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# Targeted Therapies for Acute Myeloid Leukemia

Guest Editor:

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## Message from the Guest Editor

Dear Colleagues,

For the past several decades, the standard of care for acute myeloid leukemia (AML) has been a non-selective, cytotoxic, two-drug combination. However, with improved molecular testing and the sequencing of AML genomes, we have much better understanding of the heterogeneity of the disease, can classify AML into several different molecular subtypes, and now have the capacity to develop multiple targeted therapies. Some target a defined molecular subgroup while others are approved for a certain setting. These include small molecule inhibitors for patients with activating mutations to fms-like tyrosine kinase 3 (FLT3) and for patients with mutations to isocitrate dehydrogenases 1 and 2 (IDH1 and IDH2). Patients with CD33+ AML can be treated with an antibody drug conjugate, while patients ineligible for intensive chemotherapy now have a BCL2 inhibitor and Hedgehog pathway inhibitor as options. The aim of this Special Issue is to highlight the latest advances in the development of targeted therapies for AML and provide information that can help guide the use of these new drugs and personalize AML patient treatment.

Dr. Caroline Heckman
*Guest Editor*

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## Message from the Editor-in-Chief

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