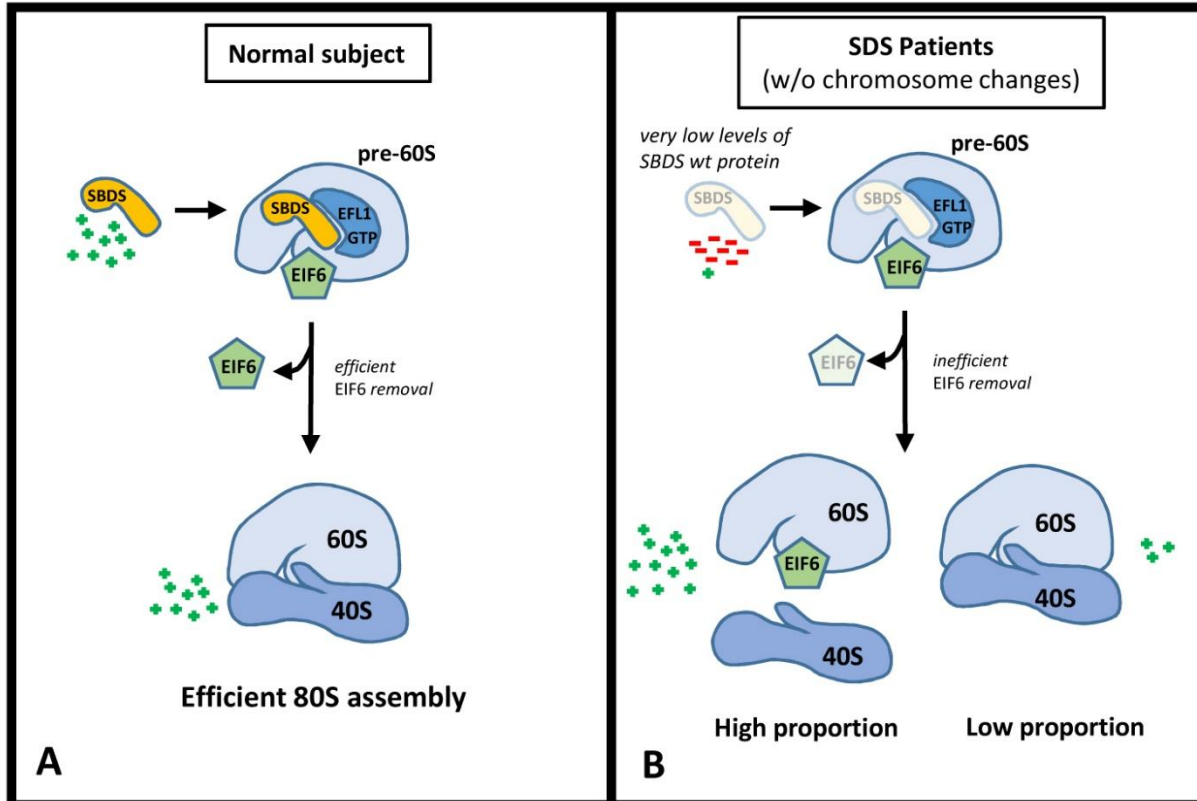
Profilo di metilazione dei soggetti revertiti

DISOMIA UNIPARENTALE → SCOMPARSA della MUTAZIONE

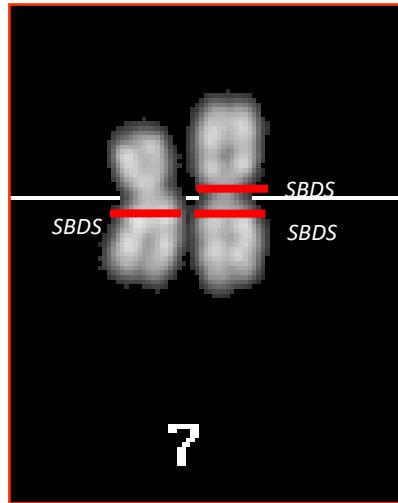


Analisi di metilazione: ruolo nella diagnosi e studio VUS Allargare la corte ed includere anche studio dei familiari .. Estensione ad SDS

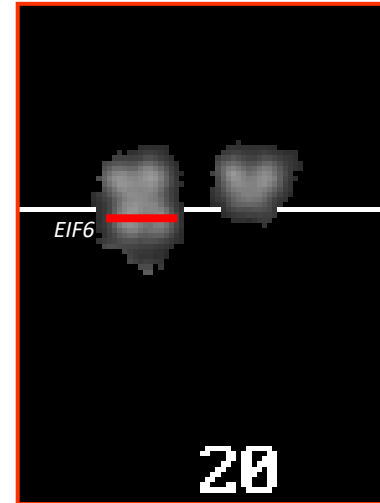
Citogenetica in SDS



Anomalie cromosomiche (acquisite) più frequenti nel midollo osseo (aggiornamento **marzo 2026**)



15/107 pazienti (~14%)



24/107 pazienti (~22,5%)

+ 4/107 pazienti entrambe le anomalie! (~4%)

Ci sono poi 3/107 pazienti con LOH di EIF6

Total patients in Italian SDS registry			156
followed up routinely by cytogenetic analysis			107
normal karyotype			51
with single cell chromosome alterations			9
<u>i(7)(q10)</u>			15
with other clonal chromosome alterations			2
with single cell chromosome alterations			2
with CH-LOH in 20q11.22			2
del(20)(q)			24
with other clonal chromosome alterations			1
with single cell chromosome alterations			2
<u>i(7)(q10)</u> + del(20)(q)			4
with CH-LOH in 20q11.22			1
other clonal chromosome anomalies *			9
chromosome alteration in single cell *			4
Transplanted after MDS/AML/Aplasia evolution			17
With <u>i(7)(q10)</u>			6
Successful			2
Unsuccessful			4
With del(20)(q)			4
Successful			4
Unsuccessful			0
With <u>i(7)(q10)</u> + del(20)(q)			1
Unsuccessful			1
With only other clonal chromosome anomalies			6
Successful			5
Unsuccessful			1
Complex karyotype at diagnosis (no HSCT)			1
With only other clonal chromosome anomalies			1

* As the sole anomaly found

Cytogenetics of Shwachman Diamond syndrome: 27 years report of the Italian cohort and review of the literature

Submission to European Journal of Medical Genetics feb. 2026

Survey su diagnosi e trattamento PNH nei centri AIEOP

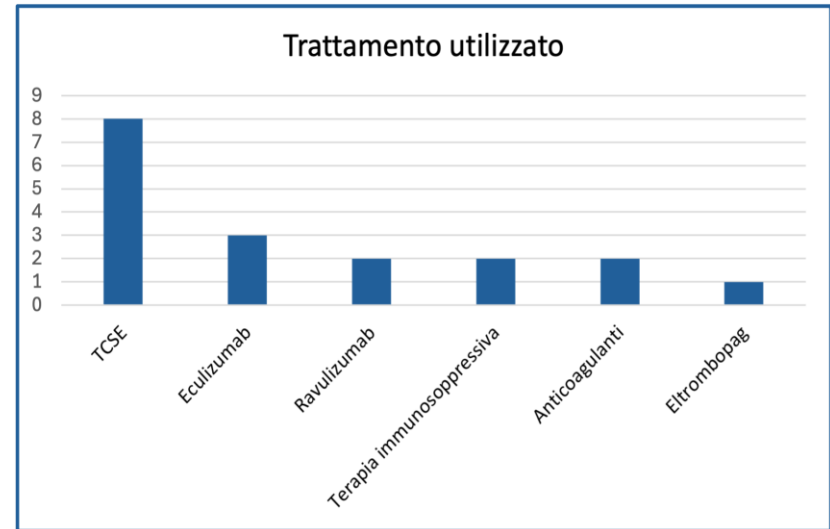
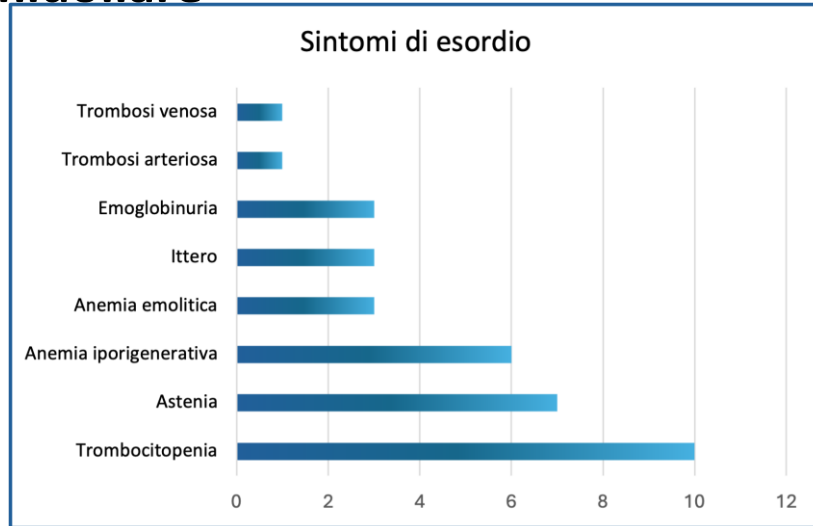
Incidenza annua: $1-5/10^6$

Prevalenza: $10-20/10^6$

Età di insorgenza: giovani adulti

QUESTIONARIO

16 centri 11 pazienti con PNH. 3 PNH classica/ 8 PNH associata ad aplasia midollare



Patologia rara

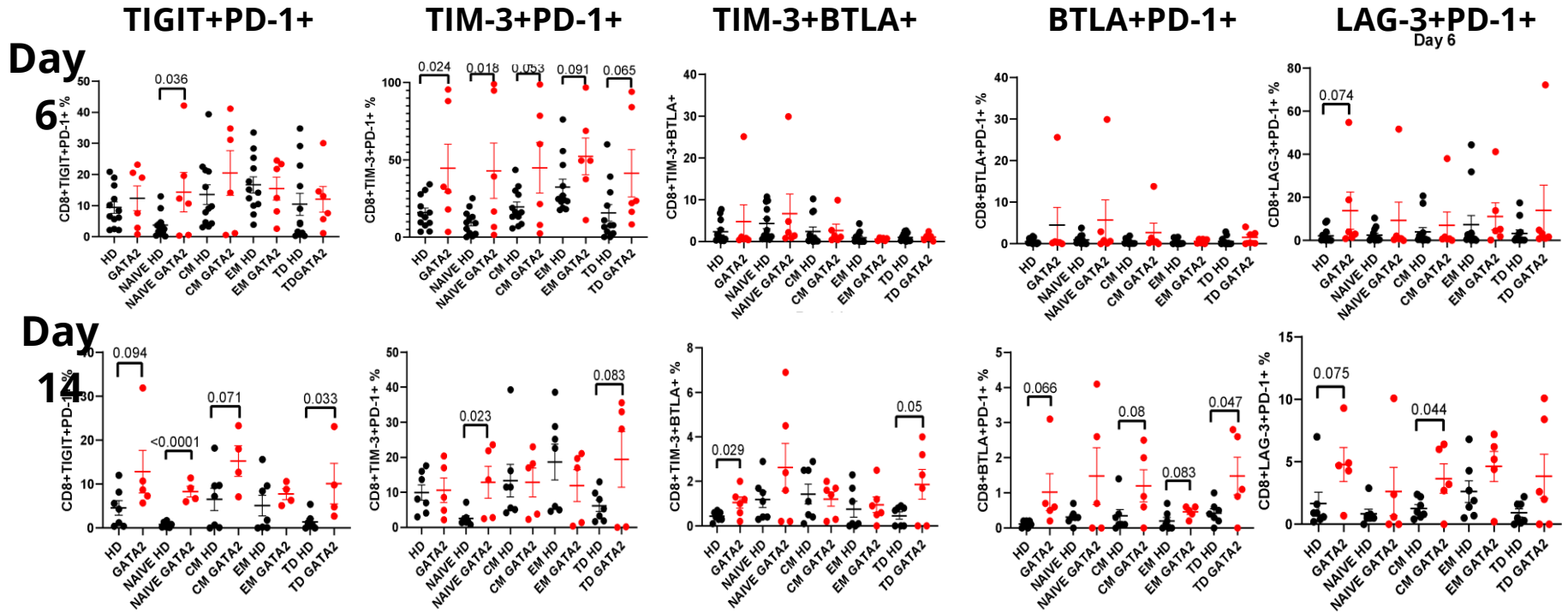
Scarsa esperienza con nuovi farmaci

... segnalare nuovi casi



Gennaio 2022 Marzo 2026 → 45 pazienti arruolati

**Microbiota in GATA 2
CD8 «esausti» in GATA 2**



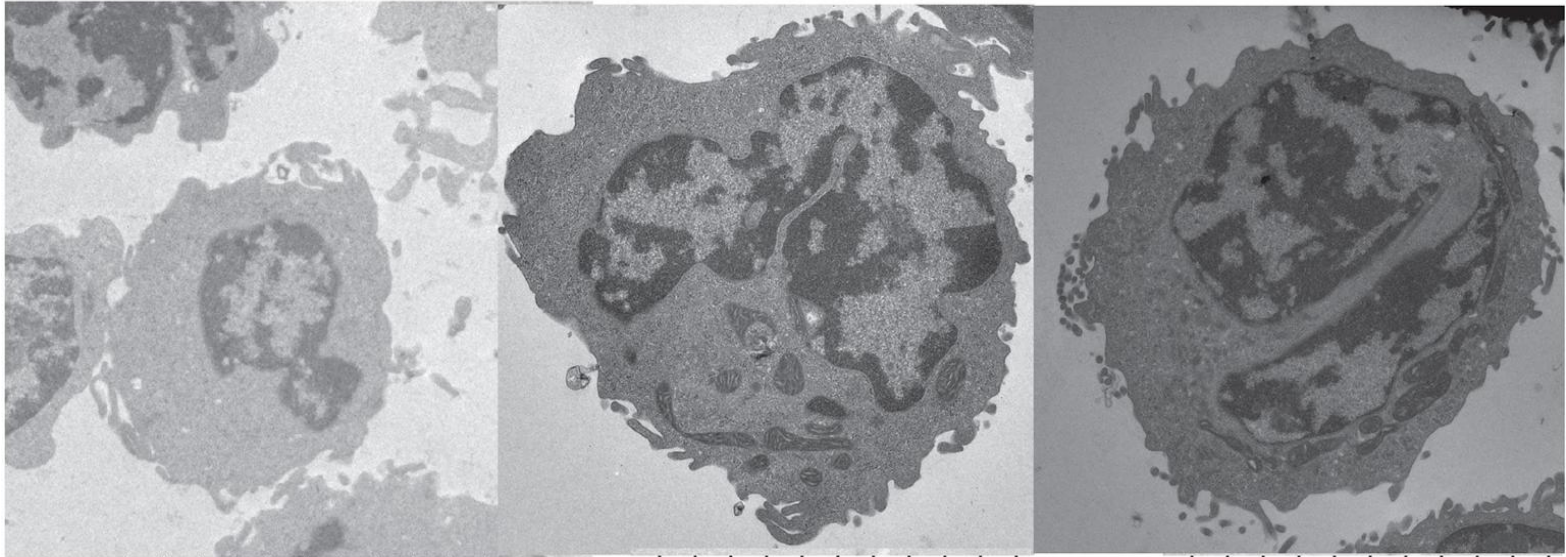
Exhausted phenotype in CD8+ subsets

Ultrastructure signature of GATA2 CIK

Representative images_{HD}

GATA2_1

GATA2_3



GATA2 CIK

Irregular mitochondria

5.0µm

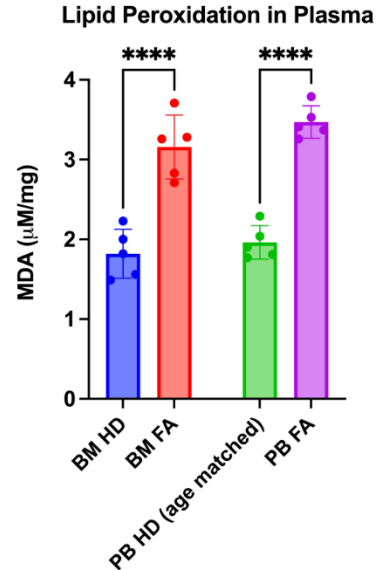
5.0µm

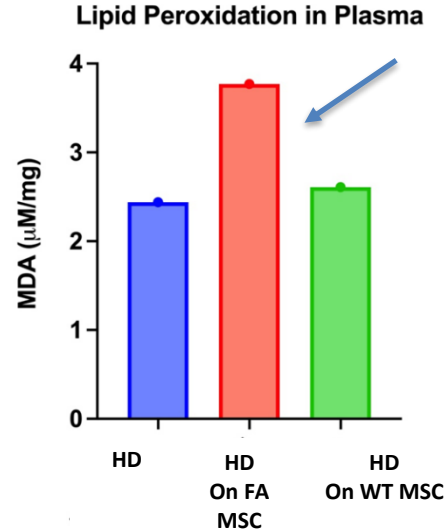
5.0µm

E' prevista la creazione del registro SAMD9/9L syndrome: l'obiettivo è di costruire una rete nazionale ed una raccolta dati registro per avviare studi funzionali su pazienti affetti

Ruolo della metilazione in FA Post Tmo

In plasma AND BM of FA patients increased oxydative stress





FA- MSC cultured in HD-plasma

After
72 h

Increased lipid
peroxidation in HD-plasma

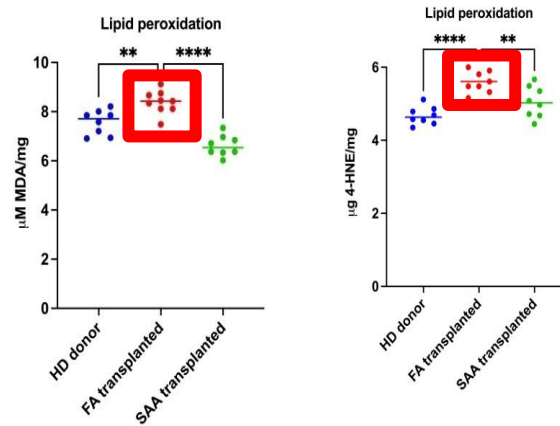
Oxydative stress mediated by BM niche cells

Peripheral Blood mononuclear cells (PB MNCs) from :

- 9 FA transplanted pts **and their HD**
- 9 Severe Aplastic Anemia pts after HCT

All full donor chimerism

> 6 months post HCT

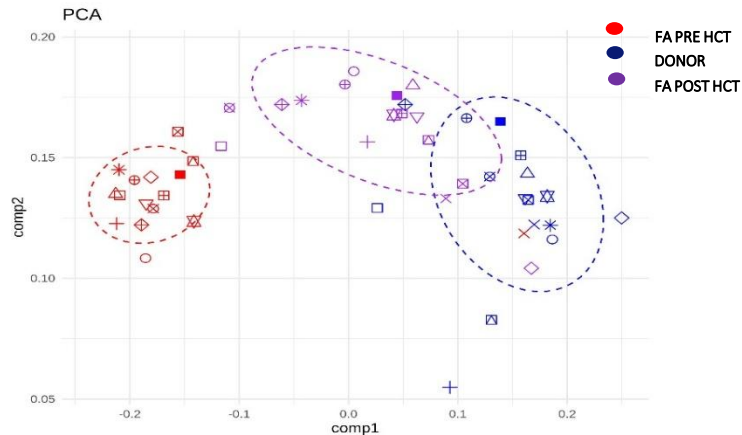


Increased membrane lipid peroxidation

PB MNCs of Healthy donor of FA patients after transplant:

- **Energetically impaired** (ATP/AMP ratio)
- **Enhanced membrane oxidative stress** (Malondialdehyde and 4-Hydroxynonenal) compared to transplanted SAA and HD

16 transplanted FA patients before and after HCT and their HD
Median times since transplant 2.5 years (range 0.1-9.61)



Post HCT profile intermediate between Pre HCT and Donor



Role of epigenetic modification in FA MNC post HCT?

TAKE HOME...BY NOW

- Epigenetic changes in HD cells coming from marrow microenvironment

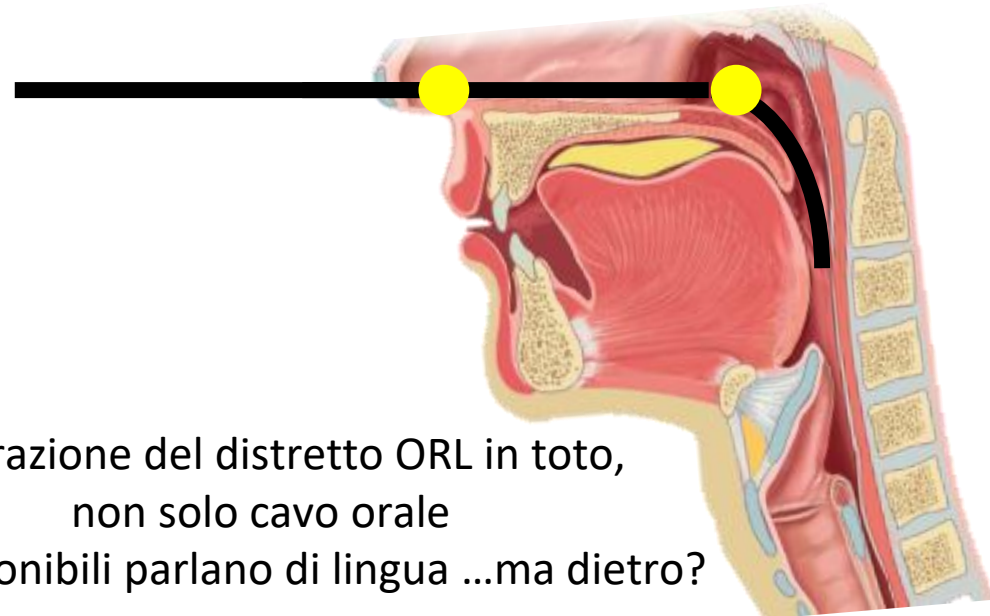
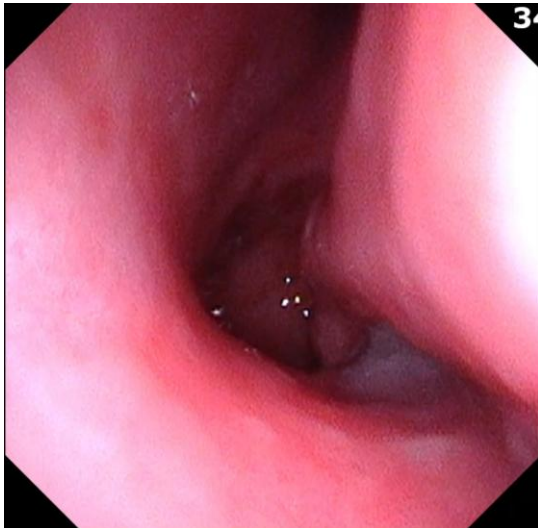
FURTHER STEPS

- To investigate the potential impact of post HCT defects on long term outcome of FA patients.

SUPPORTO
monitoraggi
Longitudinali

ORL

BIOENDOSCOPIA



Esplorazione del distretto ORL in toto,
non solo cavo orale
I dati disponibili parlano di lingua ...ma dietro?

BIOENDOSCOPIA

BIO

Magnificazione di caratteristiche tissutali «istologiche»: biopsia ottica

STEP 1

narrow band imaging NBI

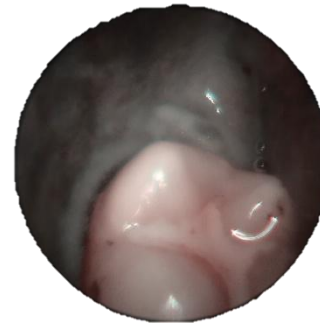
STEP 2

yellow enhancement YE

inflammatory mucosa heat map



White light



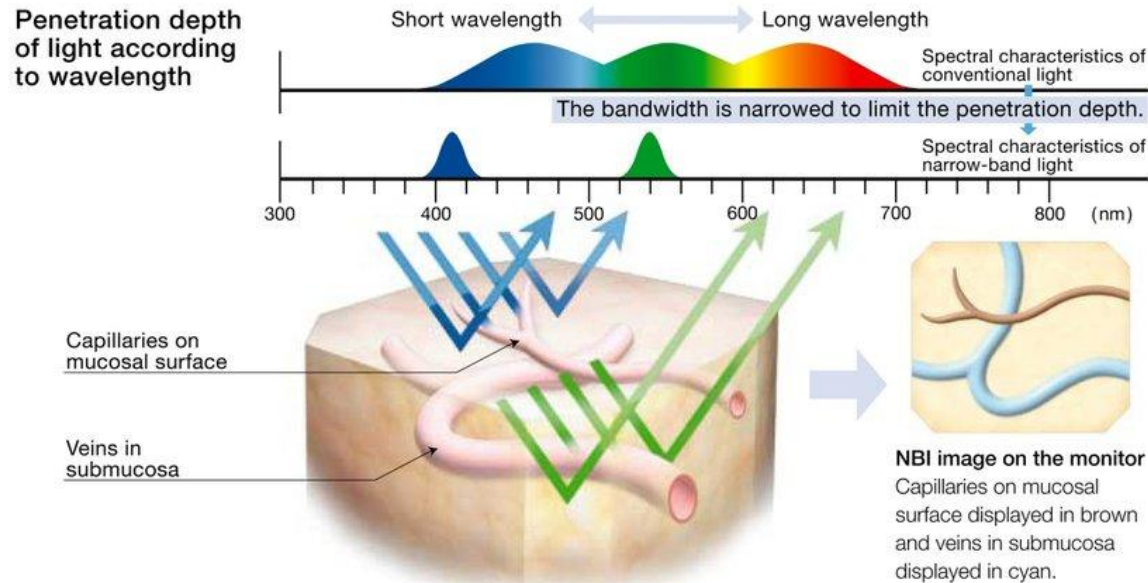
NBI



YE

BIO: Magnificazione di caratteristiche tissutali «istologiche»: biopsia ottica

NBI



Implementazione dati

Inizio studio, raccolta dati ottobre 2024

14 pazienti (8 F, 6 M)

numero visite eseguite: 17

lesioni sospette identificate: 5

Brushing: 5

istologico: 1

tommasocacco@gaslini.org



COLLABORAZIONI trasversali

ALPS.IT.NET

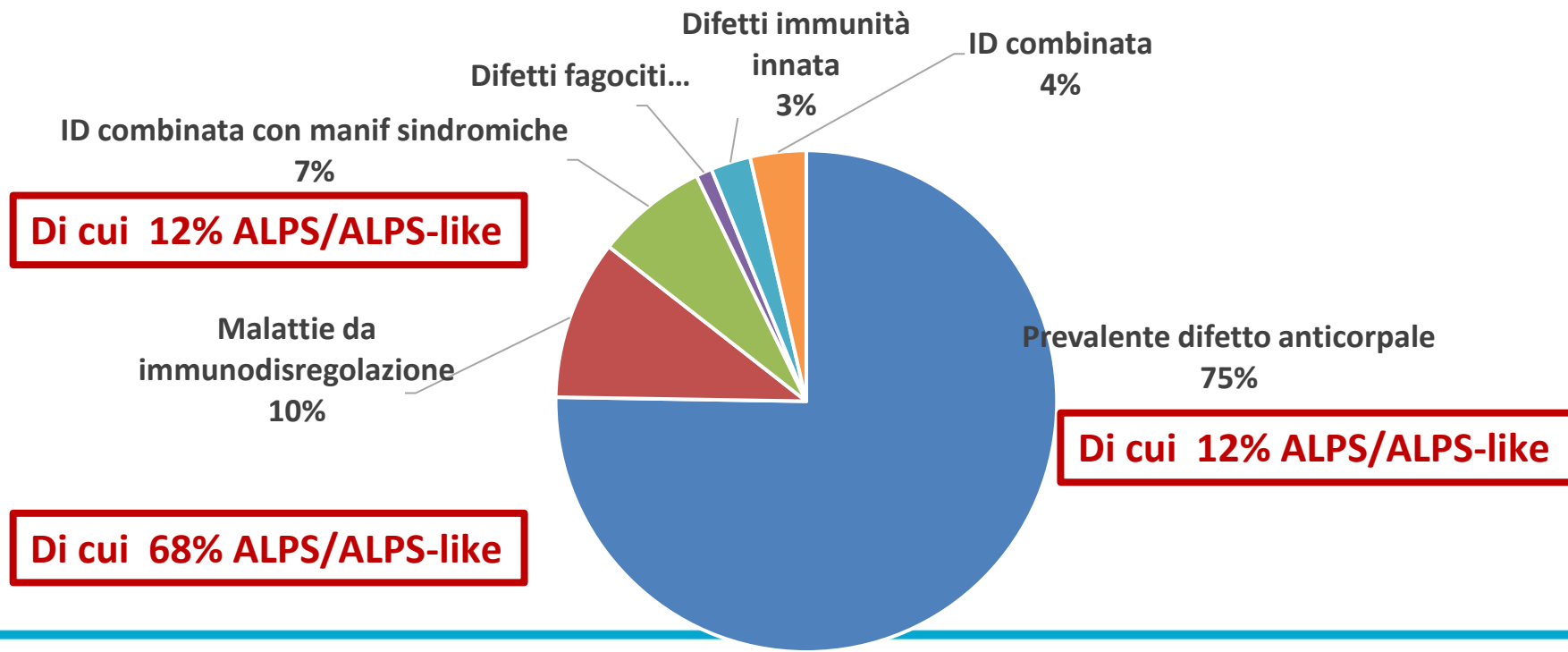


IPINET Immunoreum

Descrivere la prevalenza e il tipo di manifestazioni cliniche reumatologiche in
una coorte di pazienti con IEI

RISULTATI aggiornamento marzo 2026

23 Centri, 203 pazienti arruolati in 24 mesi



PROSSIMI STEP E TIMELINE

- Completamento studio → **31.03.2026 DATABASE LOCK**
- Analisi statistica per successiva pubblicazione → **APRILE 2026**
- **Sottomissione abstract ESID 2026 - Maastricht**

Giulia Loiacono – Data Manager UOSD Reumatologia e Immunologia pediatrica P.O. «Vito Fazzi» Lecce



immunoreum@gmail.com

PROPOSTE: malformazioni cranio faciali in DBA

Descrizione delle anomalie del sistema nervoso centrale & Possibili correlazioni con la genetica

Descrizioni sporadiche in letteratura

- ✓ Anomalie cranio faciali/ condotto uditivo/ decresc n faciale
- ✓ Difetto del corpo calloso
- ✓ Atrofia corticale / Dilatazione dei ventricoli
- ✓ Compressione midollo allungato
- ✓ Ritardo dello sviluppo/Ritardo mentale

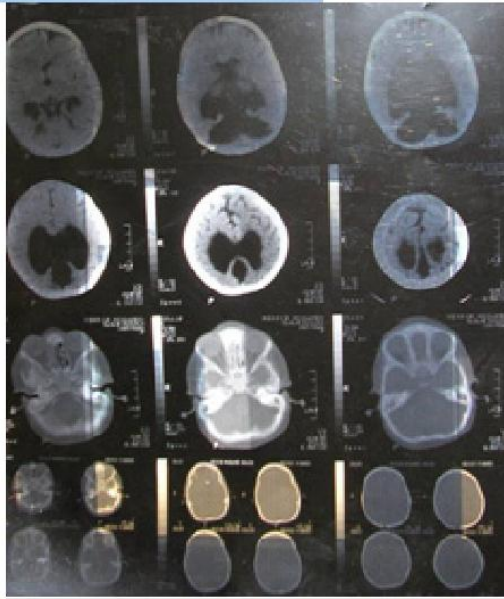


Fig. 1: CT brain shows a corpus callosum

Tominaga, Hum Genome Var 2019

Rabah and Nermine, Egypt J Medical Human Genetics, 2010, Roberti, Front Genet 2018,

Condivisione dati Radiologici

- Invio di Immagini con Wetransfer al seguente indirizzo: rengo.manara@unipd.it
- Invio di CD (o lastre) a:

Prof Renzo Manara,

Neuroradiologia c/o Azienda Ospedaliera Universitaria di Padova

via Giustiniani 2, 35128, Padova

Timeline

- Periodo di arruolamento e Raccolta Dati: Febbraio - Settembre 2026
- Analisi dati: Ottobre 2026 - Gennaio 2027
- Stesura Report e Manoscritto: Febbraio - Aprile 2027

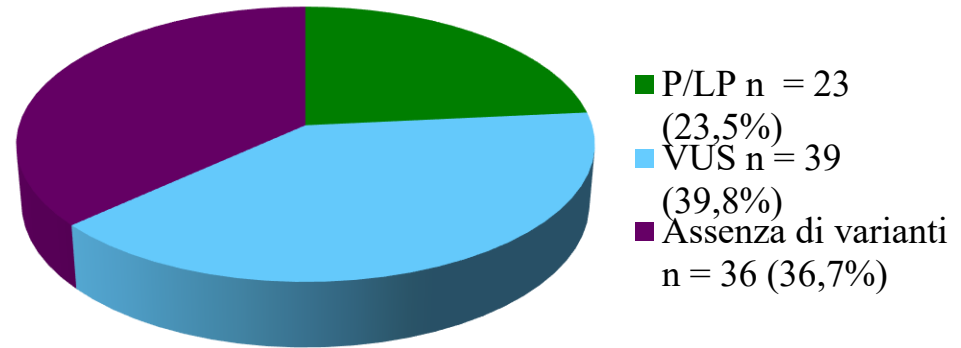


NUOVE PROPOSTE

Significato delle VUS nei telomeri

- 98 pazienti pediatrici e adulti
- Unità Ematologia Gaslini: gennaio 1989 - dicembre 2025
- Criteri di inclusione “genetici”: portatori di varianti **P/LP**, **VUS** geni TBD-relati e pazienti **senza varianti genetiche ma con lunghezza telomerica < 10° percentile per età.**

Distribuzione delle classi di variante



Genetica e analisi della lunghezza dei telomeri

Pazienti con varianti P/LP

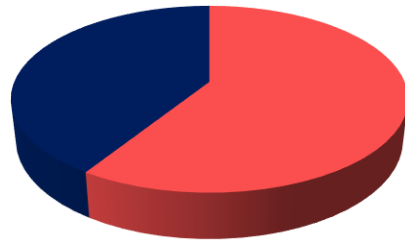


■ Geni core n = 14

Geni core:
 TERT n = 5
 TINF2 n = 4
 DKC1 n = 3
 TERC n = 2

Geni accessori:
 PARN n = 4
 RTEL1 n = 4
 WRAP53 n = 1

Pazienti con VUS

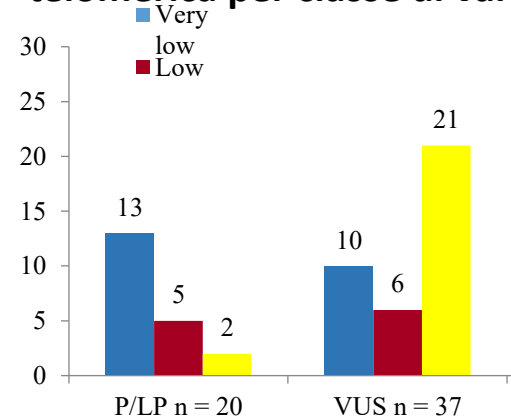


■ Geni core n = 23 ■ Geni accessori n = 16

Geni core:
 TINF2 n = 9
 TERT n = 8
 ACD n = 4
 TERC n = 1
 POT1 n = 1

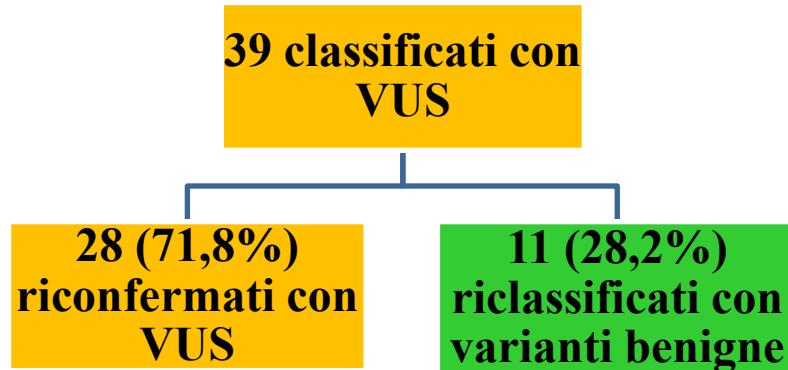
Geni accessori:
 RTEL1 n = 10
 PARN n = 4
 CTC1 n = 1
 NAF1 n = 1

Distribuzione della lunghezza telomerica per classe di variante



$p = 0,001$

Focus sulle VUS: la riclassificazione nel tempo



- **Lunghezza telomerica:**
 - 30% pazienti con VUS confermate: TL < 10° percentile
 - 10% paziente con variante benigna: TL < 10° percentile

$p = 0,05$
- **Manifestazioni extraematologiche note:**
 - 50% pazienti con VUS confermate
 - 0% con varianti benigne

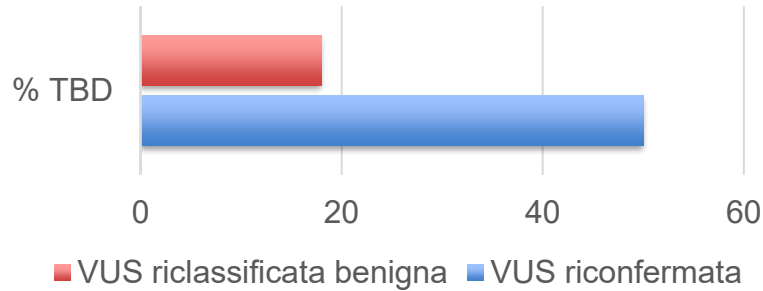
$p = 0,003$
- **Manifestazioni ematologiche:**
 - 75% pazienti con VUS confermate
 - 72% pazienti con varianti benigne

$p = ns$
- **Citopenia e short TL**
 - 54% pazienti con VUS confermate
 - 9% pazienti con varianti benigne

$p = 0,08$

VUS e machine learning

ML supervised analysis prediction



$p=0.08$, Odds
ratio= 4.5

Received: 12 February 2025 | Accepted: 5 October 2025
DOI: 10.1002/hem3.70272

ARTICLE

HemaSphere  eha

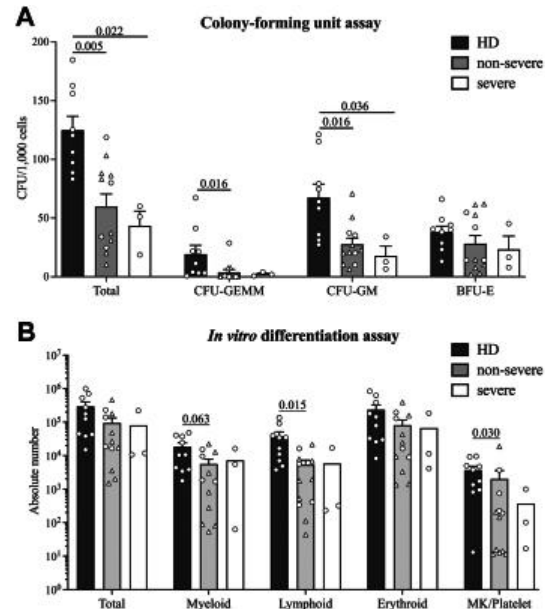
lucaarcuri@gaslino.org
erikamassaccesi@gaslino.org

Application of machine learning in the diagnostic work-up of
telomere biology disorders



Estensione studio DADA2

RICERCA FINALIZZATA GASLINI / SAN RAFFAELE



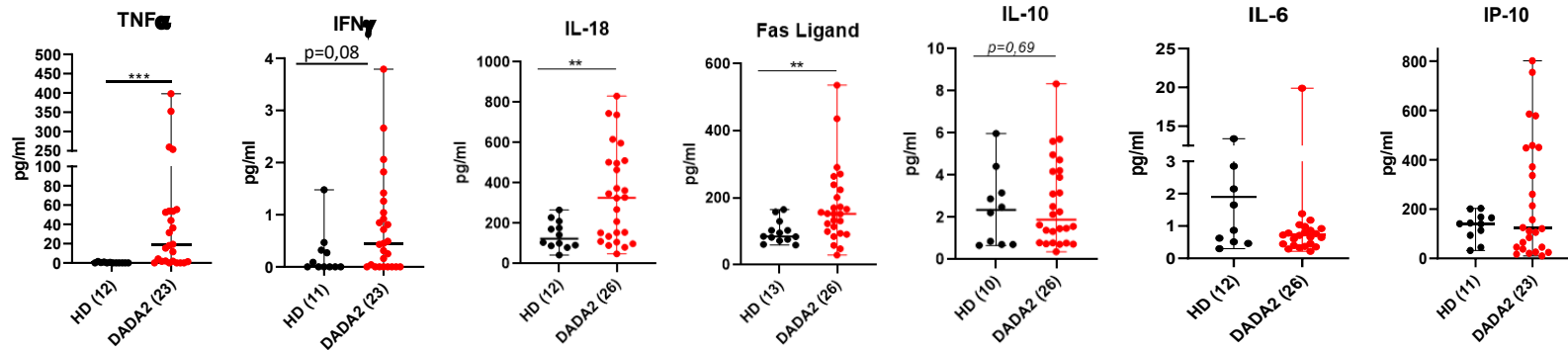
18 patients

Autoimmune cytopenias and bone marrow failure (61 %)

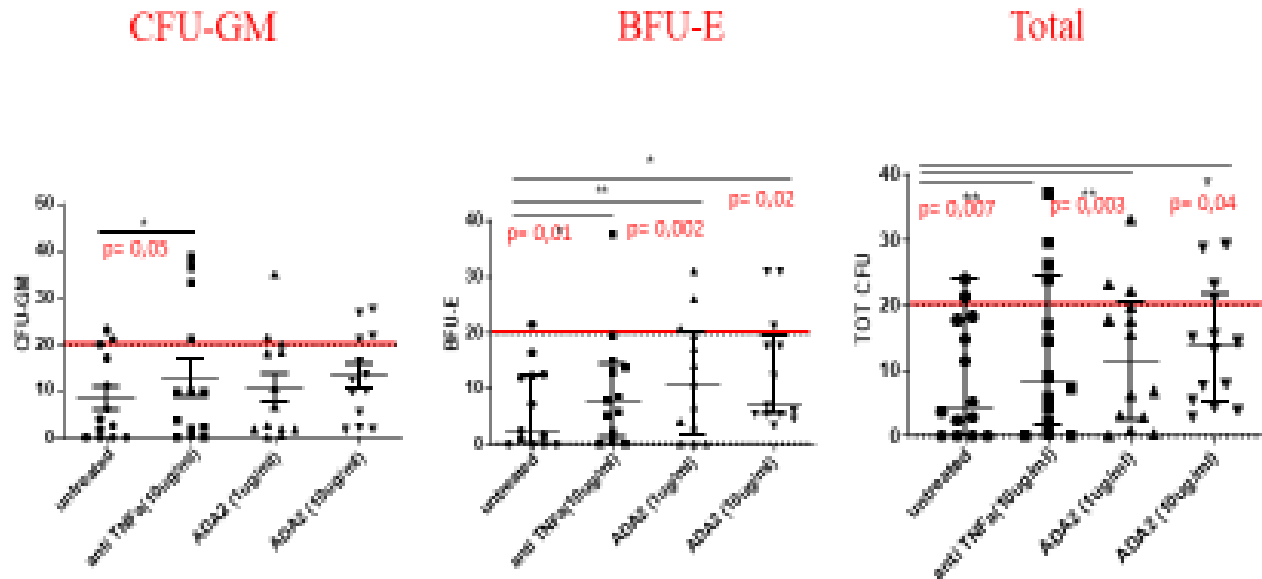
DADA2
patients



Increased pro-inflammatory
cytokines in PB



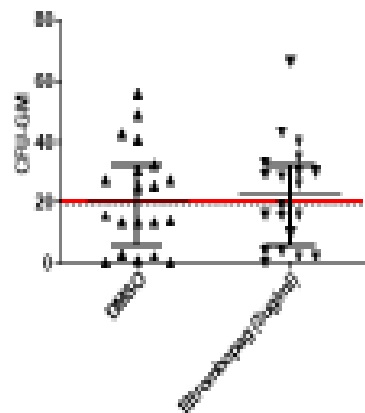
Treatment with anti-TNF α , human recombinant ADA2, or Eltrombopag.
BFU-E (Burst-Forming Unit Erythroid) and CFU-GM (Colony-Forming Unit-Granulocyte Macrophage)



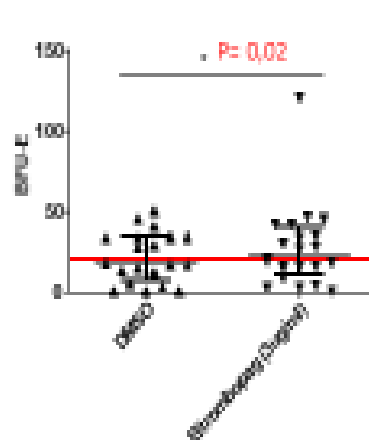
✓ *Anti-TNF α stimulates CFU-GM and BFU-E growth*

+ Eltrombopag

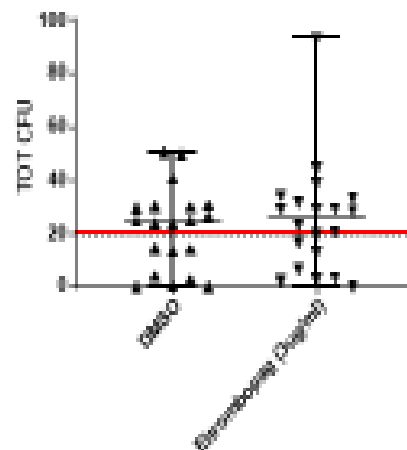
CFU-GM



BFU-E



Total



Eltrombopag stimulates BFU-E growth

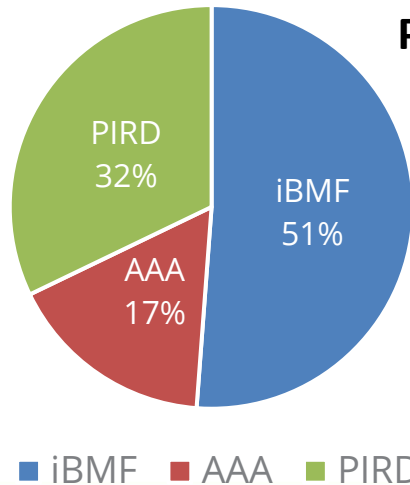
Ematopoiesi clonale in insufficienze midollari congenite

Characteristic of the cohort

Sept 24-Dec25

117 samples of 84 pts iBMF/PIRD patients (females 52%,
age at first analysis 19.9y;range 1.5-53y)-14/84 serial testing

Marrow (79%)

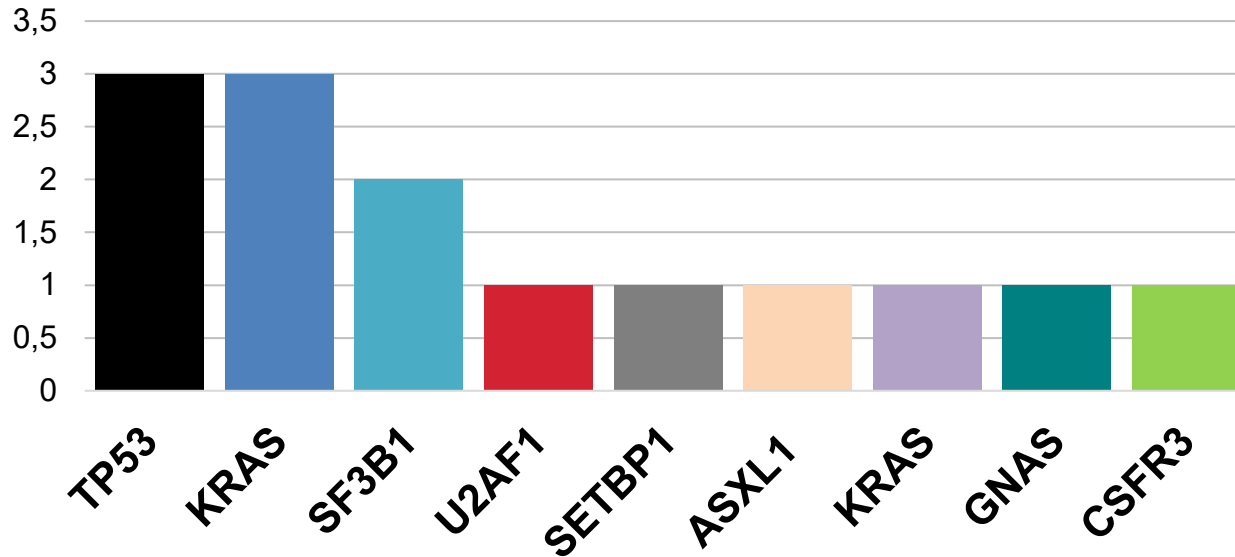


Peripheral Blood (21%)

- 13 Severe Congenital Neutropenia
- 11 Fanconi Anemia
- 9 Telomere Biology Disorders
- 4 Swachman Diamond Syndrome
- 4 Blackfan-Diamond Syndrome
- 5 Congenital Thrombocytopenia

Frequency of LP/P variants

Nine/84 patients (11%) carried somatic pathogenic or likely pathogenic variants



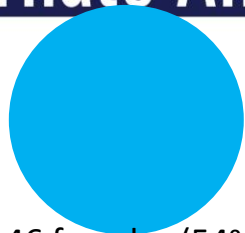
SOMATIC VARIANTS in disease groups

CH was more common in iBMF 14% than, AAA in 7% or PIRD 7%

ENLARGED COLLECTION

SHARED PANELS

INPUT DATA in REDCAP according to the
DISEASE



IMPLEMENTAZIONE

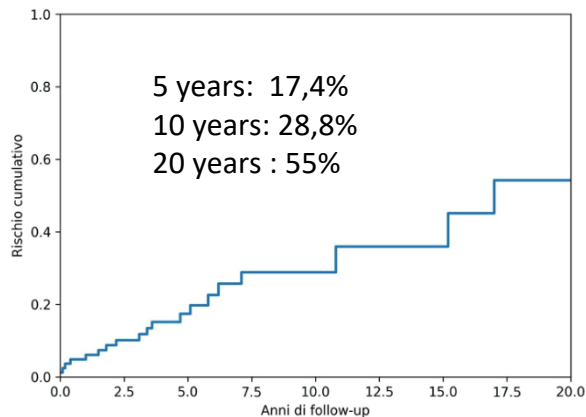
Neutropenie Long Lasting Late Onset

85 patients, 46 females (54%), median age at examination **14.5 years** (range 0.4-55 years) affected with **LO/LL neutropenia**
from January 2005 to June 2024

Neutropenia at DX : mild 34% moderate 38% and severe in 28%

Severe infections 10%

Autoimmunity

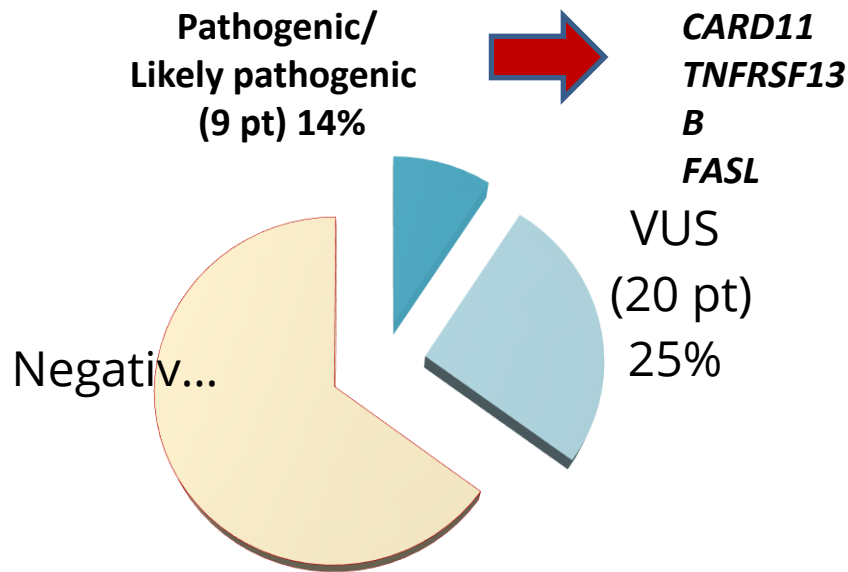


- << CD19/NK/CD8
- >> B Transitional (CD27⁻CD10⁺CD38⁺⁺)
- << CD27+IgD-IgM- (B Memory Switched)
- >> CD27-IgD-CD21low (DN2 B cells)
- >> CD27-CD10+-CD38+-IgD+CD21low
- << T helper naïve (CD4⁺CD45RA⁺CD27⁺)
- >> T helper central memory (CD4⁺CD45RA⁻CD27⁺)
- << T cytotoxic naïve (CD8⁺CD45RA⁺CD27⁺)
- >> T cytotoxic central memory (CD8⁺CD45RA⁻CD27⁺)
- << T regulatory (CD3⁺CD4⁺CD25[^]bright⁺CD45RA⁻)

Genetic profile NGS panel 160 genes (BFM/IEI)

Analyzed 70/85 available samples

At least 1 variant in 28/70 (40%)



Pathogenic and likely pathogenic variants:

PT 1	TNFRSF13B	c.204 <u>dup</u>	p.Leu69 *
PT 2	TNFRSF13B	c.579C>A	p.Cys193Ter
PT 3	TNFRSF13B	c.260T>A	p.Ile87Asn
PT 4	CARD 11	c.3G>A	p.Met1Ile
PT 5	TNFRSF13B	c.542C>A	p.Ala181Glu
PT 6	CARD11	c.1316C>T	p.Ser439Phe
PT 7	FASL	del 1>4	del 1>4
PT 8	TNFRSF13B	C.431C>G	p.Ser144*
PT 9	TNFRSF13B	c.310T>C	p.Cys104 <u>Arg</u>

• **TNFRSF13B**: mutations in 6 patients (frameshift, nonsense, missenso)

• **CARD11**: mutations in 2 patients

• **FASL**: deletion in 1 patient

DATA COLLECTION

Currently available data : **971** patients with neutropenia

- AIN **524** (of wich **254** non remitting) in follow-up 80
- IN **226** (of wich **139** non remitting) in follow-up 40

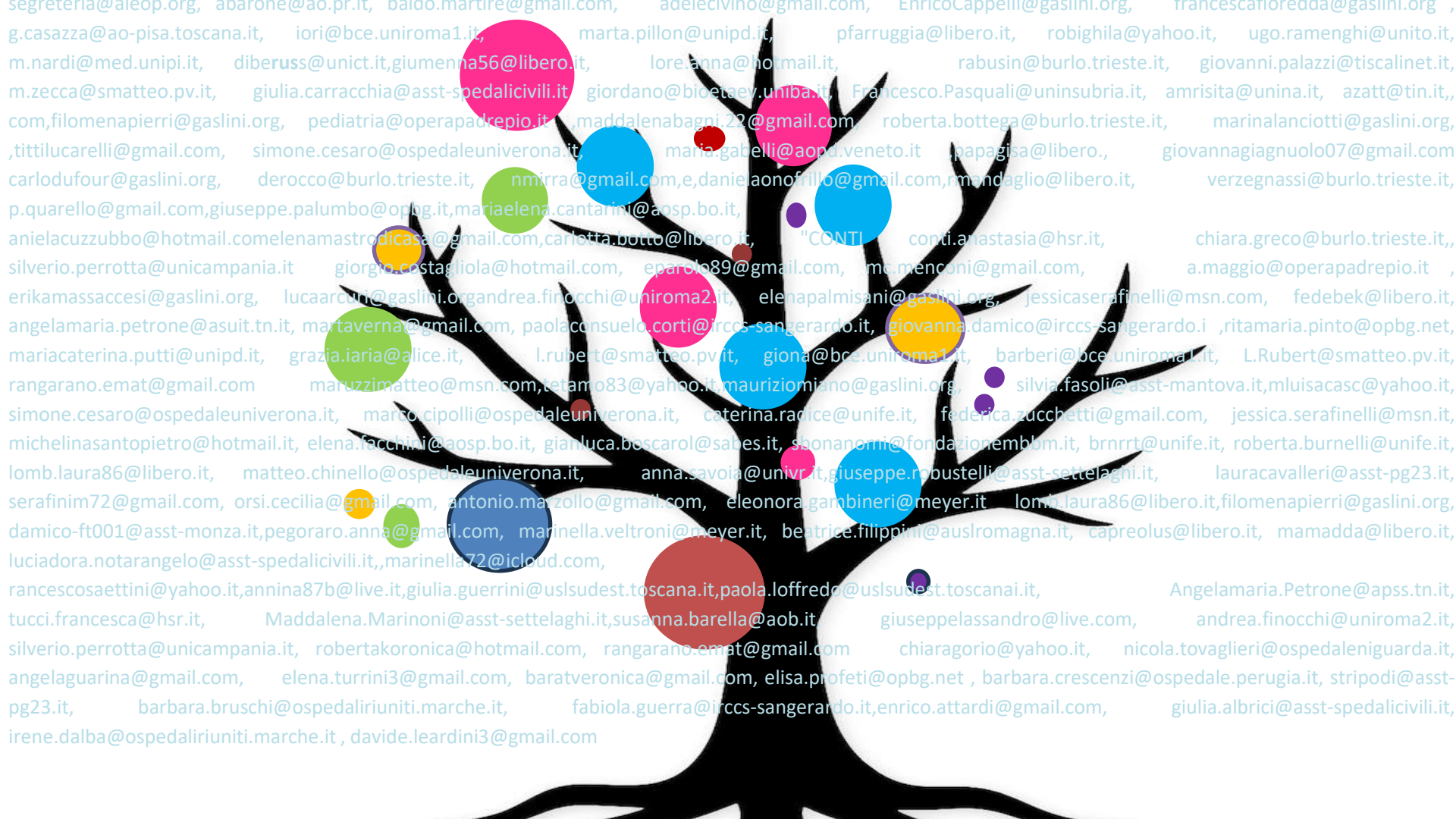
Red CAP migration

WORK PLAN

Enlargement of the cohort involving also adults patients:

- Genetic data
- Immunological data
- Autoimmunity

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