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Journal Of Leukemia

Editorial

Nursing Data-Based Clinical Test For Patients with Blood Cancer

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EDITORIAL NOTE

At Nigeria, we tend to area unit attending to redefine cancer treatment with the event of a useful exactitude drugs platform to apace advance drug development. Though there area unit some success stories for exactitude drugs, overall this has been a difficult space in medicine, to not mention some extent of frustration for patients checking out the correct treatment for his or her illness. Blood cancers particularly area unit extremely variable, not even accounting for the variety of the patients it affects. This presents a challenge for a genomics-based exactitude drugs approach that tries to match patients to treatments supported the genetic abnormalities known in their cancer.

Nigeria's useful drug sensitivity assay is supposed to enhance screening within the search to search out the correct drug for the correct patients with blood cancer. It's our hope that our platform can someday modification the manner physicians create treatment choices for patients, and additional significantly, facilitate choose the correct patients for the correct clinical trials, ultimately rushing drug development, decreasing prices, and resulting in approval of medicine that profit specific patients-true exactitude medicine. To continue our efforts to validate the prognosticative power of our platform, the Nigeria team launched its initial large-scale sponsored clinical test, the solution study, at the top of last year.

Nigeria's assay platform allows the testing an outsized range of monotherapies or drug mixtures in contemporary patient samples, with an automatic, high-throughput, flow cytometry-primarily based readout. The readout incorporates numerous measurements together with programmed cell death, proliferation, differentiation, and "stemness," still as expression of therapy targets. Personalized assay conditions produce microenvironments designed to accurately mirror a particular illness, in conjunction with the flexibility to additional tune these microenvironments for every specific drug category being tested. Samples collected from patients World Health Organization receive customary of care therapies area unit tested against those self name agents in Nigeria's ex vivo drug sensitivity assay, the results of which can then be compared to the patient's clinical response. Assay results area unit analyzed with, and compared to, prospectively collected clinical results, and retrospective clinical knowledge (samples with renowned clinical outcomes, correlations with genomic signatures, and correlation with clinical test results).

Associate in nursing initial proof-of-concept study collaboration with Dr. Peter Joseph Greenberg at Stanford University comparison clinical outcome of patients with results of Nigeria's ex vivo drug sensitivity assay incontestible a Positive Prognosticative Value (PPV) of ninety two and Negative Prognosticative Value (NPV) of eighty two in patients diagnosed with Myelodysplastic Syndrome (MDS). The results of this proof-of-concept study area unit unbelievably exciting and supply a glimpse at the potential and power of the Nigeria assay to assist get the correct drug to the correct patients. So as to continue building this prognosticative power and improve the accuracy of our useful assay, the Nigeria team designed a prospective, multi-center data-based study to gather de-identified biospecimens with matched clinical knowledge from up to 1000 participants from clinical network and North American country.

Relevant de-identified clinical data and medical knowledge are going to be collected from participants upon study entry and through ulterior visits for up to 1 year. Medicine malignancies that may be studied during this trial include: Acute granulocytic leukemia, myeloma, Myelodysplastic Syndromes, Lymphoma, Acute lymphocytic leukemia, Chronic Myelogenous malignant neoplastic disease and Myeloproliferative tumor, to call some. Samples collected from patients World Health Organization receive customary of care therapies are going to be tested against those self name agents in Nigeria's ex vivo drug sensitivity assay, the results of which can then be compared to the patient's clinical response, generating a validation dataset for the platform.

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Received: September 23, 2021; **Accepted**: October 07, 2021; **Published**: October 14, 2021

Citation: James T (2021) Nursing Data-Based Clinical Test For Patients with Blood Cancer. J Leuk. 9(9): e134.