SCIENTIFIC PROGRAM

EORTC
European Organisation for Research and Treatment of Cancer

The future of cancer therapy

EORTC-CLTG

Annual Meeting 2026 - Berlin

8-10 Oct 2026

last update August 2026

This symposium will include discussion of Kyowa Kirin product-related data and is intended for healthcare professionals only.

THE POWER OF *connection*

Risk stratification in MF and SS using CLIPI: Real-world evidence and implications for clinical practice

Friday 9 October 2026 | 09:35–10:35 CEST
Hall 10, Colosseum Berlin, Berlin, Germany

Chair

Professor Chalid Assaf

Speakers

Professor Julia Scarisbrick

Professor Pablo Luis Ortiz-Romero

Agenda

TIME (CEST)	
09:35	Welcome and introduction
09:40	Evolving prognostics in MF and SS
09:55	CLIPI implications for clinical practice
10:05	Informing treatment decisions with real-world evidence
10:20	Managing rarer CTCL subtypes with limited data
10:30	Q&A and close

Abbreviations: CEST, Central European Summer Time; CLIPI, Cutaneous Lymphoma International Prognostic Index; CTCL, cutaneous T-cell lymphoma; MF, mycosis fungoides; Q&A, question and answer; SS, Sézary syndrome.

KYOWA KIRIN

Connect with the Kyowa Kirin team at **Booth 2**

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KKI/INT/NONB/0034 | Date of preparation: August 2026

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Welcome Message

From the Congress President

> *"Berlin offers an inspiring environment where scientific innovation, cultural diversity, and professional exchange come together naturally."*

Dear Colleagues and Friends,

We are pleased to announce that the EORTC-CLTG Annual Meeting 2026 will take place in Berlin, Germany, from 8–10 October 2026. As one of Europe's most dynamic capitals, Berlin offers an inspiring environment where scientific innovation, cultural diversity, and professional exchange come together naturally.

This year's meeting builds on the strong tradition of previous CLTG gatherings, bringing together specialists from dermatology, pathology, hematology, oncology, radiology, and imaging sciences, as well as many other professionals dedicated to understanding and treating cutaneous lymphoma. The program will combine cutting-edge research with practical clinical insights, covering the full spectrum of malignant and benign skin inflammation—from diagnostics and translational science to therapeutic advances.

A central aim of the meeting is to foster meaningful dialogue: exploring emerging research priorities, addressing current challenges in patient care, and identifying innovative solutions that can shape the future of the field. As always, the congress warmly welcomes early-career researchers and young clinicians, who contribute fresh perspectives and help drive the next generation of progress.

Berlin provides an ideal setting for this exchange. Its central location, vibrant scientific community, and rich cultural landscape create the perfect backdrop for productive discussions, networking, and collaboration across disciplines and countries.

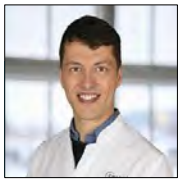
We look forward to welcoming you to Berlin for an engaging, forward-looking, and truly memorable EORTC-CLTG Annual Meeting.

PROF. DR.
EVANGELIA PAPADAVID
Chair of EORTC-CLTG
National and Kapodistrian University of Athens
Attikon University Hospital

PROF. DR.
CHALID ASSAF
Congress President
Helios Klinikum Krefeld | Health and Medical University Düsseldorf-Krefeld

Committees

Scientific leadership and reviewing board



PD DR. GABOR DOBOS
Local Organizing Committee
Charité Berlin

DR. ROSE MORITZ
Local Organizing Committee
Charité Berlin

INTERNATIONAL SCIENTIFIC BOARD

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Rudolf Stadler · Minden, Germany
Maarten Vermeer · Leiden, Netherlands
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CONFERENCE

Congress Venue

Colosseum Berlin · Prenzlauer Berg

The Colosseum Berlin is one of the city's most historic event venues. Originally opened in 1893 and used as a cinema from 1924 onwards, the building today combines historic architecture with state-of-the-art event technology. With flexible room concepts, excellent acoustics, and modern AV-equipment, the Colosseum is suitable for both large-scale events and smaller, more exclusive formats.

Thanks to its central location in Prenzlauer Berg and excellent connections to public transport, the venue is easily accessible – whether from the city center or directly from the airport.

Address: **Colosseum Berlin**
Schönhauser Allee 123
10437 Berlin
(Entrance via Gleimstr. 31-33)

BY TRAIN

From Berlin Central Station (Hauptbahnhof)

- S3, S5, S7 or S9 to Alexanderplatz
- Change to U2 (direction Pankow)
- Exit at Schönhauser Allee
- Approx. 25 min total

FROM THE AIRPORT

From BER Berlin Brandenburg

- FEX to Gesundbrunnen
- change to S8/S41 to Schönhauser Allee
- Short walk to the Colosseum

Or RE7, RB14 to Hauptbahnhof and as above

PROGRAM

Program at a Glance

Three days · ten oral communications · four keynotes

DAY ONE

THURSDAY ◆ OCTOBER 8

09:00 – 09:30	**Welcome Coffee**
09:30 – 10:00	**Congress Opening & Wolfram Sterry Lecture**
10:05 – 11:05	**Oral Communications I · Molecular & Microbial Biomarkers**
11:10 – 11:40	**Industry-Supported Symposium 1**
11:40 – 12:45	**Lunch**
12:45 – 13:15	**Keynote · CD30 as a Target Molecule in the Diagnosis and Therapy of Lymphomas**
13:20 – 14:20	**Oral Communications II · Tumor Microenvironment & Immune Evasion**
14:25 – 15:25	**Industry-Supported Symposium 2**
15:25 – 15:55	**Coffee Break**
15:55 – 16:25	**Keynote · Skin barrier stress, bacteria, and TCRVb chains in cutaneous T cell lymphoma**
16:30 – 17:20	**Oral Communications III · Diagnostic Classification & AI-Assisted Tools**
17:35 – 18:35	**Poster Spotlight Presentations I & II**
18:45 – 20:45	**Welcome Reception** *Not affiliated with the main CME program*

Program at a Glance

DAY TWO

FRIDAY ◆ OCTOBER 9

08:00 – 08:30	Industry-Supported Symposium 3a
08:30 – 09:30	**Oral Communications IV · Imaging, Staging & Prognostic Tools**
09:35 – 10:35	Industry-Supported Symposium 3
10:35 – 10:55	**Coffee Break**
10:55 – 11:55	**Oral Communications V · Therapeutic Innovations - Mogamulizumab in Focus**
12:00 – 12:30	**Keynote · Timing Is Everything: Circadian Clocks in Cancer Biology and Therapy**
12:30 – 13:30	**Lunch**
13:30 – 14:30	**Oral Communications VI · Skin-Directed Therapies**
14:35 – 15:35	**Oral Communications VII · Novel Targeted Agents**
15:35 – 15:55	**Coffee Break**
15:55 – 16:55	**Poster Spotlight Presentations III & IV**
19:00 – 19:30	After Hours · Keynote **EORTC Cutaneous Lymphoma Group: Past, Present and Future**
19:30 – 20:00	After Hours · Awards **Travel- and Young Investigator Awards**
20:00 – 22:30	After Hours · Dinner **Conference Dinner & Networking** *Not affiliated with the main CME program*

Program at a Glance

DAY THREE

SATURDAY ◆ OCTOBER 10

◇ 08:15 – 09:00	**Patient Forum Session** Financial support for this session was provided through an unrestricted grant from Kyowa Kirin
◆ 09:00 – 10:00	**Oral Communications VIII · Non-CTCL & Mimicking Disorders**
◇ 10:05 – 10:35	**Industry-Supported Symposium 4**
◆ 10:35 – 10:50	**Coffee Break**
◆ 10:50 – 11:55	**Oral Communications IX · Patient-Reported Outcomes, Itch & Treatment Safety**
◇ 12:00 – 12:30	**Industry-Supported Symposium 5**
◆ 12:35 – 13:47	**Oral Communications X · Epidemiology, Outcomes & Health Disparities**
◆ 13:50 – 14:15	**General Assembly & Prize & Closing Ceremony**
◆ 14:15	**Grab & Go Lunch**

Scientific Program

Thursday, October 8

09:00 – 09:30 — **Welcome Coffee**

09:30 – 10:00
Kino 10

OPENING & WOLFRAM STERRY LECTURE

Congress Opening

E. Papadavid · E. Guenova · M. Battistella · C. Assaf

Wolfram Sterry Lecture

Chalid Assaf · Krefeld, Germany

10:05 – 11:05
Kino 10

ORAL COMMUNICATIONS I

Molecular & Microbial Biomarkers

Chairs: M. Bagot, M. Vermeer, E. Guenova

O-001 – Co-existing malignant subclones maintain a balance between Staphylococcus aureus-induced aggressiveness and intrinsic drug resistance
Terkild Brink Buus, Copenhagen, Denmark

O-002 – Mapping the Spatial Immune Landscape in Sézary Syndrome: Insights into Moderate and Progressive Prognoses
Marie Chevalier, Leiden, The Netherlands

O-003 – Transcriptomic Profiling Reveals Distinct Molecular States Across the Spectrum of Erythroderma
Marta Rodríguez, Madrid, Spain

O-004 – Skin bacteriome and mycobiome signatures in mycosis fungoides
Magdalena Łyko, Wroclaw, Poland

O-005 – Global Proteomic Identification of Diagnostic Biomarkers in Early-Stage Mycosis Fungoides
Pia Rude Nielsen, Herlev, Denmark

11:10 – 11:40
Kino 10

Industry-Supported Symposium 1

11:40 – 12:45 — **Lunch**

12:45 – 13:15
Kino 10

KEYNOTE LECTURE

CD30 as a Target Molecule in the Diagnosis and Therapy of Lymphomas

Harald Stein · Berlin, Germany

13:20 – 14:20
Kino 10

ORAL COMMUNICATIONS II

Tumor Microenvironment & Immune Evasion

Chairs: A. de Masson, N. Nikbakht, T. B. Buus

O-006 – Subcellular immune interactions suggest MHC class I related mechanism of immune evasion in CTCL
Pacome Prompsy, Lausanne, Switzerland

O-007 – Targeting the SLAMF5 (CD84) Axis Reprograms the Immunosuppressive Tumor Microenvironment to Overcome Immune Evasion in Cutaneous T-Cell Lymphoma
Christiane Querfeld, Duarte, USA

O-008 – Mycosis fungoides exosomes promote M1 macrophage dysfunction and polarization to M2 via CD47–SIRPα
Lilach Moyal, Petach Tikva, Israel

O-009 – B-Cells Are Associated with Aggressive Cases in Cutaneous T-Cell Lymphoma and a Distinct Spatio-Temporal Composition of the Tumor Microenvironment
Sabine Oganesian, Munich, Germany

O-010 – Development of a Three-Dimensional Skin Organ Culture Model for Cutaneous T-Cell Lymphoma
Neda Nikbakht, Atlanta, USA

14:25 – 15:25
Kino 10

Industry-Supported Symposium 2

15:25 – 15:55

Coffee Break

15:55 – 16:25
Kino 10

KEYNOTE LECTURE

Skin barrier stress, bacteria, and TCRVb chains in cutaneous T cell lymphoma

Niels Ødum · Copenhagen, Denmark

16:30 – 17:20
Kino 10

ORAL COMMUNICATIONS III

Diagnostic Classification & AI-Assisted Tools

Chairs: W. Kempf, M. Battistella, E. Papadavid, R. Moritz

O-011 – Towards a unified classification of primary cutaneous lymphomas
Rein Willemze, Leiden, The Netherlands

O-013 – Patient-level artificial intelligence for mycosis fungoides detection from clinical photographs: calibrated triage and high-sensitivity imbalance-aware screening
Alfonso Gotor-Rivera, Madrid, Spain

O-014 – When a Sézary peripheral blood population is not Sézary syndrome: our experience of T-cell clones of uncertain significance.
Duncan Murray, Birmingham, UK

O-015 – TRBC1 Immunohistochemistry as a First-Line Surrogate Clonality Test in Cutaneous T-Cell Lymphomas: Diagnostic Performance and Reduced Molecular Testing Across Subtypes
Anna Sarah Erem, Boston, USA

Scientific Program

Thursday, October 8

17:35 – 18:35
Kino 2

POSTER SESSION I

Best Poster Spotlight: Selected Poster Presentations

Inside the Tumor: Microenvironment, Immunology & Molecular Drivers

Chairs: S. Whittaker, S. Theurich

PS-001 – Spatial profiling of macrophages in mycosis fungoides (A-110)
Berenice Fischer, Stockholm, Sweden

PS-002 – Ceramide Alterations and Barrier Impairment in Mycosis Fungoides: Insights from a Cross-Sectional Study of Lipid and Microbiome Composition (A-233)
Elise Suzanne Maria Beljaards, Leiden, The Netherlands

PS-003 – Comprehensive preclinical Characterization of DT-7012, a Highly Differentiated Anti-CCR8 Depleting Antibody in CTCL (A-294)
Hélène Lelièvre, Bordeaux, France

PS-004 – Repurposed STAT3 inhibitors exhibit anti-CTCL activity (A-334)
Neda Nikbakht, Atlanta, USA

PS-005 – LAIR1 and THEMIS are novel tumor-specific markers in cutaneous T-cell lymphoma (A-157)
Ruben van Ardenne, Leiden, The Netherlands

PS-006 – Oxidative Phosphorylation: A Potential Achilles' Heel of Sézary Cells (A-269)
Carel Cherfan, Bordeaux, France

PS-007 – Integrated profiling of macrophage- and natural killer cell-associated transcriptional programs identifies coordinated innate immune signatures in mycosis fungoides (A-322)
Saja Asakrah, Atlanta, USA

PS-008 – Investigating Natural Killer Cell Dysfunction in a Cutaneous T-Cell Lymphoma Spheroid Model (A-156)
Despoina Tsakona, Stockholm, Sweden

PS-009 – The effect of Mogamulizumab in skin and blood of CTCL patients assessed using spectral flow cytometry and imaging mass cytometry (A-246)
Veerle Merkus, Leiden, The Netherlands

PS-010 – Investigating Tumor infiltrating lymphocyte antigen specificity in cutaneous T-cell lymphoma using single cell sequencing and a nanoluciferase Jurkat reporter system (A-363)
Amanpreet Kaur, Duncan Murray, Birmingham, UK

17:35 – 18:35
Kino 3

POSTER SESSION II

Best Poster Spotlight: Selected Poster Presentations

Decoding the Clone: Genomics, Clonality & Risk Stratification

Chairs: S. Geller, M. Hummel

PS-011 – Evaluating T-Cell Clonality In Skin Using a Quantitative TRBC1-Clonality Score (A-144)
Christoph Iselin, Linz, Austria

PS-012 – Characterization of the Genomic Complexity of Cutaneous T-cell Lymphoma with Blood Involvement (CTCL-BI) Using Optical Genome Mapping (A-170)
Pablo Mozas, Barcelona, Spain

PS-013 – CLIPI Risk Score Has Relevance At Anytime Point In Advanced MF/SS To Predict Outcomes and Influence Treatment Choices (A-335)
Julia J. Scarisbrick, Birmingham, UK

PS-014 – Development of a Unified Prognostic Index Across All Stages of Mycosis Fungoides and Sézary Syndrome: Results from the U.S. BEACON Consortium (A-257)
Pamela Allen, Decatur, USA

PS-015 – scRNA-seq characterisation of primary cutaneous Marginal Zone Lymphomas supports the need for differentiation between class-switched and non-class-switched cases (A-240)
Sabina Gansberger, Vienna, Austria

PS-016 – Combined TCR Repertoire Sequencing and Clinical Profiling Identifies Prognostically Distinct Subgroups in Cutaneous T-Cell Lymphomas (A-289)
Erika Morsia, Ancona, Italy

PS-017 – Pathway analysis of gene expression reveals immune reprogramming in patients with CTCL treated with mogamulizumab (MOGA-2MG-Q4W) (A-232)
Christiane Querfeld, Duarte, USA

PS-018 – Patch Versus Plaque in Mycosis Fungoides: A Paired Biopsy Study (A-345)
Pieter Valkema, Leiden, The Netherlands

PS-019 – Clones Across the Clinical Spectrum: Exploring Clonality in Patch, Plaque, Tumor, Erythrodermic Cutaneous T-cell Lymphoma in the PROCLIPI cohort (A-341)
Bashir Abraham, Birmingham, UK

PS-020 – Highest diagnostic accuracy of TCR Vβ repertoire analysis in T-cell clonality assessment (A-281)
Johannes Woltsche, Graz, Austria

18:45 – 20:45

EVENING

Welcome Reception

Not affiliated with the main CME program

Scientific Program

Friday, October 9

08:00 – 08:30
Kino 10

Industry-Supported Symposium 3a

08:30 – 09:30
Kino 10

ORAL COMMUNICATIONS IV

Imaging, Staging & Prognostic Tools

Chairs: R. Willemze, P. L. Ortiz Romero, M. Wobser, L. Geskin

O-016 – Red is Red: Confluent Erythema <80% BSA Associated with Advanced Stage Disease & Worse Outcomes than Patch/Plaque MF in the PROCLIPI Study, Should the term Confluent Erythema Replace Erythroderma?
Julia J. Scarisbrick, Birmingham, UK

O-017 – Multi-Harmonic Imaging-Based Automated Recognition of Cutaneous T-Cell Lymphoma
Yi-Chien Tsai, Linz, Austria

O-018 – Beyond N Stage: Exploring Prognostic Impact of Lymph-Node Biomarkers on Overall Survival in Mycosis Fungoides and Sézary Syndrome using the PROCLIPI Cohort
Alejandro Gru, New York, USA

O-019 – Histological triage of early-stage mycosis fungoides using a weakly supervised deep learning-based model: a multicentre, external validation, and clinical utility study
Thom Doeleman, Leiden, The Netherlands

O-020 – Beyond PROCLIPI: independent molecular predictors of early mortality in tumor-stage mycosis fungoides
Marcos Rebollo-González, Madrid, Spain

09:35 – 10:35
Kino 10

Industry-Supported Symposium 3

10:35 – 10:55

Coffee Break

10:55 – 11:55
Kino 10

ORAL COMMUNICATIONS V

Therapeutic Innovations — Mogamulizumab in Focus

Chairs: Y. Kim, P. Quaglino, S.Rozati

O-021 – Linking CTCL cell biology with response and resistance to mogamulizumab
Luisa Tengler, Mannheim, Germany

O-022 – CD39, CD73, and CD38 as Longitudinal Biomarkers of Disease Monitoring and Immune Remodelling During Mogamulizumab Therapy in Sézary Syndrome
Sara Marchisio, Turin, Italy

O-023 – Skin and Blood Immune Profiling Predicts Mogamulizumab Response in Sézary syndrome
Hélène Moins-Teisserenc, Paris, France

O-024 – Final results from the German "Mogamulizumab In a Non-interventional study to evaluate the safety and outcome in mycosis fungoides and Sézary syndrome Treatment" (MINT) study
Chalid Assaf, Krefeld, Germany

O-025 – Efficacy and outcomes of mogamulizumab in mycosis fungoides/Sézary syndrome with large cell transformation: a multicenter retrospective analysis
Maxime Battistella, Paris, France

12:00 – 12:30
Kino 10

KEYNOTE LECTURE

Timing Is Everything: Circadian Clocks in Cancer Biology and Therapy

Angela Relógio · Hamburg/Berlin, Germany

12:30 – 13:30

Lunch

13:30 – 14:30
Kino 10

ORAL COMMUNICATIONS VI

Skin-Directed Therapies

Chairs: R. Cowan, A. Osmancevic, F. Trautinger, K. Elsayad

O-026 – Single-fraction ultrahypofractionated total skin electron beam (TSEB) with 4 Gy achieves high early response rates with very low toxicities in patients with CTCL and may improve care delivery in high-volume centers by reducing hospital visits
Khaled Elsayad, Marburg, Germany

O-027 – Clinical factors associated with response to low-dose total skin electron beam therapy: a multi-institutional study by ILROG
David Rene Steike, Münster, Germany

O-028 – Immune and transcriptomic signatures of response and treatment-associated dermatitis in chlormethine gel-treated mycosis fungoides patients
Eleni-Kyriaki Vetsika, Athens, Greece

O-029 – Antimicrobial activity of chlormethine gel against Staphylococcus aureus in an in vitro microbial challenge hold-time study
Emmanuella Guenova, Linz, Austria

O-030 – Update on outcomes of nonmyeloablative allogeneic stem cell transplantation for Mycosis Fungoides and Sézary Syndrome and high incidence of GVHD in patients treated with prior Mogamulizumab.
Stephen Morris, London, UK

Scientific Program

Friday, October 9

14:35 – 15:35
Kino 10

ORAL COMMUNICATIONS VII

Novel Targeted Agents

Chairs: C. Querfeld, A. Cozzio, J. Nicolay, O. Akilov

O-031 – CD39 expression is associated with enhanced JAK/STAT3 signaling and responsiveness to ruxolitinib in Sézary syndrome
Liyun Lin, Turin, Italy

O-032 – Hsp90 inhibition by ganetespib in cutaneous T-cell lymphoma
Paul Beltzig, Mannheim, Germany

O-033 – A pilot study to assess safety and efficacy of tofacitinib 2% cream in the treatment of early-stage mycosis fungoides
Julia Dai, Houston, USA

O-034 – A phase 1, multicenter, open-label, prospective, first-in-human dose-escalation clinical trial of anti-CCR8 monoclonal antibody DT-7012 in patients with relapsed or refractory cutaneous T-cell lymphomas (CTCL) CITY
Marie Beylot-Barry, Bordeaux, France

O-035 – Nemolizumab for refractory pruritus in Mycosis Fungoides and Sézary syndrome
Marie Beylot-Barry, Bordeaux, France

15:35 – 15:55

Coffee Break

15:55 – 16:55
Kino 2

POSTER SESSION III

Best Poster Spotlight: Selected Poster Presentations

Mapping the Disease Course: Prognosis, Outcomes & Real-World Epidemiology

Chairs: G. Dobos, U. Wehkamp

PS-021 – Patients with mycosis fungoides and Sézary syndrome report meaningful improvements in symptom burden and health-related quality of life during mogamulizumab treatment in real-world practice: findings from the PROSPER study (A-151)
Julia Scarisbrick, Birmingham, UK

PS-022 – Clinical Characteristics and Outcomes of Patients with Mycosis Fungoides and Sézary Syndrome with 'Nx' Nodal Stage: Results from the United States BEACON Consortium (A-250)
Eric Mou, Iowa City, USA

PS-023 – EORTC CLTG study on patients with primary cutaneous T-cell lymphoma and a secondary hematologic neoplasm (A-290)
Susanne Melchers, Mannheim, Germany

PS-024 – Racial and Ethnic Disparities in Mycosis Fungoides and Sézary Syndrome in North America: A systematic review (A-209)
Ayomide Lawal, Essex, UK

PS-025 – International study of mycosis fungoides and Sézary syndrome (MF/SS) with large-cell transformation (LCT) demonstrates clinical heterogeneity, with prognostic advantage for patients with unifocal skin-only LCT. (A-344)
Erma Qazi, London, UK

PS-026 – Colour Lines in Cancer? Exploring Race/Ethnicity as a Determinant of Outcomes in Cutaneous T-Cell Lymphomas using the Global PROCLIPI Cohort (A-348)
Abraham E. Bashir, Birmingham, UK

PS-027 – Development of a national multicentre multimodal database for early-stage mycosis fungoides (A-266)
Adrien Duran, Bordeaux, France

PS-028 – Treatment trends in early-stage mycosis fungoides: updated results from the PROCLIPI cohort (A-165)
Gabriele Roccuzzo, Turin, Italy

PS-029 – Health-Related Quality of Life in Cutaneous T-Cell Lymphoma: Insights From Patient-Reported Outcomes (A-326)
Melanie Scholl, Baltimore, USA

PS-030 – How Long Should We Watch? Long-Term Outcomes in Primary Cutaneous Marginal Zone and Follicle Centre Lymphoma - A UK Multicentre Study (A-337)
Abraham E. Bashir, Birmingham, UK

15:55 – 16:55
Kino 3

POSTER SESSION IV

Best Poster Spotlight: Selected Poster Presentations

New Horizons in Therapy: Targeted, Cellular & Skin-Directed Treatments

Chairs: D. Klemke, S. Mathas

PS-031 – Three Decades of Systemic Retinoids in Cutaneous T-Cell Lymphoma: Defining Their Role in Contemporary Multimodal Management (A-173)
Toan Bui, Baltimore, USA

PS-032 – Radiotherapy and Maintenance Pegylated Interferon Therapy for Mycosis Fungoides: The RAMSIS Prospective Observational Study (A-103)
Khaled Elsayad, Marburg, Germany

PS-033 – Treatment Outcomes of Total Skin Electron Beam Therapy for Cutaneous T-cell Lymphoma in Austria: A Retrospective Study (A-208)
Stefanie Porkert, Vienna, Austria

PS-034 – Real-world safety of systemic JAK inhibition in patients with mycosis fungoides and Sézary Syndrome (A-253)
Rishabh Lohray, Houston, USA

PS-035 – Nemolizumab for symptom-focused control of severe, therapy-refractory pruritus in advanced cutaneous T-cell lymphoma: a real-world case series (A-248)
Yenny Angela, Minden, Germany

Scientific Program

Friday, October 9

PS-036 – Blood Response to Brentuximab Vedotin in Patients with Mycosis Fungoides and Sézary Syndrome with B2 Blood Involvement (A-325)
Selena Sheth, Houston, USA

PS-037 – Chimeric antigen receptor T-cell therapy in cutaneous B cell lymphoma: experience of the French Cutaneous Lymphoma Study Group (A-299)
Jeremie Delaleu, Paris, France

PS-038 – Impact of ruxolitinib for graft-versus-host disease on cutaneous and systemic lymphoma relapse following allogeneic hematopoietic cell transplantation (A-286)
Shamir Geller, New York, USA

PS-039 – Time-dependent treatment responses to chlormethine gel in mycosis fungoides: A systematic review (A-283)
Joanna Panczyszyn, Berlin, Germany

PS-040 – Updated Clinical Data from the Phase 1/2 Study of Dibotatug (DR-01), a Non-Fucosylated Anti-CD94 Antibody, in Patients with Relapsed/Refractory Cytotoxic T/NK cell Lymphomas (A-200)
Nathan Roberts, Charlottesville, USA

19:00 – 19:30
Kino 10

AFTER HOURS · KEYNOTE
EORTC Cutaneous Lymphoma Group: Past, Present and Future
Rein Willemze · Leiden, The Netherlands

19:30 – 20:00
Kino 10

AFTER HOURS · AWARDS
Travel- and Young Investigator Awards
Chalid Assaf · Rein Willemze · Julia Scarisbrick

20:00 – 22:30

AFTER HOURS · DINNER
Conference Dinner & Networking
Not affiliated with the main CME program

PROGRAM

Scientific Program

Saturday, October 10

08:15 – 09:00
Kino 10

Patient Forum

Financial support for this session was provided through an unrestricted grant from Kyowa Kirin

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09:00 – 10:00
Kino 10

ORAL COMMUNICATIONS VIII

Non-CTCL & Mimicking Disorders

Chairs: M. Beylot-Barry, C. Mitteldorf, E. Dippel, J. Junkins-Hopkins

O-036 – Disease status at hematopoietic stem cell transplantation, including skin-limited disease, and survival in blastic plasmacytoid dendritic cell neoplasm: A retrospective, multicenter cohort-study of the EORTC-CLTG
Christoph Iselin, Linz, Austria

O-037 – BCL6+ rB-LP is mimicking pcFCL in histopathology
Sabina Gansberger, Vienna, Austria

O-038 – Clinical, histological and prognostic characteristics of primary cutaneous marginal zone lymphoma / lymphoproliferative disorder (PCMZL/LPD) with IgM positivity: an international, multi-centre study.
Lindi Korpelshoek, Leiden, The Netherlands

O-039 – Exploring Prognostic Factors and Machine-Learning Performance in Localized Primary Cutaneous B-Cell Lymphoma Using the Surveillance, Epidemiology, and End Results Database
Geat Ramush, New York, USA

O-040 – Adult T-Cell Leukemia/Lymphoma Mimicking Mycosis Fungoides: A Case Report from Senegal
Rebecca Biaye, Dakar, Senegal

10:05 – 10:35
Kino 10

Industry-Supported Symposium 4

10:35 – 10:50

Coffee Break

Scientific Program

Saturday, October 10

10:50 – 11:55
Kino 10

ORAL COMMUNICATIONS IX

Patient-Reported Outcomes, Itch & Treatment Safety

Chairs: J. Scarisbrick, C. Jonak, R. Stadler

O-041 – Towards a conceptual framework for evaluating HRQoL in cutaneous lymphoma
Patricia Burke, Dublin, Ireland

O-042 – Mogamulizumab in mycosis fungoides and Sézary syndrome: clinical efficacy, blood-based predictors and significance of mogamulizumab-associated rash
Maria Tzaki, Athens, Greece

O-043 – Dupilumab Use in Atopic Dermatitis When Cutaneous Lymphoma Is Suspected: Consensus Recommendations from the EORTC Cutaneous Lymphoma Tumor Group
Joana Calvão, Coimbra, Portugal

O-044 – Quality of Life with Denileukin Diftitox-cxdl in Patients with Relapsed / Refractory Cutaneous T-Cell Lymphoma: Results from Pivotal Study 302
Christiane Querfeld, Duarte, USA

O-045 – What can we learn from RESMAIN? Methodological Pitfalls and Regulatory Lessons from the Largest Maintenance Study in Advanced CTCL
Rudolf Stadler, Minden, Germany

12:00 – 12:30
Kino 10

Industry-Supported Symposium 5

12:35 – 13:47
Kino 10

ORAL COMMUNICATIONS X

Epidemiology, Outcomes & Health Disparities

Chairs: J. Sanches, G. Dobos, N. Booken

O-046 – Erythrodermic cutaneous T-cell lymphoma (E-CTCL): clinical features, disease outcome and treatment approaches in the PROCLIPI study
Gabriele Roccuzzo, Turin, Italy

O-047 – Clinical Characterization of Racial Differences in Early- and Late-Stage Patients with Mycosis Fungoides and Sézary Syndrome: Results from the United States BEACON Consortium
Sima Rozati, Baltimore, USA

O-048 – Most second primary malignancy associations in cutaneous T-cell lymphoma fail a reverse test: bidirectional SEER analysis separates shared biology from detection bias
Joshua Kent, New York, USA

O-049 – Design and development of a tool for CLIPi calculation and risk stratification in mycosis fungoides patients using electronic health record data
Alfonso Gotor-Riviera, Madrid, Spain

O-050 – Adverse Event Reporting Patterns Across Cutaneous Lymphoma Therapies: A 5-Year Pharmacovigilance Study Using the U.S. Food and Drug Administration Adverse Event Reporting System
Geat Ramush, New York, USA

O-051 – AI-assisted TRBC1 and CD3-dim cluster analysis improves identification of malignant blood involvement and refines B-classification in mycosis fungoides and Sézary syndrome
Aris Spathis, Athens, Greece

13:50 – 14:15
Kino 10

General Assembly & Prize & Closing Ceremony

E. Papadavid · E. Guenova · M. Battistella · C. Assaf

14:15

Grab & Go Lunch

Keynote Speakers

Featured invited lectures

THURSDAY

Harald Stein
Berlin, Germany

CD30 as a Target Molecule in the Diagnosis and Therapy of Lymphomas

Harald Stein is a German pathologist and one of the leading international experts in hematopathology. He contributed fundamentally to the development of the Kiel and REAL lymphoma classifications, which later formed the basis of the WHO lymphoma classification. His research includes the discovery of the proliferation marker Ki-67 and the CD30 receptor. Stein served for many years as Director of the Institute of Pathology at the Charité Campus Benjamin Franklin in Berlin.

THURSDAY

Niels Ødum
Copenhagen, Denmark

Skin barrier stress, bacteria, and TCRVb chains in cutaneous T cell lymphoma

Niels Ødum is a Professor at the Skin Immunology Research Center at the University of Copenhagen. His research focuses on inflammatory skin diseases and cutaneous T-cell lymphomas, with a particular emphasis on immune–skin interactions and disease mechanisms. He leads interdisciplinary efforts to translate molecular insights into new therapeutic strategies.

FRIDAY

Angela Relógio
Hamburg/Berlin, Germany

Timing Is Everything: Circadian Clocks in Cancer Biology and Therapy

Angela Relógio is an internationally recognized systems biologist whose research has advanced our understanding of the circadian clock in health and disease. By combining mathematical modeling, bioinformatics, and experimental biology, she has revealed how circadian rhythms influence cancer development, progression, and treatment response. Her pioneering work on the interactions between the circadian clock, the cell cycle, and tumor biology has provided important insights for chronotherapy and personalized medicine.

FRIDAY

Rein Willemze
Leiden, The Netherlands

EORTC Cutaneous Lymphoma Group: Past, Present and Future

Rein Willemze is one of the world's leading authorities in cutaneous lymphoma and a pioneering figure whose work has shaped the field for decades. He played a key role in developing the EORTC and WHO-EORTC classifications of primary cutaneous lymphomas, which established international standards for diagnosis and classification. As former Head of Dermatology at Leiden University Medical Center and long-standing leader of the EORTC Cutaneous Lymphoma Group, he has advanced research, international collaboration, and patient care. His contributions have had a lasting global impact on the understanding and management of cutaneous lymphoma.

Speakers

Oral Communications

A

Assaf Chalid, Krefeld, Germany

B

Battistella Maxime, Paris, France
Beltzig Paul, Mannheim, Germany
Beylot-Barry Marie, Bordeaux, France
Biaye Rebecca, Dakar, Senegal
Burke Patricia, Dublin, Ireland
Buus Terkild Brink, Copenhagen, Denmark

C

Calvão Joana, Coimbra, Portugal
Chevalier Marie, Leiden, The Netherlands

D

Dai Julia, Houston, USA
Doeleman Thom, Leiden, The Netherlands

E

Elsayad Khaled, Marburg, Germany
Erem Anna Sarah, Boston, USA

G

Gansberger Sabina, Vienna, Austria
Gotor-Rivera Alfonso, Madrid, Spain
Gru Alejandro, New York, USA
Guenova Emmanuella, Linz, Austria

I

Iselin Christoph, Linz, Austria

K

Kent Joshua, New York, USA
Korpelshoek Lindi, Leiden, The Netherlands

L

Lin Liyun, Turin, Italy
Łyko Magdalena, Wroclaw, Poland

M

Marchisio Sara, Turin, Italy
Moins-Teisserenc Hélène, Paris, France
Morris Stephen, London, UK
Moyal Lilach, Petach Tikva, Israel
Murray Duncan, Birmingham, UK

N

Nielsen Pia Rude, Herlev, Denmark
Nikbakht Neda, Atlanta, USA

O

Oganesian Sabine, Munich, Germany

P

Prompsy Pacome, Lausanne, Switzerland

Q

Querfeld Christiane, Duarte, USA

R

Ramush Geat, New York, USA
Rebollo-González Marcos, Madrid, Spain
Roccuzzo Gabriele, Turin, Italy
Rodríguez Marta, Madrid, Spain
Rozati Sima, Baltimore, USA

S

Scarisbrick Julia J., Birmingham, UK
Spathis Aris, Athens, Greece
Stadler Rudolf, Minden, Germany
Steike David Rene, Münster, Germany

T

Tengler Luisa, Mannheim, Germany
Tsai Yi-Chien, Linz, Austria
Tzaki Maria, Athens, Greece

V

Vetsika Eleni-Kyriaki, Athens, Greece

W

Willemze Rein, Leiden, The Netherlands

Speakers

Poster Spotlight Presentations

A

Allen Pamela, Decatur, USA
Angela Yenny, Minden, Germany
van Ardenne Ruben, Leiden, The Netherlands
Asakrah Saja, Atlanta, USA

B

Bashir Abraham E., Birmingham, UK
Beljaards Elise Suzanne Maria, Leiden, The Netherlands
Bui Toan, Baltimore, USA

C

Cherfan Carel, Bordeaux, France

D

Delaleu Jeremie, Paris, France
Duran Adrien, Bordeaux, France

E

Elsayad Khaled, Marburg, Germany

F

Fischer Berenice, Stockholm, Sweden

G

Gansberger Sabina, Vienna, Austria
Geller Shamir, New York, USA

I

Iselin Christoph, Linz, Austria

K

Kaur Amanpreet, Birmingham, UK

L

Lawal Ayomide, Essex, UK
Lelièvre Hélène, Bordeaux, France
Lohray Rishabh, Houston, USA

M

Melchers Susanne, Mannheim, Germany
Merkus Veerle, Leiden, The Netherlands
Morsia Erika, Ancona, Italy
Mou Eric, Iowa City, USA
Mozas Pablo, Barcelona, Spain
Murray Duncan, Birmingham, UK

N

Nikbakht Neda, Atlanta, USA

P

Panczyszyn Joanna, Berlin, Germany
Porkert Stefanie, Vienna, Austria

Q

Querfeld Christiane, Duarte, USA
Qazi Erma, London, UK

R

Roccuzzo Gabriele, Turin, Italy
Roberts Nathan, Charlottesville, USA

S

Scarisbrick Julia J., Birmingham, UK
Scholl Melanie, Baltimore, USA
Sheth Selena, Houston, USA

T

Tsakona Despoina, Stockholm, Sweden

V

Valkema Pieter, Leiden, The Netherlands

W

Woltsche Johannes, Graz, Austria

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[1.] Therakos, Inc. Operator's Manual. THERAKOS™ CELLEX™ Photopheresis System. [2.] Hart JW, et al. Ther Adv Hematol. 2013;4:320-334. [3.] Wang L, et al. Front Immunol. 2018;9:2207. [4.] Ni M, et al. Front Immunol. 2019;10:547. [5.] Mankarious M, et al. Front Immunol. 2020;11:81. [6.] Dignan FL, et al. Bone Marrow Transplant. 2014;49(5):704-708.

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TAKEDA-SPONSORED SYMPOSIUM AT
EORTC-CLTG 2026

ADCETRIS® brentuximab vedotin
BRINGING Hope TO Life

Extending therapeutic options:

ADCETRIS® (brentuximab vedotin) for treatment in relapsed/refractory CTCL

Please join us at the Takeda-sponsored symposium on:
Saturday, October 10, 2026, at 10:05–10:35 CEST in the Colosseum Berlin, Berlin, Germany

Speakers:

Prof. Chalid Assaf (Chair and moderator),
Director of the Department of Dermatology, Helios Klinikum Krefeld, HMU Düsseldorf-Krefeld, Germany

Prof. Francesco Onida,
Associate Professor, Department of Oncology and Hematology-Oncology, Università degli Studi di Milano, Italy

In this symposium, Prof. Chalid Assaf and Prof. Francesco Onida will:

- Discuss the **evolving treatment landscape** in cutaneous T-cell lymphoma (CTCL), including practicalities associated with the role of cluster of differentiation 30 (CD30) expression levels and disease relapse
- Evaluate **clinical evidence supporting ADCETRIS® (brentuximab vedotin) use** beyond conventional pretreatment scenarios, including following allogeneic stem cell transplant (allo-SCT)
- Examine treatment decision-making through **real-world case studies**

Agenda

Time (CEST)	Session title
10:05—10:08	**Welcome and introductions** ***Chair:*** *Prof. Chalid Assaf*
10:08—10:18	**Role of CD30 expression levels in clinical response and decision-making: A case-based approach with ADCETRIS** ***Speaker:*** *Prof. Chalid Assaf*
10:18—10:28	**ADCETRIS treatment in the context of allo-SCT considerations: A case-based approach evaluating clinical evidence** ***Speaker:*** *Prof. Francesco Onida*
10:28—10:33	**Engage with the experts** ***Speakers:*** *All faculty*
10:33—10:35	**Meeting close** ***Chair:*** *Prof. Chalid Assaf*

In the EMA region, ADCETRIS is indicated for the treatment of adult patients with CD30+ CTCL after at least 1 prior systemic therapy. Indications vary by country. Please consult your local Prescribing Information.

ADCETRIS® 50 mg Pulver für ein Konzentrat zur Herstellung einer Infusionslösung

Wirkstoff: Brentuximab vedotin.

Zusammensetzung: 1 Durchstechflasche enthält 50 mg Brentuximab vedotin. *Sonstige Bestandteile:* Citronensäure-Monohydrat (zur pH-Wert-Einstellung), Natriumcitrat (Ph. Eur.) (zur pH-Wert-Einstellung), Trehalose-Dihydrat (Ph. Eur.), Polysorbat 80.

Anwendungsgebiete: Hodgkin-Lymphom: ADCETRIS wird angewendet bei erwachsenen Patienten mit bislang unbehandeltem CD30+ Hodgkin-Lymphom (HL) im Stadium III oder IV in Kombination mit Doxorubicin, Vinblastin und Dacarbazin (AVD); bei erwachsenen Patienten mit bislang unbehandeltem CD30+ HL im Stadium IIB mit Risikofaktoren, im Stadium III oder im Stadium IV in Kombination mit Etoposid, Cyclophosphamid, Doxorubicin, Dacarbazin, Dexamethason (BrECADD); zur Behandlung von erwachsenen Patienten mit CD30+ HL mit erhöhtem Rezidiv- oder Progressionsrisiko nach einer autologen Stammzelltransplantation (ASCT); bei der Behandlung von erwachsenen Patienten mit rezidiviertem oder refraktärem CD30+ HL: 1. nach einer ASCT oder 2. nach mindestens zwei vorangegangenen Therapien, wenn eine ASCT oder eine Kombinationschemotherapie nicht als Behandlungsoption in Frage kommt. Systemisches anaplastisches großzelliges Lymphom: ADCETRIS wird in Kombination mit Cyclophosphamid, Doxorubicin und Prednison (CHP) bei erwachsenen Patienten mit bislang unbehandeltem systemischem anaplastischem großzelligem Lymphom (sALCL) angewendet. ADCETRIS wird angewendet bei der Behandlung von erwachsenen Patienten mit rezidiviertem oder refraktärem sALCL. Kutanes T-Zell-Lymphom: ADCETRIS wird angewendet zur Behandlung erwachsener Patienten mit CD30+ kutanem T-Zell-Lymphom (CTCL) nach mindestens einer vorangegangenen systemischen Behandlung.

Gegenanzeigen: Überempfindlichkeit geg. den Wirkstoff od. einen d. sonstigen Bestandteile. Gleichzeitige Anwendung von Bleomycin: verursacht pulmonale Toxizität.

Nebenwirkungen: Monotherapie: *Sehr häufig:* IInfektion[a], Infektion der oberen Atemwege, Neutropenie, periphere sensorische Neuropathie, periphere motorische Neuropathie, Husten, Dyspnoe, Übelkeit, Diarrhö, Erbrechen, Obstipation, Abdominalschmerz, Ausschlag[a], Pruritus, Arthralgie, Myalgie, Ermüdung/Fatigue, Fieber, Reaktion im Zusammenhang mit einer Infusion [a], Gewicht erniedrigt. *Häufig:* Herpes zoster, Pneumonie, Herpes simplex, orale Candidose, Anämie, Thrombozytopenie, Hyperglykämie, Schwindelgefühl, erhöhte Alanin-Aminotransferase/Aspartat-Aminotransferase (ALT/AST), Alopezie, Rückenschmerzen, Schüttelfrost; *Gelegentlich:* Pneumocystis jirovecii-Pneumonie, Staphylokokken-Bakteriämie, Zytomegalovirusinfektion oder Reaktivierung dieser Infektion, Sepsis/septischer Schock, febrile Neutropenie, anaphylaktische Reaktionen, Tumorlyse-Syndrom, demyelinisierende Polyneuropathie, akute Pankreatitis, Stevens-Johnson-Syndrom/Epidermolysis acuta toxica; *Nicht bekannt:* Progressive multifokale Leukoenzephalopathie, Arzneimittelwirkung mit Eosinophilie und systemischen Symptomen (DRESS), Extravasation an der Infusionsstelle[c]. Kombinationstherapie: *Sehr häufig:* Infektion[a], Infektion der oberen Atemwege, Neutropenie[a], Anämie, febrile Neutropenie, Appetit vermindert, Schlaflosigkeit, periphere sensorische Neuropathie[a], periphere motorische Neuropathie[a], Schwindelgefühl, Husten, Dyspnoe, Übelkeit, Obstipation, Erbrechen, Diarrhö, Abdominalschmerz, Stomatitis, Alopezie, Ausschlag[a], Knochenschmerzen, Arthralgie, Myalgie, Rückenschmerzen, Ermüdung/Fatigue, Fieber, Gewicht erniedrigt; *Häufig:* Pneumonie, orale Candidose, Sepsis/septischer Schock, Herpes zoster, Thrombozytopenie, Hyperglykämie, erhöhte Alanin-Aminotransferase/Aspartat-Aminotransferase (ALT/AST), Pruritus, Reaktion im Zusammenhang mit einer Infusion [a], Schüttelfrost; *Gelegentlich:* Herpes simplex, Pneumocystis jirovecii-Pneumonie, anaphylaktische Reaktionen, Tumorlyse-Syndrom, akute Pankreatitis, Stevens-Johnson-Syndrom[b]. In Kombination mit anderen Chemotherapeutika (Etoposid, Cyclophosphamid, Doxorubicin, Dacarbazin und Dexamethason): *Gelegentlich:* Tachykardie.

[a] Entspricht der Zusammenfassung der bevorzugten Begriffe. [b] Toxisch epidermale Nekrolyse wurde im Bereich der Kombinationstherapie nicht berichtet. [c] Ein Paravasat kann zu Hautrötung, Schmerzen, Schwellung, Blasenbildung, Exfoliation und Zellulitis an der bzw. um die Infusionsstelle herumführen.

Verschreibungspflichtig

Takeda Pharma A/S, Dänemark

Stand der Information: Juni 2025

C-APROM/INT/ADCE/0304 | Date of preparation: August 2026

This promotional symposium is organized and fully funded by Takeda Oncology, and is intended for healthcare professionals only. Takeda medicines will be discussed during this symposium. Prescribing Information can be found above and will be available during the symposium.

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Job Number: GL-LED-0126 Date of preparation: September 2026

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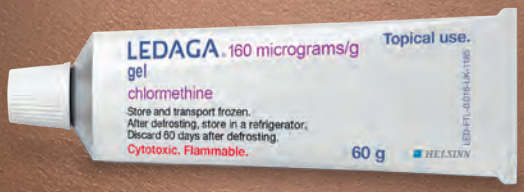
for MF-CTCL



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Specifically for MF-CTCL

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The indicative price for LEDAGA® is 3,644.58€ per unit in Germany. This price may vary between countries.

1. Ledaga SmPC;
2. Geskin LJ et al. Dermatol Ther (Heidelb) 2021;11(4):1095-1106;

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CITIUS Oncology™

INNOVATION IN
CUTANEOUS T-CELL LYMPHOMA (CTCL)

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Satellite Symposia

Thursday, October 08

11:10 – 11:40

More than chemotherapy: Exploring CL-gel, barrier biology, and the MF-CTCL skin ecosystem

11:10–11:15
Opening: chemotherapy beyond Tumor-cell killing
Prof. Christiane Querfeld

11:15–11:25
Novel mechanistic insights into the skin barrier - (dys)function in mycosis fungoides
Prof. Robert Rissmann

11:25–11:40
CL-gel MoA, TME impact and microbiome-related evidence
Prof. Emmanuella Guenova

Close
Final synthesis and Q&A prompt

14:25 – 15:25

ECP in CTCL Management: Learning from Real-World Experience in Clinical Practice

Moderators:
Prof Emmanuella Guenova, Johannes Kepler University Hospital Linz, Austria
Prof Jan Nicolay, University Medical Centre Mannheim, Germany

14:25 – 14:30
Introduction
Prof Emmanuella Guenova, Johannes Kepler University Hospital Linz, Austria
Prof Jan Nicolay, University Medical Centre Mannheim, Germany

14:30 – 14:45
Evidence-based role of ECP within CTCL therapy according to clinical guidelines
Prof Jan Nicolay, University Medical Centre Mannheim, Germany

14:45 – 15:05
Patient case and panel discussion
Dr Erma Qazi, Queen Elizabeth Hospital Birmingham, UK

15:05 – 15:25
Patient case and panel discussion
Dr Susanne Melchers, University Medical Centre Mannheim, Germany

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Satellite Symposia

Friday, October 09

08:00 – 08:30

IDEOGEN

Advanced CTCL: Interdisciplinary Case Discussion and Treatment Challenges

8:00-8:12
CTCL in Pathology – Challenges and Requirements
Prof. Christina Mitteldorf, Göttingen, Germany

8:12-8:15
Q&A

8:15-8:27
CTCL in Clinical Practice: Evidence-Based Treatment Approaches
Prof. Selami Kocak Toprak, Ankara, Türkiye

8:27-8:30
Q&A

09:35 – 10:35

KYOWA KIRIN

Risk Stratification in MF and SS Using CLIPI: Real-world Evidence and Implications for Clinical Practice

09:35–09:40
Welcome and Introduction
Prof. Chalid Assaf

09:40–09:55
Evolving Prognostics in MF and SS
Prof. Julia Scarisbrick

09:55–10:05
CLIPI Implications for Clinical Practice
Prof. Chalid Assaf

10:05–10:20
Informing Treatment Decisions with Real-World Evidence *Prof. Chalid Assaf*

10:20–10:30
Managing Rarer CTCL Subtypes with Limited Data
Prof. Pablo Luis Ortiz-Romero

10:30–10:35
Q&A and Close
Prof. Chalid Assaf

Satellite Symposia

Saturday, October 10

10:05 – 10:35

Extending Therapeutic Options: ADCETRIS® (brentuximab vedotin) for Treatment in Relapsed/Refractory CTCL

10:05 – 10:08
Welcome and Introductions
Chair: *Prof. Chalid Assaf*

10:08 – 10:18
Role of CD30 expression levels in clinical response and decision making: A case-based approach with ADCETRIS
Speaker: *Prof. Chalid Assaf*
Session objectives:

- *Provide an overview of the role of CD30+ expression in CTCL, discussing real-world data from Blazejak C, et al. Cancers 2026 which demonstrated the effectiveness of ADCETRIS in pretreated patients with advanced-stage CTCL and low CD30 expression*
- *Present a patient case highlighting the practical aspects of ADCETRIS treatment, including treatment duration, adverse event management and combination therapy*

10:18 – 10:28
ADCETRIS treatment in the context of allo-SCT considerations: A case-based approach evaluating clinical evidence
Speaker: *Prof. Francesco Onida*
Session objectives:

- *Summarize the role of ADCETRIS in the context of allo-SCT considerations, using real-world data from de Masson A, et al. Lancet 2023 which demonstrated that allogeneic hematopoietic SCT, compared with non-allogeneic hematopoietic SCT treatment, was associated with significantly longer progression-free survival in advanced-stage CTCL*
- *Present a patient case in which ADCETRIS was used in a patient with CD30+ CTCL after prior systemic therapy, in the context of allo-SCT considerations*

10:28 – 10:33
Engage with the Experts (Q&A)
Speakers: *All faculty*

10:33 – 10:35
Meeting close
Chair: *Prof. Chalid Assaf*

12:00 – 12:30

Last update on the treatment of cutaneous lymphomas: expert perspectives

Speakers: *Evangelia Papadavid, Julia Scarisbrick, Pietro Quaglino*

PRACTICAL

General Meeting Information

Logistics, registration and accreditation

GENERAL INFORMATION

The CLTG Annual Meeting has become the world's leading and most comprehensive forum dedicated to the intersection of skin cancer and inflammation—specifically, cutaneous lymphoma. The program will feature international experts presenting the latest findings from clinical and preclinical studies and results from recent clinical trials.

The sessions will cover cutting-edge developments in basic science, define high-priority research and development goals, address current challenges in patient care, and explore strategies to improve the diagnosis, treatment, and management of skin lymphomas and their inflammatory mimickers.

Keynote and invited speakers will provide expert overviews of emerging scientific trends that are expected to shape the future of the field. By the conclusion of the meeting, participants will be equipped with a comprehensive update on this highly specialized and evolving area of medicine.

WORKING HOURS

DAY	REGISTRATION DESK	EXHIBITION
Thursday · 8 October 2026	08:30 – 17:30	11:30 – 17:30
Friday · 9 October 2026	07:30 – 17:00	10:00 – 17:00
Saturday · 10 October 2026	08:00 – 13:00	10:00 – 14:00

REGISTRATION FEES

CATEGORY	EARLY-BIRD	REGULAR
EORTC Member	425 €	**525 €**
Non-Member · Physician	595 €	**695 €**
Residents, Trainees, Nurses, Students	240 €	**315 €**
Industry · Sponsors	795 €	**950 €**
Industry (non-sponsoring)	2.500 €	**2.950 €**

General Meeting Information

Logistics, registration and accreditation

REGISTRATION

Onsite registration counter

For participants registering and paying their registration fees onsite: an onsite registration form must be completed. Payment by credit card (VISA & Mastercard accepted). EURO (€) only.

THE REGISTRATION FEES INCLUDE

- Delegate's badge
- Admission to the exhibition hall
- Certificate of attendance
- Coffee breaks and lunches
- Admission to the scientific sessions
- Welcome reception
- Accreditation

NAME BADGES

Participants will receive their badges onsite at the registration desk. The meeting badge should be worn at all times during the meeting to ensure access to the relevant areas, including scientific sessions, coffee breaks and lunches, exhibition area, and social activities.

CERTIFICATE OF ATTENDANCE

All registered delegates will receive a Certificate of Attendance.

ACCREDITATION

CME credits will be requested at the European Accreditation Council for Continuing Medical Education (EACCME®). Each medical specialist should claim only those hours of credit that he/she actually spent in the educational activity. Through an agreement between the Union Européenne des Médecins Spécialistes and the American Medical Association, physicians may convert EACCME® credits to an equivalent number of AMA PRA Category 1 Credits™.

PRACTICAL

General Meeting Information

Presentation Guidelines

PRESENTATION GUIDELINES

General

The official language of the EORTC-CLTG 2026 Annual Meeting is English. The time reserved for each presentation varies according to the presentation and session type.

Oral Presentations

Oral presentations are organized in sessions according to the topic of each session. Authors are kindly asked to follow the assigned time strictly.

Supported file types · Presentation: PPT, PPA, PPTA, PPTX, PDF · Video: AVI, MPG, MKV, MOV, MP4, WMV · Audio: WMA, MP3, WAV. 16:9 ratio recommended (4:3 also supported). MAC users: please bring your own adapter & charger.

PRESENTATION PREVIEW DESK

You will be assisted at the Presentation preview desk by the technicians, who will help you upload your presentation to the intranet. Your presentation must be uploaded as much in advance as possible, but no later than TWO HOURS BEFORE the beginning of the respective session. Always double-check video files and multimedia links.

IN THE AUDITORIUM

Your presentation will be transferred directly to the Auditorium through the intranet. All speakers are requested to be present in the lecture room 10 MINUTES BEFORE the session starts to meet the session chair. Bringing your own computer to the lecture room is not possible — all presentations must be uploaded at the Presentation Preview desk beforehand.

POSTER INSTRUCTIONS

DIMENSIONS

A0 · Portrait

84.1 cm (width) × 118.9 cm (height)

Posters on several sheets are not advised.

TIMELINE

Mounting: Thursday 8 Oct, 09:00 — 12:00

Removal: Saturday 10 Oct, 11:30

IMPORTANT NOTES

- Posters are numbered and must be mounted to the corresponding poster board.
- Each board will have a poster number printed
- Material for mounting will be provided on site.
- Set-up, removal and storage of posters are the presenters' responsibility.
- Posters remaining after the removal time will be disposed of by the conference staff.
- All abstracts will be published in the **Dermato Journal on Skin Cancer**.

PRACTICAL

Useful Information

Berlin essentials for visitors

LANGUAGE

English Only

The official language of the EORTC-CLTG 2026 Annual Meeting is English. Simultaneous translation will not be provided.

CURRENCY

Euro (€)

Major credit cards are widely accepted in restaurants, shops, and hotels.

TIME ZONE

CET / CEST

Berlin is in the Central European Time zone (UTC+1). During Daylight Saving Time in October, CEST (UTC+2) applies until the last Sunday of October.

ELECTRICITY

230 V · 50 Hz

Plug types C and F (European standard) are used.

INTERNET

Free Wi-Fi

Free wireless internet will be available throughout the congress venue during conference hours.

MOBILE PHONES

Silent Mode

All participants are kindly asked to switch their mobile phones to silent mode during scientific sessions.

SMOKING

Outdoor Only

Smoking is not permitted in any indoor areas of the congress venue. Designated outdoor smoking areas may be available.

WEATHER

6 – 14 °C

October in Berlin is generally cool and crisp. Rain is possible — a light jacket and umbrella are recommended.

EMERGENCY

112 / 110

European emergency number: 112. Police: 110. The conference secretariat will assist with any urgent matters during congress hours.

Social Program

Networking, dinner and reception

EVENING · DAY ONE

Welcome Reception

Thursday · 8 October · 18:45 — 20:45
Colosseum Berlin

Following the first conference day, all participants are warmly invited to join us for the Welcome Reception at the congress venue. Connect with colleagues from across the world while enjoying refreshments in the historic atmosphere of the Colosseum Berlin.

Not affiliated with the main CME program

EVENING · DAY TWO

Conference Dinner

Friday · 9 October · 20:00 — 22:30
Colosseum Berlin

The Conference Dinner offers a memorable evening of dining and networking. The After-Hours Program starts at 19:00 with a special keynote and the Travel- and Young Investigator Awards.

This year's dinner will transport you to **Latin America**, with vibrant music, infectious rhythms, and an atmosphere inspired by the rich cultures of South America. It will be the perfect opportunity to reconnect with colleagues and friends, build new professional relationships, and continue inspiring scientific conversations in a relaxed and memorable setting.

Please note that a separate ticket is required to take part in the Conference Dinner.

Not affiliated with the main CME program

Sponsors' Acknowledgement

With thanks to our industry partners

The EORTC-CLTG Annual Meeting 2026 is made possible by the generous support of our industry partners. We gratefully acknowledge their contribution to the field of cutaneous lymphoma.

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With thanks to our industry partners

Kyowa Kirin is global specialty pharmaceutical company delivering life-changing value for people impacted by under-diagnosed and under-served diseases.

We have invested in drug discovery and biotechnology innovation for more than 75 years. Right now, we are working to engineer the next generation of antibodies and cell and gene therapies with the potential to help people affected by rare diseases.

Guided by our Japanese heritage and driven by cutting-edge technologies, we develop innovative treatments for people living with rare diseases in bone and mineral disease, haematology and oncology. These are conditions that are frequently overlooked, chronically underserved and life-altering for those affected and their loved ones.

Therakos UK Ltd specialises in photopheresis technology and has been providing ECP (Extracorporeal Photopheresis) treatment for over 35 years.

The THERAKOS™ CELLEX™ Photopheresis System is the world's only fully integrated and validated ECP system and is used by over 300 treatment centres in over 30 countries worldwide.

Beyond the THERAKOS™ CELLEX™ Photopheresis System, Therakos Healthcare Limited offers a comprehensive range of support services to help enable healthcare professionals (HCPs) to deliver ECP immunomodulation to patients.

Please see www.therakos.eu/isi for approved Indications and Important Safety Information.
To learn more about this product visit www.therakos.eu.

Helsinn is a global pharmaceutical company that builds, manufactures, launches, and commercializes products to improve the quality of life for patients with cancer and chronic diseases, with a focus on supportive care, oncology, and dermato-oncology.

Headquartered in Lugano, Switzerland, Helsinn has direct commercial operations in the U.S., manufacturing operations in Ireland, offices in China and a network of trusted partners enabling a commercial presence in 90 countries.

Established in 1976, Helsinn is a third-generation family-owned company with broad pharmaceutical and technical expertise. For half a century, Helsinn has been operating with integrity, passion, and quality. The company continuously fosters innovation for its patients and embraces sustainable growth as a core element of its strategic vision.

To learn more about Helsinn, please visit www.helsinn.com or follow us on LinkedIn and X.

Sponsors' Acknowledgement

With thanks to our industry partners

At Takeda Oncology, we are united by our aspiration to cure cancer, with inspiration from patients and innovation from everywhere. Drawing on decades of leadership in oncology, we work to develop innovative treatments that enhance and extend the lives of people living with cancer. We are committed to ensuring global access to our medicines, while focusing our research and development efforts on advancing medicines for hematologic, gastrointestinal and thoracic cancers.

As part of Fresenius, Fresenius Kabi specializes in lifesaving medicines, medical technologies, and solutions for critically and chronically ill patients. With more than 41,000 employees and operations in over 100 countries, we help deliver care for 450 million patients each year.

In MedTech, we are the connective tissue between patients and donors, healthcare professionals, technology, and positive outcomes. Our portfolio spans blood collection, infusion therapy, cell and gene therapy manufacturing, and nutrition. One million of our infusion pumps are currently in use in hospitals worldwide, and 25% of global blood donations are collected in our bags. Our solutions are designed to streamline workflows, reduce waste, and support consistent, high-quality care.

We drive continuous improvement through innovation and by ensuring the quality standards and supply resilience healthcare systems depend on. By empowering people and enabling healthcare professionals to do their jobs better, we help support future-ready and efficient healthcare systems.

CONTACT US

We will be pleased to help you with all your sponsorship and exhibition activities for the EORTC-CLTG Annual Meeting 2026, discuss your ideas with you, and support you in implementing them.
For further information, please contact:

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