Course Overview
This conference is intended to raise awareness about the signs and symptoms of Graft versus Host Disease (GvHD), review cutting edge approaches to prevention and treatment, and highlight and promote research to further our understanding of its cause. The symposium will have two tracks: a scientifically rigorous one for physicians and practitioners, and a survivor track that will focus on challenges faced by BMT recipients and their families. The survivor track is intended to provide both education and the opportunity for individuals to interact with national leaders in the GvHD field. The afternoon “Meet the Expert” unique interactive breakout sessions will provide an opportunity for the physicians, survivors and their families to come closely together during the program.

Learning Objectives
At the conclusion of this conference, participants will be prepared to:
1. Describe current advances in the biology and treatment of acute GvHD
2. Describe novel targets and new agents in the treatment of chronic GvHD
3. Outline novel strategies for the prevention of GvHD
4. Discuss the role of B-cells in the pathogenesis of chronic GvHD
5. Outline the oral complications of chronic GvHD and current treatment strategies
6. Identify the unique perspectives and lessons learned from a physician/patient with GvHD

Target Audience
This program is intended for hematologists, medical oncologists, bone marrow transplant physicians, pharmacists, nurses, and patients and their families.

Location and Accommodations
UPMC Shadyside is located at 5230 Centre Ave, Pittsburgh, Pennsylvania. Hotel rooms have been reserved at Courtyard Pittsburgh Shadyside (5308 Liberty Ave, Pittsburgh, Pennsylvania) at a rate of $155/night. Ask for the group block (GvHD Symposium-MAC Foundation) or code (MAC). Please reserve your room by April 13th to receive the discount.

By phone: 412-683-3113
When reserving, please mention the Graft versus Host Disease Symposium.

Online: www.marriott.com/hotels/travel/pitok-courtyard-pittsburgh-shadyside/
Registration closes at 4:30 p.m.

First Name
Last Name

Patient Name

Degree(s)/Concentration

Address

City
State
Zip

Institutional Affiliation
Specialty

Email
Phone Number

Fee
Registration fee includes all conference materials, food and continuing education credit. Individual wishes for cancellations prior to May 6 via e-mail to eventregistrations@case.edu or phone to 216.577.2280.

Method of Payment
Cash/Check or Money Order

Card Number___________________________________ Security Code___________

Charge my:  ____Discover  ____MasterCard  ____Visa  ____American Express

Enclosed is my check # _________ made payable to Case Western Reserve University.

Cardholder Name

Address

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Enclosed is my check # _________ made payable to Case Western Reserve University.

Registration

by Mail

Mailing Name

Street

City
State
Zip

Registration closes at 4:30 p.m.

First Name
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