Second Opinion

Clinical Investigators Provide Their Perspectives on Challenging Cases and Controversies in the Management of Metastatic Breast Cancer

CME INFORMATION

TARGET AUDIENCE

This activity is intended for medical oncologists and other healthcare providers involved in the treatment of breast cancer.

OVERVIEW OF ACTIVITY

Breast cancer (BC) remains the most frequently diagnosed cancer in women, and it is estimated that approximately 234,580 new cases will be identified in the United States in the year 2013 and 40,030 individuals will die from the disease. Advances in screening and prevention have resulted in a steady down-stage migration at the time of disease presentation, such that only 5% of women have identifiable distant metastases at primary diagnosis. Because of this, the number of individuals living with BC has increased substantially, as has the population "at risk" for metastatic or recurrent disease. Depending on the histological subtype, the initial stage of their disease at the time of diagnosis and the subsequent treatment strategy employed, approximately 20% to 80% of these women will develop a distant metastasis within 5 years of their BC diagnosis.

Historically, available treatment options offered little for patients with this incurable disease. However, with the introduction of more effective systemic therapies over the past 20 years, there has been a substantial improvement in clinical outcomes. While the diagnosis and treatment of this disease remains in many ways more advanced than for other solid cancers, challenging issues in the management of metastatic BC (mBC) continue to require refinement. Increasing emphasis is being placed on a "personalized medicine" approach that promises to more effectively identify specific treatments that will benefit the individual, based on specific patient and disease characteristics. In conjunction with this approach researchers are developing novel agents to target additional signaling pathways, with the aim of enhancing the efficacy of existing treatments or overcoming resistance/restoring sensitivity to endocrine therapy, chemotherapy or other biologics.

To assist medical oncologists and other allied BC professionals in keeping informed about these approved and developmental approaches, these proceedings from a case-based CME Grand Rounds presentation introduce the perspectives of 12 renowned investigators on a number of controversial clinical and research issues in the management of mBC.

LEARNING OBJECTIVES

- Compare and contrast expert perspectives on breast cancer treatment recommendations, and use this information to refine or validate your existing management strategies.
- Implement a clinical plan for the management of advanced HER2-positive breast cancer, incorporating existing and recently approved targeted treatments.
- Assimilate new clinical trial evidence into the therapeutic algorithm for advanced ER-positive postmenopausal breast cancer.
- Integrate recent clinical trial results into the management of metastatic breast cancer with no evidence of disease.
- Recall the results of pivotal trials introducing effective new breast cancer therapeutics, and identify their impact on existing treatment algorithms.
- Counsel appropriately selected patients with breast cancer about participation in ongoing clinical trials investigating novel therapeutic agents and strategies.

ACCREDITATION STATEMENT

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This CME activity consists of a video component. To receive credit, the participant should watch the video, complete the Post-test with a score of 70% or better and fill out the Educational Assessment and Credit Form located at ResearchToPractice.com/SecondOpinionBC13/CME.

CONTENT VALIDATION AND DISCLOSURES

Research To Practice (RTP) is committed to providing its participants with high-quality, unbiased and state-of-the-art education. We assess potential conflicts of interest with faculty, planners and managers of CME activities. Real or apparent conflicts of interest are identified and resolved through a conflict of interest resolution process. In addition, all activity content is reviewed by both a member of the RTP scientific staff and an external, independent physician reviewer for fair balance, scientific objectivity of studies referenced and patient care recommendations.

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Hardware/Software Requirements:
A high-speed Internet connection
A monitor set to 1280 x 1024 pixels or more
Internet Explorer 7 or later, Firefox 3.0 or later, Chrome, Safari 3.0 or later
Adobe Flash Player 10.2 plug-in or later
Adobe Acrobat Reader
(Optional) Sound card and speakers for audio

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SELECT PUBLICATIONS

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