



The International Lung GVHD Consensus Conference 2026



23-25 SEPTEMBER 2026

CAMPUS BIOTECH, GENEVA, SWITZERLAND



Hôpitaux
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Dear Colleagues,

Over forty years ago, D. Ralph, E.D. Thomas and colleagues¹ reported a clinical syndrome of new onset severe airflow obstruction in association with chronic graft-versus-host disease in four young patients who had received marrow transplants for leukemia in Seattle, Washington. Lung biopsies revealed obliterative bronchiolitis, the fibrotic occlusion of small airways. Patients experienced debilitating breathlessness; treatment with corticosteroids did not provide objective benefit. Today, even in the era of improved prophylaxis and FDA-approved treatments for chronic GVHD, this original description of bronchiolitis obliterans syndrome - BOS - remains eerily cogent: we still do not have a cure for this highly morbid lung complication.

The impetus for a conference dedicated to lung GVHD arose out of the collective recognition that BOS is often diagnosed too late in its course for effective intervention. Since the landmark 2005 and 2014 NIH Chronic GVHD Consensus Conferences, our understanding of BOS and other potential forms of lung GVHD has grown, necessitating an updated clinical definition that would encourage early detection and treatment. Our ongoing discussions towards this update highlight how much we still need to learn about underlying disease processes and how to restore lung function.

To that end, we have convened a critical mass of experts across the disciplines of pulmonary medicine, transplant hematology, immunology, infectious diseases, radiology, and statistical science, to review the current knowledge base and identify new avenues for investigation. Our goals in Geneva are i) to synthesize our understanding of lung GVHD disease pathogenesis, ii) update the definition of lung GVHD, and iii) establish an ideal clinical trial design for lung GVHD. Central to this conference is the critical work of the Lung GVHD Consensus Project Task Force: to propose an evidence-based revision of the NIH diagnostic criteria for lung GVHD that applies across the lifespan. We hope that this will promote rigorous clinical investigation, and more importantly, benefit HCT recipients around the world.

With the expanding global reach of allogeneic hematopoietic cell transplantation, understanding lung GVHD is more relevant than ever. We look forward to sharing three days of learning, insight, and fellowship that will extend beyond Geneva.

The Scientific Steering Committee

Anne Bergeron (Switzerland)

Daniel Wolff (Germany)

Joe Hsu (USA)

Sophie Paczesny (USA)

Corey Cutler (USA)

Steven Pavletic (USA/Croatia)

Guang-Shing Cheng (USA)

¹Ralph D et al. Am Rev Resp Dis 1984;129:641-644



GOAL: Synthesize preclinical understanding of the pathogenesis of BOS that occurs in the context of allogeneic hematopoietic cell transplant, identify translatable targets and key priorities for preclinical investigation

Co-Chairs: [Joe Hsu](#) and [Sophie Paczesny](#)

08:15 WELCOME PARTICIPANTS

08:30 Opening Remarks [Prof Antoine Geissbuhler, Dean of the University of Geneva](#)

08:35 Building on the ATS research statement and our understanding of the natural history of BOS [Guang-Shing Cheng, Fred Hutchinson Cancer Center](#)

08:50 Session 1: Knowledge Review

08:50 Beyond the small airways: Mapping allo-immune and transplant-related lung injury after alloimmune HCT in Humans [Anne Bergeron, University of Geneva](#)

09:05 Heterogeneity of airway pathology in clinical BOS: insights from microCT investigations in HCT, LT, and PIBO [Stijn Verleden, UZA, University Hospital Antwerp](#)

09:25 Airway epithelium as disease nexus in alloimmune lung injury [Jamie Todd, Duke University](#)

09:45 Peripheral helper T cells, B cells, and tertiary lymphoid structures in CLAD: do these pathways translate to lung GVHD? [Stephen Juvet, University of Toronto](#)

10:05 The role of macrophages, cellular immunity, and alloimmune pathways in chronic GVHD [Julie Boiko, Fred Hutchinson Cancer Center](#)

10:25 Discussion

10:35 Break

10:45 Session 2: Knowledge Review

10:45 Role of infection and microbiome in post-HCT lung injury [Matthew Zinter, University of California San Francisco](#)

11:05 Dysbiosis and metabolomics in lung GVHD [David Michonneau, University Paris Cité](#)

11:25 Respiratory virus as a trigger for HCT-BOS [Louise Bondeelle, University of Geneva](#)

11:45 Lessons from bronchiectasies: phenotypes, endotypes, and treatable traits [Alan Barker, Oregon Health Sciences University](#)

12:05 Discussion

12:15 LUNCH

13:15 The Patient Perspective [Andreas Mall, Germany](#)

13:20 Session 3: Pro/Con Debate: Idiopathic pneumonia syndrome is a risk factor for lung GVHD [Kenneth Cooke, Johns Hopkins University](#) and [Ajay Sheshadri, MD Anderson Cancer Center](#)

13:50 Discussion

14:00 Session 4: Pathways of Fibrosis Across Medical Contexts

14:00 Multiple pathways towards fibrogenesis in idiopathic pulmonary fibrosis [Bruno Crestani, University Paris Cité](#)

14:20 Risk and mechanisms of CLAD [John Belperio, University of California Los Angeles](#)

14:40 Targeting pulmonary fibrosis in chronic GVHD mice with lung dysfunction [Bruce Blazar, University of Minnesota](#)

15:00 Discussion

15:10 Break

15:20 Session 5: Translational approaches to studying lung GVHD

15:20 Cell-free DNA: sensitive predictive biomarker for pulmonary GVHD / CLAD risk [Sean Agbor-Enoh, NIH/NHLBI](#)

15:40 Murine models of bronchiolitis obliterans and transplant pulmonary fibrosis [Joe Hsu, Stanford University](#)

16:00 Modeling HCT-BOS with patient bronchoalveolar lavage fluid-derived organoids [Carla Kim, Harvard University](#)

16:20 Multi-omic analyses of human lung explants in HCT-BOS and CLAD [Patrick Mellors, Dartmouth University](#)

16:40 Discussion

16:50 Session 6: Plenary Discussion

17:20 ADJOURN Day 1

18:30 Networking Reception

GOAL: To derive a consensus revision of the HCT-BOS diagnostic criteria and conceptual framework for defining lung chronic GVHD.

Co-Chairs: [Guang-Shing Cheng](#) and [Anne Bergeron](#)

08:20 Session 1: Introduction of the Lung cGVHD Framework

Rationale for a revision of the 2014 NIH Definition of BOS: Why do we need this now? [Anne Bergeron, University of Geneva](#) and [Daniel Wolff, University Hospital Regensburg](#)

The historical context of the NIH cGVHD Consensus Project [Steve Pavletic, NIH](#)

The diagnostic framework and introduction of the working proposal [Guang-Shing Cheng, Fred Hutch Cancer Center](#)

08:50 Session 2: Diagnostic Elements of BOS: Lung Physiology and Chest Imaging

08:50 Lung Physiology

The natural history of BOS [Guang-Shing Cheng, Fred Hutch Cancer Center](#)

Pathologic correlations with lung physiology and defining pulmonary impairment [Gerald Weinhouse, Dana Farber Cancer Institute/Harvard University](#)

Current interpretative strategies and PFT change metrics across the lifespan [Hemang Yadav, Mayo Clinic](#)

Patterns of airflow obstruction, small airways disease, and 'reversibility' in BOS [Jane Turner, McMaster University](#)

Current and future alternatives to conventional PFTs: oscillometry, MBW and home spirometry [Paul Robinson, University of Melbourne](#)

09:30 Chest Imaging

Chest imaging correlates of airflow obstruction [Okka Hamer, University of Regensburg](#)

The future: Quantitative CT, MRI, and novel approaches to imaging for lung GVHD [Gregory Yanik, University of Michigan](#)

09:50 Discussion

Lung Physiology Group: [Nicola Adderley](#), [Paul Robinson](#), [Matthew Rutter](#), [Hélène Salvator](#), [Jane Turner](#), [Gerald Weinhouse](#), [Hemang Yadav](#), [Guang-Shing Cheng \(Lead\)](#); Chest Imaging Group: [Edward Castillo](#), [Julien Cohen](#), [Craig Galban](#), [Jörg Halter](#), [Okka Hamer](#), [Jonathan Rayment](#), [Gregory Yanik](#), [Husham Sharifi \(Lead\)](#)

10:30 Break

10:45 Session 3: Diagnostic Elements of BOS: Necessary Conditions, Exclusions, and Considerations for Special Populations

10:45 Conditions

Requirements for the presence of extrapulmonary cGVHD to diagnose lung cGVHD [Catherine Lee, Fred Hutchinson Cancer Center](#)

The need for lung biopsy to diagnose BOS [Clare Sander, Cambridge University Hospital](#) and [Alicja Sadowska-Klasa, Medical University of Gdansk](#)

Should absence of infection be a necessary requirement? [David Epstein, Stanford University](#)

11:05 Pediatrics and Special Populations

The impact of growth on lung function and diagnostic considerations in children after HCT [Shiv Shanthikumar, University of Melbourne](#) and [Stella Davies, Cincinnati Children's Hospital](#)

The minimum diagnostic criteria if no diagnostic testing can be obtained [\(Kirsten Williams, Emory University\)](#)

11:20 Discussion

Conditions Group: [Louise Bondeelle](#), [David Epstein](#), [Samuel Goldfarb](#), [Matthew Hensley](#), [Catherine Lee](#), [Alicja Sadowska-Klasa](#), [Clare Sander](#), [Ajay Sheshadri \(Lead\)](#); Pediatrics and Special Populations Group: [Stella Davies](#), [Véronique Houdouin](#), [Anita Lawitschka](#), [Kirk Schultz](#), [Hemang Yadav](#), [Kirsten Williams \(Lead\)](#)

12:00 LUNCH

13:00 Session 4: Non-BOS Lung cGVHD

Restrictive physiology, extrapulmonary cGVHD, and mixed phenotypes [Jeff Sturek, University of Virginia](#)

Interstitial lung disease including organizing pneumonia, NSIP, PPFE [Yu-Kuang Lai, Stanford University](#), [Saskia Bos, University of Leuven](#) and Group

13:30 Discussion

Non-BOS Lung Disease Group: [Mark Barash](#), [Saskia Bos](#), [Geoffrey Cuvelier](#), [Katrin Hostettler](#), [Joe Hsu](#), [Yu-Kuang Lai](#), [Steven Pavletic](#), [Jeffrey Sturek](#) and [Anne Bergeron \(Co-Leads\)](#)

14:00 Session 5: Screening and Implementation Recommendations Panel Discussion [Daniel Wolff, University of Regensburg](#), and Group

Panelists with an introduction by [Guy Livneh, Palo Alto, CA](#)

Implementation Group: [Paul Carpenter](#), [Yves Chalandon](#), [Anna DeSalvo](#), [Najla El-Jurdi](#), [Samuel Goldfarb](#), [John Murray](#), [Danielle Stahlbaum](#), [Daniel Wolff \(Lead\)](#)

15:00 Break

15:15 Session 6: Plenary Discussion: Addressing Areas of Uncertainty and Future Directions [Co-Chairs and Task Force Leads](#)

16:45 ADJOURN Day 2

DAY 3: CLINICAL TRIALS FOR LUNG GVHD

Friday 25 September 2026

GOAL: Establish an ideal clinical trial design and identify clinical trial readiness gaps for Lung GVHD after HCT

Co-Chairs: [Anne Bergeron](#) and [Guang-Shing Cheng](#)

08:00 Introduction: Why we need BOS-specific clinical trials [Corey Cutler, Dana Farber Cancer Institute/Harvard University](#)

08:10 Session 1: Current Therapeutic Landscape for HCT-BOS

08:10 Guidelines versus the reality [Hélène Schoemans, University of Leuven](#)

08:25 FDA-approved cGVHD agents for BOS: a pulmonologist's perspective [Anne Bergeron, University of Geneva](#)

08:40 Antifibrotics and the pulmonary drug pipeline [Katrin Hostettler, University of Basel](#)

08:55 Alternative therapies and cGVHD drug pipeline [Daniel Wolff, University of Regensburg](#)

09:10 Discussion

09:25 Break

09:30 Session 2: Clinical Trial Design Elements

09:30 Current NIH response criteria, endpoints and limitations [Guang-Shing Cheng, Fred Hutch Cancer Center](#)

09:45 When it's OK to be out of line – modeling continuous data as a non-linear function [Ted Gooley, Fred Hutchinson Cancer Center](#)

10:00 How to Improve the Level of Evidence of Single-Arm Phase 2 Trials. [Sylvie Chevret, University Paris Cité/Hôpital St. Louis](#)

10:15 Biomarkers for Lung GVHD: how do we get there, and how do we test? [Sophie Paczesny, Medical College of South Carolina](#)

10:30 Innovative trial designs in interstitial lung diseases: adaptive, umbrella, basket [Toby Maher, University of Southern California](#)

10:45 Discussion

11:00 Insights from the Facebook BOS group: What patients are willing to do to participate in a clinical trial. [Guy Livneh, Palo Alto, California](#)

11:15 BREAK/LUNCH

11:45 Session 3: Clinical Trial Partnerships Panel Discussion

Co-Chairs: [Daniel Wolff](#) and [Steve Pavletic](#)

Panelists: [Val Bhatt \(Incyte\)](#), [Dawn Reichenbach \(Sanofi\)](#), [Jason Chien \(Mozart Therapeutics\)](#), [Gino Cortopassi \(Buto Corp.\)](#), [Madhuri Vusirikala \(Therakos\)](#), [Guy Livneh \(Patient Advocate\)](#), [FDA/EMA tbd](#)

12:55 Break

13:00 Session 4: Clinical Trial Design Brainstorming Session

13:00 Small group breakouts: 1) Overall Trial Design, 2) Trial Inclusion and Endpoints, 3) Agents to Test, 4) Correlative Studies, 5) Recruitment and Retention

Leads: [Greg Yanik and Jamie Todd \(1\)](#), [Najla El-Jurdi and Guang-Shing Cheng \(2\)](#), [Catherine Lee and Bruno Crestani \(3\)](#), [Sean Agbor-Enoh and José Antonio Simón Pérez \(4\)](#), [Hélène Schoemans and Danielle Stahlbaum \(5\)](#)

13:45 Group reports and discussion

14:30 Session 5: Plenary Discussion: White Board Proposal for the Ideal Clinical Trial

15:30 SUMMARY and ADJOURN Day 3 and Conference

Thank you to our Lung GVHD Consensus Project Participants

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Thank you to our Special Advisors:

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* Chair / Task Force Lead

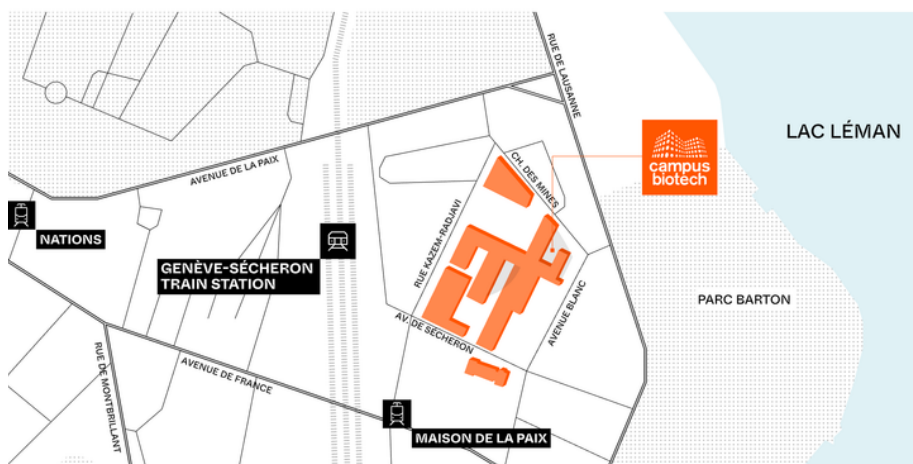
Speaker / Panelist

^ Breakout Lead

and special thanks to Liz Curtis and Amélie Rivoira

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