

**SPEAKER:** And we clearly need better treatment regimens. We have guidelines. They are consensus-based. They are based on considerable experience. The people who were involved in developing those guidelines are pioneers in the management of these patients and have years of experience, and so have identified what seems to work best for those patients.

But we also know that there is a reason why when you look at how patients are actually treated in the broad community, that they are not adherent to those treatment recommendations. Now possibly because there is a lack of information for people to know what those guidelines should be, but I think probably a big chunk of that is related to the patient's difficulty tolerating the regimens. And so clinicians are working to find something that the patient can take in the hopes that it will be OK. So we clearly need better treatment regimens, newer medications.

The excitement for me in this space is that not only is there becoming greater recognition, there is development of centers who are going to focus their efforts in the diagnosis and management of these patients. And so I'm hopeful that we will see a large network of centers collaborating on trying to identify best practices in the management of these patients, and then we can perhaps adhere to a good high standard of care. And that's the only way we're going to get these answers is if we do follow as best we can a regimented approach to treating these patients and collecting those data to learn from them, to understand what is best.