

A. JANSSENS, MD, PhD



DEAR COLLEAGUES,

Welcome to the third issue of the BJH 2025.

For **REVIEW HEMATOLOGY** we offer two interesting manuscripts on treatment of rare diseases. The first one “**Restoring the delicate coagulation balance in haemophilia**” by **Q. Van Thillo** (Department of Thrombosis and Haemostasis, University Hospitals Leuven, Leuven) describes how rebalancing physiological anticoagulants such as anti-thrombin, tissue factor pathway inhibitor, activated protein C or S can attenuate the bleeding phenotype of patients with haemophilia and other rare bleeding disorders. The second one “**Non-myeloablative haploiden-**

tical haematopoietic stem cell transplantation (HSCT) for adult patients with sickle cell disease (SCD): Current status and future perspectives” by **M. Zwolsman *et al.*** (Department of Clinical Haematology, Amsterdam UMC, the Netherlands) shows that by optimising non-myeloablative conditioning regimens with strong lymphodepletion, haploidentical HSCTs can result in very good outcomes in adults with SCD leading to stable or improved organ function. However, the decision for transplantation is still challenging as there is still significant toxicity making extensive counselling and psychosocial support necessary.

We also selected two patient cases for **HEMATOCASE**. “**Unveiling cytokine profiles: haemophagocytic lymphohistiocytosis (HLH) induced by the combination of cemiplimab and venetoclax**” by **V. Delanote *et al.*** (Department of Haematology and Infectiology, AZ Delta General Hospital, Roeselare, and Faculty of Health Sciences, Ghent University Hospital, Ghent). This case hypothesises the potential triggering of HLH by the combination of a bcl-2 and a checkpoint inhibitor and wants to underscore the importance of vigilance when combining different cancer therapies for different malignancies in one patient. “**Clinical importance of screening for the neglected acquired von Willebrand syndrome (AVWS) in patients with myeloproliferative neoplasms: A case series**” by **B. Calcoen *et al.*** (Unit of Chemistry and Haematology, Department of Laboratory Medicine, and Unit of Haematology, Department of Internal Medicine, AZ Oostende, Ostend) is the second selected case report. The authors want to highlight that we must show a low threshold to screen for underlying AVWS within MPN to prevent both therapy related bleeding and significant haemorrhages after invasive procedures sometimes irrespective of their platelet count.

In **JOURNAL SCAN**, **E. De Wulf** (Ariez International BV, Ghent) aims to provide a snapshot of pivotal studies published in recent issues of the most important international journals focusing on haematology.

Finally, **J. Blokken** (Ariez International BV, Ghent) summarises the **NEW REIMBURSEMENTS** in haematology.

Enjoy reading this new scientific evidence,

Ann Janssens, MD, PhD
Editor-in-Chief