

CONCLUSIONS

Presented results point to genes involved in CML progression and thus help in understanding part of mechanisms involved in CML. These findings also have the potential to influence therapy of CML. Patients who present with gene expression patterns suggestive of advanced phase disease might benefit by moving to more aggressive (i.e., transplantation) or other investigational therapies. Moreover, PCR assays of individual genes (or small sets of genes) may be used to monitor patients early in the course of imatinib therapy for signs of progression to advanced disease. Lastly, new targets to interfere with progression, or reverse imatinib resistance, may be exploited.