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MPN Matters Issue 9 June 2019



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## MPN Matters

### Issue 9 - June 2019



This years' End of Financial Year fundraising campaign is dedicated to supporting MPN research at Melbourne's Peter MacCallum Cancer Centre and Walter & Eliza Hall Institute of Medical Research.

Exciting new research is investigating a new way to treat iron deficiency symptoms and improve quality of life for people living with polycythaemia vera (PV). The research group is seeking government funding to conduct the research over a period of four years.

Thanks to donors **\$3770** has been raised so far. MPN AA will donate 100% of funds received from 15.5.19 until 30.6.19 to this research. If you would like to contribute toward this project please donate via the link below.

Thank you for your continuing support of the MPN Alliance Australia. As a small

volunteer group of people living with a MPN ourselves, we aim to make a positive contribution for people living with a Myeloproliferative Neoplasm.

Best Wishes  
MPN AA Team

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**To Support the MPN Community make a tax deductible donation via the button below.**

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Pictured L-R: MPN researchers (at Peter Mac and Walter & Eliza Hall Institute of Medical Research) Dr Cavan Bennett, A/Prof. Kate Burbury & Dr Sant-Rayn Pasricha, who are working on this study.

## PV Study Summary

Polycythaemia Vera (PV) is a myeloproliferative neoplasm (MPN) in which overproduction of red blood cells leaves patients at risk of complications including blood clots. PV affects ~15,000 Australians. The mainstay of treatment is venesection (blood withdrawal) which removes excess red blood cells and induces iron deficiency (iron is critical for the production of new red blood cells). However, venesection requires insertion of a large needle which can cause discomfort and bruising, is inconvenient as it requires patients to attend a clinic or day centre for care, and can cause fluid shifts which are difficult to manage. Finally, venesection induces total body, rather than blood specific, iron deficiency which can produce adverse effects (such as fatigue, restless legs, and cognitive dysfunction) that impair quality of life.

Iron levels are therefore critical in PV, and are regulated by specific

hormones. We believe manipulating iron levels could be used as a protective mechanism to reduce the excessive red blood cell production in PV. Using a series of experimental models, we will uncover the mechanisms of iron regulation specific to PV patients and learn how these can be harnessed to help treat the disease. We will use a novel therapeutic (that is more convenient and predicted to have less side effects than conventional venesection) to manipulate iron levels and study whether this can treat the disease. We expect that the results of our studies will directly lead to a clinical trial for a new class of drug in the treatment of PV.

All contributions are gratefully accepted. Donate via the link below.

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**[www.mpnallianceaustralia.org.au](http://www.mpnallianceaustralia.org.au)**

You will find MPN disease and treatment articles, patient stories and information and support resources to help you live the best life you can with your MPN.

The three colour strands of our blood-drop symbolise the three classic MPNs, encircling the rarer subtypes. Together we are a community.



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