

What Oncology Clinicians Want to Know: ADDRESSING CURRENT QUESTIONS AND CONTROVERSIES IN THE MANAGEMENT OF CANCERS OF THE COLON AND RECTUM

CME INFORMATION

TARGET AUDIENCE

This activity is intended for medical oncologists, surgeons and other healthcare providers involved in the treatment of gastrointestinal cancers.

OVERVIEW OF ACTIVITY

Cancer of the colon and rectum is the third most frequently diagnosed cancer and the second most common cause of death among all neoplasms in the United States, accounting for approximately 9% of all cancer deaths. In the year 2014 it is estimated that 96,830 new cases of colon cancer and 40,000 new cases of rectal cancer will be documented in the United States, representing a continued decline over the past 2 decades thought to be related to improvements in detection and treatment. Current therapeutic management of colorectal cancer (CRC) is dependent on tumor stage at the time of initial diagnosis, status of surgical margins (R0, R1, R2) and patient performance status, age, prior treatment exposure and sites of metastasis for those with disease recurrence or de novo advanced cancer. Although these variables are helpful in guiding selection of treatment, the recent rapid expansion of novel biomarkers, multigene signatures and molecular-targeted systemic agents has significantly refined the clinical algorithm such that individualized therapeutic approaches have become the standard. This rapid paradigm shift presents a challenge to practicing oncologists who must grapple with the presentation of ambiguous data sets and their immediate impact on treatment decisions.

By providing information on the latest research developments and their potential application to routine practice, this activity is designed to assist medical oncologists, surgeons and other healthcare providers with the formulation of up-to-date clinical management strategies for CRC.

LEARNING OBJECTIVES

Upon completion of this activity, participants should be able to:

- Apply the results of emerging clinical research to the best-practice management of early and advanced CRC.

- Assess the utility of available tissue-based assays in determining the risk of recurrence and the potential benefits of adjuvant therapy for patients with Stage II and Stage III colon cancer.
- Communicate the benefits and risks of anti-VEGF, anti-EGFR and other targeted biologic therapies to patients with metastatic CRC, and develop an evidence-based algorithm to sequence available therapeutic options.
- Counsel patients with advanced CRC regarding the efficacy and toxicities associated with regorafenib, and employ strategies to safely and effectively integrate this agent into clinical practice.
- Use clinical and/or biological factors to individualize the selection of chemobiologic therapy for patients with metastatic CRC who have experienced disease progression after first-line therapy.
- Counsel patients with CRC about participation in ongoing clinical trials.

ACCREDITATION STATEMENT

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HOW TO USE THIS CME ACTIVITY

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/ASCOGICRC14/CME.

CONTENT VALIDATION AND DISCLOSURES

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FACULTY — The following faculty (and their spouses/partners) reported real or apparent conflicts of interest, which have been resolved through a conflict of interest resolution process:

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MODERATOR — Dr Love is president and CEO of Research To Practice, which receives funds in the form of educational grants to develop CME activities from the following commercial interests: AbbVie Inc, Algeta US, Amgen Inc, Astellas, AstraZeneca Pharmaceuticals LP, Aveo Pharmaceuticals, Bayer HealthCare Pharmaceuticals, Biodesix Inc, Biogen Idec, Boehringer Ingelheim Pharmaceuticals Inc, Bristol-Myers Squibb Company, Celgene Corporation, Daiichi Sankyo Inc, Dendreon Corporation, Eisai Inc, Exelixis Inc, Genentech BioOncology, Genomic Health Inc, Gilead Sciences Inc, Incyte Corporation, Lilly, Medivation Inc, Merck, Millennium: The Takeda Oncology Company, Novartis Pharmaceuticals Corporation, Novocure, Onyx Pharmaceuticals Inc, Prometheus Laboratories Inc, Regeneron Pharmaceuticals, Sanofi, Seattle Genetics, Spectrum Pharmaceuticals Inc, Teva Oncology and VisionGate Inc.

RESEARCH TO PRACTICE STAFF AND EXTERNAL

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This activity is supported by educational grants from Bayer HealthCare Pharmaceuticals, Genentech BioOncology, Genomic Health Inc, Incyte Corporation, Lilly, Regeneron Pharmaceuticals and Sanofi.

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

Last review date: April 2014

Expiration date: April 2015

SELECT PUBLICATIONS

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