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I'm Dr. Rami Komrokji from Moffitt Cancer Center answering the following question related to myeloproliferative neoplasms.

***Can fedratinib be used upfront?***

They had not been compared head-to-head to ruxolitinib, but the JAKARTA1 study did look at fedratinib use upfront. The responses seem to be comparable to ruxolitinib. It did allow patients with lower levels of platelets to be enrolled on that study. It may be an option for patients if they have lower blood counts upfront. It does have a little bit more side effects in terms of GI toxicity, diarrhea, and nausea, so I think it is definitely the next option of treatment after ruxolitinib for splenomegaly as well as constitutional symptoms, and it can be an option for a small group of patients upfront. There is a group that will have suboptimal response to ruxolitinib, and that will be an area to explore to see if there will be benefit of shifting patients from ruxolitinib to fedratinib.