

SUMMARY REPORT OF MY PARTICIPATION IN ASCAT 2025 (LONDON, UK) AND EBMT HEMOGLOBINOPATHY MEETING 2025 (REGENSBURG, GERMANY)

Background

HELP3 has been a key collaborator with BMH in Tanzania for over five years, supporting the establishment and growth of the Bone Marrow Transplant (BMT) programme for Sickle Cell Disease (SCD). With support from HELP3, I attended two major hematology conferences in 2025: the **ASCAT Sickle Cell Disease Conference** in London (September 2025) and the **EBMT Hemoglobinopathy Meeting** in Regensburg, Germany (November 2025).

Key Learnings

1. ASCAT London 2025

Advanced updates in Sickle Cell Disease (SCD) management were presented, including progress in newborn screening strategies, optimized use of hydroxyurea, and evolving global care models that can guide service strengthening at BMH. Strong evidence on stroke prevention through Transcranial Doppler (TCD) screening further reinforced the importance of BMH's ongoing TCD rollout. The conference also featured detailed sessions on curative therapies such as HSCT and emerging gene therapy approaches, with a clear focus on adapting these innovations to low-resource settings. I was honored to serve as a key speaker, sharing Tanzania's experience in establishing BMT services at Benjamin Mkapa Hospital; this presentation was very well received, with many participants expressing strong interest in learning more about our model and progress. Additionally, extensive networking created opportunities for collaboration including Terumo and DKMS companies, that aimed at sustaining the BMT services provided in our hospital.

2. EBMT Hemoglobinopathy Meeting, Regensburg 2025

This was a highly practical session on HSCT protocols, donor selection, conditioning regimens, and complications which provided valuable guidance applicable to strengthening our transplant practice at BMH. I was also, honored to serve as a keynote speaker during the meeting, presenting on Bone Marrow Transplantation in resource-limiting countries; the presentation was well received, with participants showing significant interest in the progress and experience from Tanzania. Critical insights into GVHD prevention and post-transplant long-term follow-up were particularly relevant to the development of our HSCT registry and long-term patient monitoring systems. The in-depth case discussions further strengthened the knowledge required to improve clinical outcomes within resource-limited transplant programmes. Engagement with EBMT experts also opened important pathways for mentorship and potential twinning collaborations, offering promising opportunities for continued capacity building and shared learning.

Relevance to BMH BMT Programme

- Direct application of updated **clinical and supportive care protocols** for SCD transplant patients.
- Identification of international partners for **collaborations in areas of cost coverage**, research, and shared clinical guidelines
- Strengthened capability to refine **eligibility criteria, transplant workflows, and patient monitoring**.
- Supports BMH's transition toward becoming a national centre for curative therapy for SCD.

Conclusion

Attendance at ASCAT and EBMT has significantly enhanced knowledge and skills relevant to scaling Tanzania's HSCT programme for SCD. The support from HELP3 remains instrumental in advancing BMH's vision of providing safe, high-quality curative therapy for SCD. On behalf of BMH, I am deeply grateful for HELP3's longstanding partnership and look forward to continued, strengthened collaboration.



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