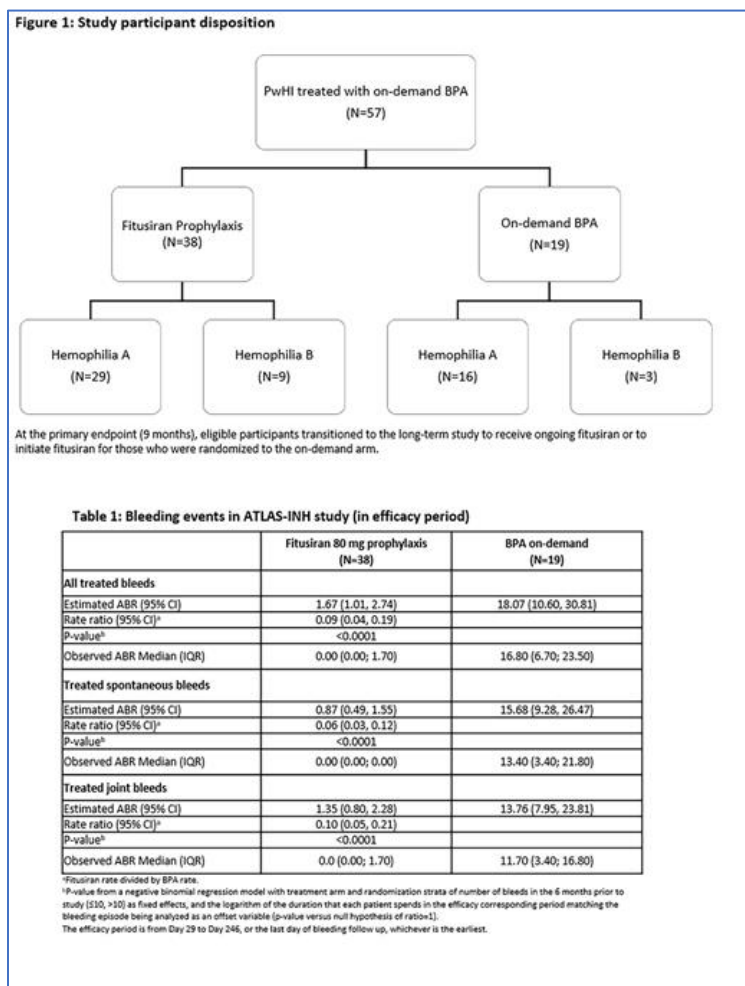# ASH ABSTRACTS 2023: FIGURE AND TABLE GUIDANCE
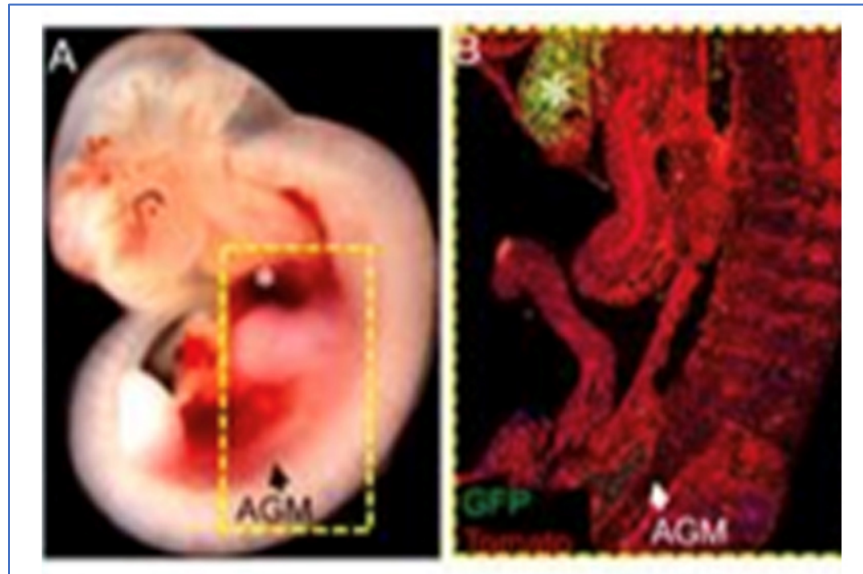
ACCEPTABLE #1

This image from a 2021 abstract includes **two** "panels" of information (one image and one table) and would be acceptable for submission in 2023.

Figure 1: Study participant disposition

At the primary endpoint (9 months), eligible participants transitioned to the long-term study to receive ongoing fitusiran or to initiate fitusiran for those who were randomized to the on-demand arm.

Table 1: Bleeding events in ATLAS-INH study (in efficacy period)

	Fitusiran 80 mg prophylaxis (N=38)	BPA on-demand (N=19)
All treated bleeds		
Estimated ABR (95% CI)	1.67 (1.01, 2.74)	18.07 (10.60, 30.81)
Rate ratio (95% CI)ᵃ	0.09 (0.04, 0.19)	
P-valueᵇ	<0.0001	
Observed ABR Median (IQR)	0.00 (0.00; 1.70)	16.80 (6.70; 23.50)
Treated spontaneous bleeds		
Estimated ABR (95% CI)	0.87 (0.49, 1.55)	15.68 (9.28, 26.47)
Rate ratio (95% CI)ᵃ	0.06 (0.03, 0.12)	
P-valueᵇ	<0.0001	
Observed ABR Median (IQR)	0.00 (0.00; 0.00)	13.40 (3.40; 21.80)
Treated joint bleeds		
Estimated ABR (95% CI)	1.35 (0.80, 2.28)	13.76 (7.95, 23.81)
Rate ratio (95% CI)ᵃ	0.10 (0.05, 0.21)	
P-valueᵇ	<0.0001	
Observed ABR Median (IQR)	0.0 (0.00; 1.70)	11.70 (3.40; 16.80)

ᵃFitusiran rate divided by BPA rate.
ᵇP-value from a negative binomial regression model with treatment arm and randomization strata of number of bleeds in the 6 months prior to study (≤10, >10) as fixed effects, and the logarithm of the duration that each patient spends in the efficacy corresponding period matching the bleeding episode being analyzed as an offset variable (p-value versus null hypothesis of ratio=1).
The efficacy period is from Day 29 to Day 246, or the last day of bleeding follow up, whichever is the earliest.

Guy Young, Alok Srivastava, Kaan Kavakli, Cecil Ross, Jameela Sathar, Huyen Tran, Runhui Wu, Jing Sun, Stacey Poloskey, Zhiying Qui, Salim Kichou, Shauna R. Andersson, Baisong Mei, Savita Rangarajan; Efficacy and Safety of Fitusiran Prophylaxis, an siRNA Therapeutic, in a Multicenter Phase 3 Study (ATLAS-INH) in People with Hemophilia A or B, with Inhibitors (PwHI). *Blood* 2021; 138 (Supplement 1): 4. doi: https://doi.org/10.1182/blood-2021-150273

ACCEPTABLE #2

This image, excerpted from a 2021 abstract, consists of **two** "panels" of information (two images) and would be acceptable for submission in 2023.

ACCEPTABLE #3

This image, modified from a 2021 abstract, consists of **two** "panels" of information (two tables) and would be acceptable for abstract submission in 2023.

Table 1

	Fitusiran 80 mg prophylaxis (N=38)	BPA on demand (N=19)
All treated bleeds		
Estimated ABR (95% CI)	1.47 (1.01, 2.74)	18.07 (10.46, 30.81)
Rate ratio (95% CI)	0.09 (0.04, 0.19)	
P-value	<0.0001	
Observed ABR Median (IQR)	0.00 (0.00, 1.70)	16.80 (6.70, 23.50)
Treated spontaneous bleeds		
Estimated ABR (95% CI)	0.67 (0.45, 1.55)	15.68 (9.28, 26.47)
Rate ratio (95% CI)	0.04 (0.04, 0.12)	
P-value	<0.0001	
Observed ABR Median (IQR)	0.00 (0.00, 0.30)	13.40 (3.40, 21.80)
Treated joint bleeds		
Estimated ABR (95% CI)	1.35 (0.86, 2.28)	13.79 (7.95, 23.81)
Rate ratio (95% CI)	0.10 (0.05, 0.21)	
P-value	<0.0001	
Observed ABR Median (IQR)	0.0 (0.00, 1.70)	11.70 (3.40, 16.80)

Rate ratio is divided by BPA rate.
P-value from a negative binomial regression model with treatment arm and randomization strata of number of bleeds in the 6 months prior to study (0/0, >0) as fixed effects, and the logarithm of the duration that each patient spends in the efficacy corresponding period matching the bleeding episode being analyzed as an offset variable (p-value versus null hypothesis of ration=1).
The efficacy period is from Day 29 to Day 246, or the last day of bleeding follow up, whichever is the earliest.
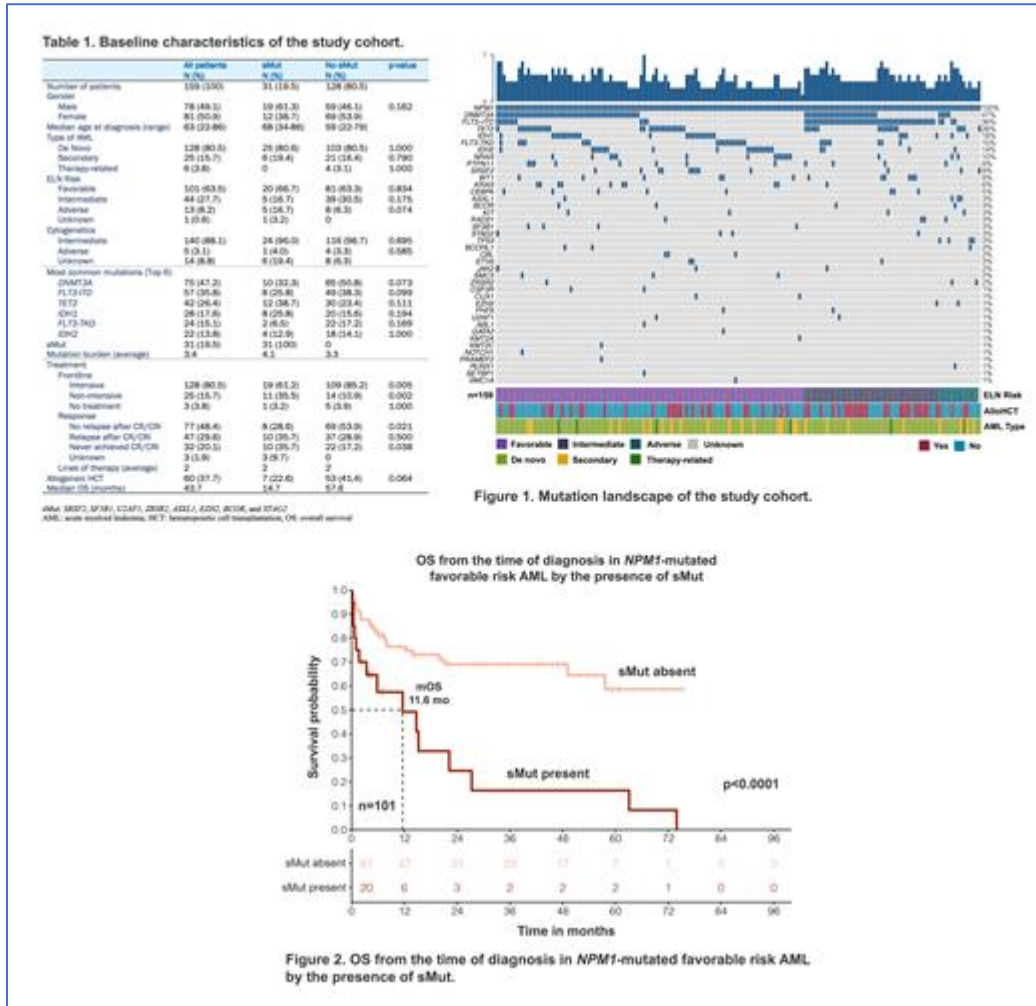
Table 2

	Fitusiran 80 mg prophylaxis (N=38)	BPA on demand (N=19)
All treated bleeds		
Estimated ABR (95% CI)	1.47 (1.01, 2.74)	18.07 (10.46, 30.81)
Rate ratio (95% CI)	0.09 (0.04, 0.19)	
P-value	<0.0001	
Observed ABR Median (IQR)	0.00 (0.00, 1.70)	16.80 (6.70, 23.50)
Treated spontaneous bleeds		
Estimated ABR (95% CI)	0.67 (0.45, 1.55)	15.68 (9.28, 26.47)
Rate ratio (95% CI)	0.04 (0.04, 0.12)	
P-value	<0.0001	
Observed ABR Median (IQR)	0.00 (0.00, 0.30)	13.40 (3.40, 21.80)
Treated joint bleeds		
Estimated ABR (95% CI)	1.35 (0.86, 2.28)	13.79 (7.95, 23.81)
Rate ratio (95% CI)	0.10 (0.05, 0.21)	
P-value	<0.0001	
Observed ABR Median (IQR)	0.0 (0.00, 1.70)	11.70 (3.40, 16.80)

Rate ratio is divided by BPA rate.
P-value from a negative binomial regression model with treatment arm and randomization strata of number of bleeds in the 6 months prior to study (0/0, >0) as fixed effects, and the logarithm of the duration that each patient spends in the efficacy corresponding period matching the bleeding episode being analyzed as an offset variable (p-value versus null hypothesis of ration=1).
The efficacy period is from Day 29 to Day 246, or the last day of bleeding follow up, whichever is the earliest.
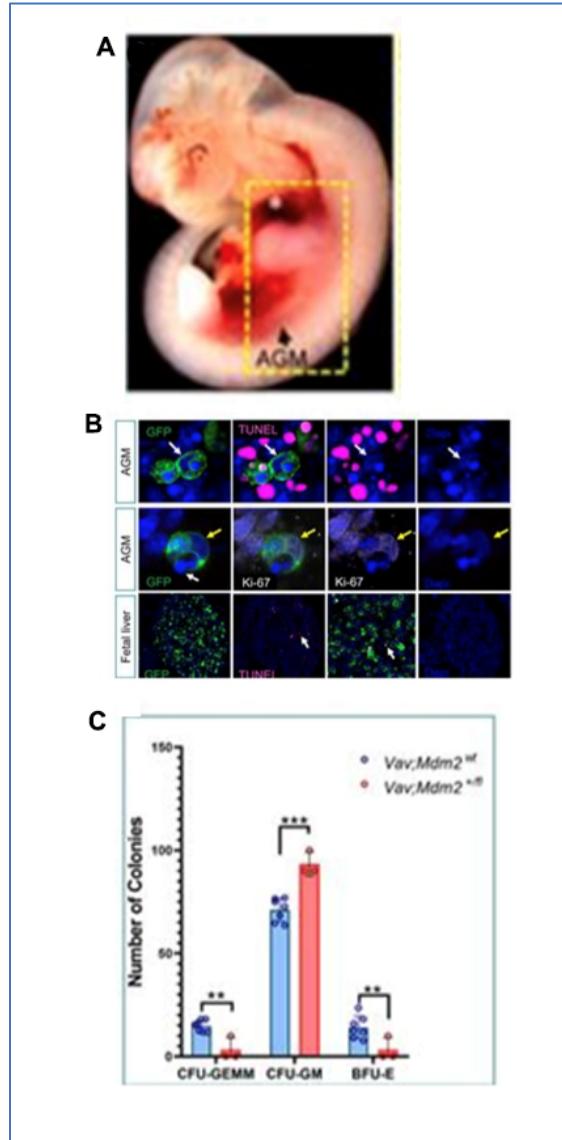
UNACCEPTABLE #1

This image from a 2021 abstract includes **three** "panels" of information (one table and two images). While this was acceptable in 2021, it would **not** be acceptable in a 2023 abstract submission. One of the three panels would need to be removed and instead described in the text.

Table 1. Baseline characteristics of the study cohort.

Figure 1. Mutation landscape of the study cohort.

Figure 2. OS from the time of diagnosis in *NPM1*-mutated favorable risk AML by the presence of sMut.

Onyee Chan, Najla Al Ali, Hammad Tashkandi, Austin Ellis, Somedeb Ball, Ling Zhang, Mohammad Hussaini, Jinming Song, Seongseok Yun, Chetasi Talati, Andrew T. Kuykendall, Eric Padron, David A. Sallman, Kendra Sweet, Rami S. Komrokji, Jeffrey E. Lancet; Mutations Highly Specific for Secondary AML Are Associated with Poor Outcomes in Patients with *NPM1*-Mutated ELN Favorable Risk AML. *Blood* 2021; 138 (Supplement 1): 686. doi: https://doi.org/10.1182/blood-2021-150759

UNACCEPTABLE #2

This image, modified from a 2021 abstract, includes **three** image panels, labelled here as A, B, and C. While this was acceptable in 2021, it would **not** be acceptable in a 2023 abstract. One of the three panels would need to be removed to be acceptable for submission this year. Note that multiply stained images with different antibodies or comparisons across tissue sources—as shown in B—are acceptable as a single panel.

Rasoul Pourebrahim, Rafael Heinz Montoya, Edward Ayoub, Joseph D. Khoury, Michael Andreeff; Mdm2 Maintains Cholesterol Biosynthesis in Hematopoietic Stem/Progenitor Cells Independent of p53. *Blood* 2021; 138 (Supplement 1): 1152. doi: https://doi.org/10.1182/blood-2021-152899