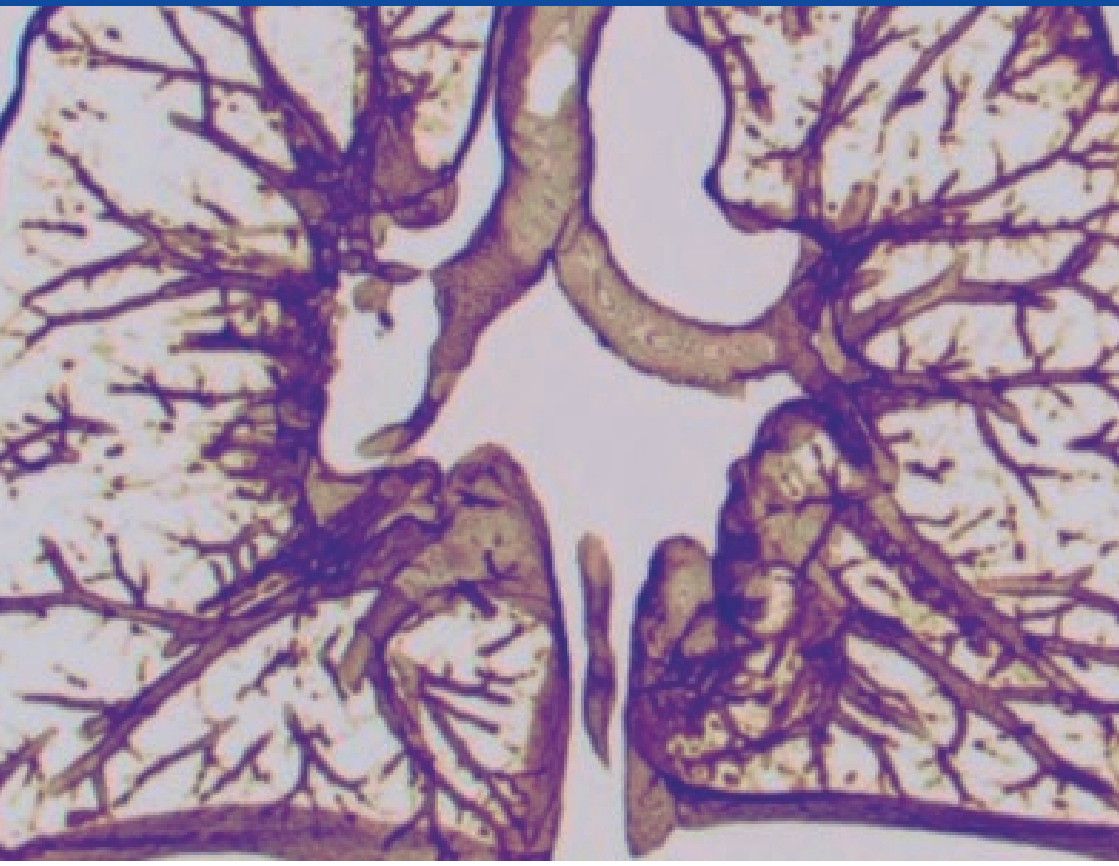
THE INTERNATIONAL
LUNG GVHD CONSENSUS CONFERENCE

23 - 25 September 2026
Campus Biotech, Geneva, Switzerland



Hôpitaux Universitaires Genève

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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 a 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 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), Steve Pavletic (USA/Croatia), Daniel Wolff (Germany), Joe Hsu (USA), Sophie Paczesny (USA), Corey Cutler (USA), Guang-Shing Cheng (USA).

Programme
Wednesday 23 September 2026

PATHOGENESIS OF LUNG GVHD

GOAL: Synthesize preclinical understanding of the pathogenesis of BOS in the context of allogeneic hematopoietic cell transplant, identify trans latable targets and key priorities for preclinical investigation.

Co-Chairs: Joe Hsu and Sophie Paczesny

08:30 Welcome participants

08:45 Opening Remarks
Prof Antoine Geissbuhler, Dean of the University of Geneva

09:00 Building on the ATS Research Statement
Guang-Shing Cheng, Fred Hutch Cancer Center

09:10 Session 1: Knowledge Review
09:10 Airway epithelial / endothelial injury. Jamie Todd, Duke University
09:30 Lung specificities of macrophages, cellular immunity, and allo-immune mechanisms. Julie Boiko, Fred Hutch Cancer Center
09:50 Viral infections and transplant alloimmunity. Louise Bondeelle, University of Geneva

10:10 Coffee Break

10:30 Session 2: Knowledge Review
10:30 Role of infection, microbiome in post-HCT. Matthew Zinter, Univ of California San Francisco
10:50 Dysbiosis, metabolomics in lung GVHD. David Michonneau, University of Paris
11:10 Cell-free DNA in lung transplant. Sean Agbor-Enoh, NIH

11:30 Coffee Break

11:40 Session 3: Pro/con Debate: Idiopathic pneumonia syndrome is a risk factor for lung GVHD
Ken Cooke, Johns Hopkins University and Ajay Sheshadri, MD Anderson Cancer Center

12:40 Lunch

13:30 Session 4: Pathways of Fibrosis Across Medical Contexts

13:30 Interstitial lung disease. Bruno Crestani, University of Paris

13:50 Lung transplant. John Belperio, University of California Los Angeles, USA

14:10 BOS and cGVHD. Bruce Blazer, University of Minnesota

14:30 Discussion

14:40 Session 5: The role of large airway pathology in bronchiolitis obliterans syndrome

14:40 Are large airways involved in BOS? Anne Bergeron, University of Geneva

15:00 Prevalence of bronchiectasis after cellular therapies. David Epstein, Stanford University

15:20 Non-cystic fibrosis bronchiectasis novel treatments and future directions. Alan Barker, Oregon Health Sciences University

15:40 Discussion

15:50 Coffee Break

16:10 Session 6: Translational approaches to studying lung GVHD

16:10 Murine models of OB and transplant pulmonary fibrosis. Joe Hsu, Stanford University

16:30 BOS lung organoids. Carla Kim, Harvard University

16:50 Ex vivo human lung samples BOS vs. CLAD. Patrick Mellors, Dartmouth University

17:10 Discussion

17:20 Session 7: Plenary summary and discussion
Sophie Paczesny, Medical University of South Carolina, USA and Joe Hsu, Stanford University

17:50 Adjourn Day 1

18:00 Networking Reception

Programme
Thursday 24 September 2026

UPDATING THE NIH DEFINITION OF BOS

GOAL: To derive a consensus revision of the HCT-BOS definition based on up-to-date evidence

Co-Chairs: Guang-Shing Cheng and Anne Bergeron

08:00 Introduction: Why an NIH definition for lung GVHD? The Rationale for a Revision

08:00 From BO to BOS: Defining Lung GVHD. Anne Bergeron, University of Geneva

08:05 Historical context of the lung chronic GVHD definition and response criteria. Steve Pavletic, NIH

08:15 Considerations of practice heterogeneity on the landscape of cGVHD and lung disease. Daniel Wolff, University of Regensburg

08:25 The diagnostic framework and introduction of working proposal. Guang-Shing Cheng, Fred Hutch Cancer Center

08:30 Session 1: Diagnostic Elements: Lung Physiology

08:30 Basics of PFTs: spirometry, lung volumes, DLCO, and current interpretative strategies. Jane Turner, McMaster University

08:45 Patterns of airflow obstruction, small airways disease, and reversibility relevant to clinical BOS. Gerald Weinhouse, Dana Farber, Cancer Institute/Harvard University

09:00 Alternatives to conventional PFTs. Paul Robinson, University of Queensland, Australia

09:15 Gaps, controversies, recommendations and discussion. Guang-Shing Cheng, Fred Hutch Cancer Center

09:30 Session 2: Diagnostic Elements: Chest Imaging

09:30 Chest imaging correlates of airflow obstruction / small airways impairment, including CXR, CT, MRI. Okka Hamer, University of Regensburg

09:50 Novel approaches to chest imaging and e.g. MRI, qCT. Greg Yanik, University of Michigan

10:10 Gaps, controversies, recommendations and discussion. Husham Sharifi, Stanford University

10:30 Coffee Break

10:45 Session 3: Diagnostic Elements: Necessary Conditions and Exclusions

10:45 Pro/Con Debate: Exclusion of infection and the need for bronchoscopy. Clare Sander, Cambridge University Hospital and TBD

11:05 Requirements for clinical context (e.g. other cGVHD) and the need for histology. Catherine Lee, Fred Hutch Cancer Center

11:25 Gaps, controversies, recommendations and discussion. Ajay Sheshadri, MD Anderson Cancer Center

11:45 Summary of Revision Part 1
Guang-Shing Cheng, Husham Sharifi, Ajay Sheshadri

12:00 Lunch

13:00 Session 4: Considerations for Special Populations and Scenarios

13:00 Consideration of preexisting lung disease and the impact of aging on lung function. Hemang Yadav, Mayo Clinic

13:15 The impact of growth on lung function. Shiv Shanthikumar, University of Melbourne

13:30 Specific pediatric considerations for lung function testing, chest imaging, and invasive diagnostic testing. Stella Davies, Cincinnati Children's Hospital

13:45 Recommendations for minimum diagnostic criteria if no diagnostic testing can be obtained. Kirsten Williams, Emory University

14:00 Discussion

14:15 Session 5: Mixed Phenotypes and Non-BOS Lung Entities

14:15 Pro/Con: Is bronchiectasis a consequence of BOS, or its own lung GVHD entity? Mark Barash, Medical College of Wisconsin and Louise Bondeelle, University of Geneva

14:35 Mixed physiology and non-parenchymal restriction. Jeff Sturek, University of Virginia

14:50 Organizing pneumonia and Interstitial lung disease entities. Julie Lai, Stanford University

15:05 Pro/Con: Should CLAD-RAS criteria be applied to HCT Lung GVHD? Saskia Bos, University of Leuven and Anne Bergeron

15:25 Recommendations and discussion: Include non-BOS as GVHD, and which entities? Jeff Sturek and Anne Bergeron

15:45 Coffee Break

16:00 Session 6: Implementation Panel
Chair: Daniel Wolff
Panelists: Yves Chalandon, Danielle Stahlbaum, Stella Davies, Paul Carpenter, Najla El-Jurdi

17:00 Session 7: Plenary Discussion
Guang-Shing Cheng and Anne Bergeron

17:30 Adjourn Day 2

Programme
Friday 25 September 2026

CLINICAL TRIALS FOR LUNG GVHD

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

Co-Chairs: Guang-Shing Cheng and Anne Bergeron

08:00 Introduction

08:00 Summary of Day 1 and Day 2. Joe Hsu and Guang-Shing Cheng

08:10 Why we need BOS-specific clinical trials. Anne Bergeron, University of Geneva

08:15 Session 1: Current therapeutic landscape for HCT-BOS

08:15 Guidelines versus the reality. Helene Schoemans, University of Leuven

08:30 FDA-approved cGVHD agents and BOS trials: a pulmonologist's perspective. Anne Bergeron, University of Geneva

08:45 Antifibrotics and the Pulmonary Drug pipeline. Katrin Hostettler, University of Basel

09:00 Alternative therapies (e.g. ECP) and cGVHD drug pipeline. Daniel Wolff, University of Regensburg

09:15 Q&A / Panel Discussion

09:30 Session 2: Clinical trial partnerships Panel Discussion

Chair: Daniel Wolff and Steve Pavletic

09:30 The logistics of establishing multicenter / international collaborations US/EU. Incyte, Sanofi, Therakos, Dr. Jason Chien, Patient Representatives, FDA/EMA/NIH representatives

10:15 Coffee Break

10:30 Session 3: Clinical trial design elements

10:30 Innovative trial designs in interstitial lung diseases: adaptive, umbrella, basket. Toby Maher, University of California Los Angeles

10:45 Continuous lung function measures as endpoints for lung GVHD. Ted Gooley, Fred Hutch Cancer Center

11:00 Response criteria: aligning with the updated Lung GVHD Definition. Guang-Shing Cheng, Fred Hutch Cancer Center

11:15 Biomarkers for Lung GVHD: how do we get there, and how do we test? Sophie Paczesny, Medical College of South Carolina

11:30 Rare disease disease trial design: stratification and statistical concerns. Sylvie Chevret, University of Paris/Hopital St. Louis

11:45 Q&A / Discussion

12:00 Lunch

13:00 Session 4: Clinical trial design brainstorming session

13:00 Brainstorming Breakouts: 1. trial design; and 2. agents to test; 3. gaps in clinical trial readiness

13:45 Small 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 Meeting
Guang-Shing Cheng and Anne Bergeron

Lung GVHD Consensus projectparticipants

Sean Agbor-Enoh, MD, PhD, NIH/NHLBI, USA
Nicola Adderly, MD, University of Calgary, Canada
Alan Barker, MD, Oregon Health Sciences University, USA
Mark Barash, DO, Medical College of Wisconsin, USA
John Belperio, MD, University of California Los Angeles, USA
Anne Bergeron*, MD, PhD, University of Geneva, Switzerland
Bruce Blazar, MD, University of Minnesota, USA
Julie Boiko, MD, PhD, Fred Hutch Cancer Center, USA
Louise Bondeelle MD, PhD, University of Geneva, Switzerland
Saskia Bos MD, PhD, University of Leuven, Belgium
Paul Carpenter MD, MBBS, Fred Hutch Cancer Center, USA
Yves Chalandon, MD, University of Geneva, Switzerland
Corey Cutler, MD, MPH, Dana-Farber Cancer Institute, USA
Guang-Shing Cheng*, MD, Fred Hutch Cancer Center, USA
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Kenneth Cooke, MD, Johns Hopkins University, USA
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Stella Davies MBBS, PhD, MRCP, Cincinnati Children's Hospital, USA
Anna DeSalvo, MS, CGC, National Marrow Donor Program, USA
Najla El-Jurdi, MD, NIH/NCI, USA
David Epstein, MD, Stanford University, USA
Ted Gooley, PhD, Fred Hutch Cancer Center, USA
Sam Goldfarb, MD, University of Minnesota, USA
Okka Hamer, MD, University of Regensburg, Germany
Katrin Hostettler, MD, PhD, University of Basel, Switzerland
Joe Hsu, MD, MPH, Stanford University, USA
Carla Kim, PhD, Harvard Medical School, USA
Julie Lai, MD, Stanford University, USA
Catherine Lee, MD, MS Fred Hutch Cancer Center, USA
Toby Maher, MD, PhD, University of California Los Angeles USA
Patrick Mellors, MD, Dartmouth-Hitchcock Medical Center, USA David

Michonneau, MD, PhD, University of Paris, France
John Murray, RGN, MSc, National Health Services, UK
Steven Pavletic, MD, PhD, NIH/NCI, USA
Paul Robinson, MD, University of Queensland, Australia
Clare Sander, MD, Cambridge University Hospital, UK
Helene Schoemans, MD, PhD, University of Leuven, Belgium Shiv
Shanthikumar, MBBS, PhD, University of Melbourne, Australia
Husham Sharifi*, MD, Stanford University, USA
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Danielle Stahlbaum, MD, University of Michigan, USA
Jeff Sturek*, MD, PhD, University of Virginia School of Medicine, USA
Jamie Todd, MD, Duke University, USA
Jane Turner, MD, McMaster University, Canada
Gerald Weinhouse MD, Dana Farber Cancer Institute, USA
Kirsten Williams*, MD, Emory University, USA
Daniel Wolff*, MD, University of Regensburg, Germany
Hemang Yadav, MBBS, Mayo Clinic Minnesota, USA
Greg Yanik, MD, University of Michigan, USA
Matthew Zinter, MD, University of California San Francisco, USA

*** Definition Task Force Leads**
Task Force Members
Speakers

Thank you to our sponsors

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Practical **information**

Location

Campus Biotech,
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Registration

On line