TARGET AUDIENCE
This activity has been designed to meet the educational needs of medical oncologists, including gastroenterologists, interventional radiologists and hepatologists, hematologists, hematology-oncology fellows and other healthcare providers involved in the treatment of gastrointestinal cancer.

OVERVIEW OF ACTIVITY
Because of the prevalent nature of the disease, extensive resources are allocated to colorectal cancer (CRC) research and education. Interestingly, however, although individually less frequently encountered, the collection of non-CRC gastrointestinal (GI) cancers accounts for more cancer-related deaths per annum than do tumors of the colon and rectum combined. Published results from ongoing trials in both of these fields continually lead to the emergence of novel biomarkers and new therapeutic targets and regimens, thereby altering existing management algorithms. In order to offer optimal patient care — including the option of clinical trial participation — the practicing medical oncologist must be well informed of these advances. This CME program uses a roundtable discussion with leading GI clinical investigators to assist practicing clinicians in formulating up-to-date and appropriate clinical management strategies.

LEARNING OBJECTIVES
• Effectively apply the results of practice-changing clinical research to the selection and sequencing of chemotherapeutic regimens for patients with metastatic CRC.
• Summarize key findings from clinical studies of emerging and newly approved therapeutic regimens for pancreatic cancer, and use this information to guide treatment decision-making.
• Use clinical and molecular biomarkers to optimize the selection of systemic therapy for patients with gastric or gastroesophageal cancer.
• Educate patients with unresectable metastatic neuroendocrine tumors of the GI tract regarding approved and novel treatment approaches and their associated risks and benefits.
• Communicate the benefits and risks of existing and emerging systemic interventions to patients with advanced hepatocellular carcinoma.
• Counsel appropriately selected patients with GI cancer about the availability of ongoing clinical trial participation.

ACCREDITATION STATEMENT
Research To Practice is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.

CREDIT DESIGNATION STATEMENT
Research To Practice designates this enduring material for a maximum of 2.25 AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

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 75% or better and fill out the Educational Assessment and Credit Form located at ResearchToPractice.com/GICUTT114/Video/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.

Striving for Consensus: The Application of Existing and Emerging Research Findings to the Practical Management of Gastrointestinal Cancers
A Clinical Investigator Think Tank
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:

**Johanna C Bendell, MD**
Director, GI Oncology Research
Associate Director, Drug Development Unit
Sarah Cannon Research Institute
Nashville, Tennessee

No financial interests or affiliations to disclose.

**Charles S Fuchs, MD, MPH**
Director, Center for Gastrointestinal Cancer
Dana-Farber/Harvard Cancer Center
Professor of Medicine
Harvard Medical School
Boston, Massachusetts

Advisory Committee: Celgene Corporation, Genentech BioOncology, Lilly, Metamark Genetics Inc, Sanofi, Takeda Pharmaceuticals North America Inc; Consulting Agreements: ImClone Systems, a wholly owned subsidiary of Eli Lilly and Company, Lilly.

**Richard M Goldberg, MD**
Professor of Medicine
Physician-in-Chief
OSUCCC–James Cancer Hospital and Richard J Solove Research Institute
Klotz Family Chair in Cancer Research
The Ohio State University
Columbus, Ohio

Advisory Committee: Sanofi; Consulting Agreements: Lilly, Pfizer Inc; Contracted Research: Bayer HealthCare Pharmaceuticals, Sanofi; Speakers Bureau: Fresenius Kabi AG, Yakult Pharmaceutical Industry CO LTD.

**J Randolph Hecht, MD**
Professor of Clinical Medicine
Carol and Saul Rosenzweig Chair in Cancer Therapies Development
Director, UCLA GI Oncology Program
Santa Monica, California

No financial interests or affiliations to disclose.

**Eileen M O’Reilly, MD**
Associate Attending
GI Medical Oncology Service
Memorial Sloan-Kettering Cancer Center
Associate Professor of Medicine
Weill Medical College of Cornell University
New York, New York


**Philip A Philip, MD, PhD**
Professor of Oncology and Medicine
Director of GI and Neuroendocrine Tumors
Vice President of Medical Affairs
Karmanos Cancer Institute
Detroit, Michigan

Advisory Committee: Amgen Inc, Bayer HealthCare Pharmaceuticals, Bristol-Myers Squibb Company, Genomic Health Inc, ImClone Systems, a wholly owned subsidiary of Eli Lilly and Company, Lilly, Novartis Pharmaceuticals Corporation, Roche Laboratories Inc, Sanofi; Contracted Research: Amgen Inc, Bayer HealthCare Pharmaceuticals, Bristol-Myers Squibb Company, GlaxoSmithKline, ImClone Systems, a wholly owned subsidiary of Eli Lilly and Company, Lilly, Onyx Pharmaceuticals Inc; Speakers Bureau: Amgen Inc, Bayer HealthCare Pharmaceuticals, Genentech BioOncology, Novartis Pharmaceuticals Corporation, Onyx Pharmaceuticals Inc, Roche Laboratories Inc, Sanofi.


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information for each product for discussion of approved indications, contraindications and warnings. The opinions expressed are those of the presenters and are not to be construed as those of the publisher or grantors.

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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

**Last review date:** January 2014

**Expiration date:** January 2015
A randomized, multicenter, adaptive Phase II/III study to evaluate the efficacy and safety of trastuzumab emtansine (T-DM1) versus taxane (docetaxel or paclitaxel) in patients with previously treated locally advanced or metastatic HER2-positive gastric cancer, including adenocarcinoma of the gastroesophageal junction. NCT01641939


Cunningham D et al. MetGastric: A randomized phase III study of onartuzumab (MetMAb) in combination with mFOLFOX6 in patients with metastatic HER2-negative and MET-positive adenocarcinoma of the stomach or gastroesophageal junction. Proc ASCO 2013;Abstract TPS4155.


Falcone A et al. FOLFOXIRI/bevacizumab (bev) versus FOLFIRI/bev as first-line treatment in unresectable metastatic colorectal cancer patients: Results of the phase III TRIBE trial by GONO group. Proc ASCO 2013;Abstract 3505.

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Hecht JR et al. Lapatinib in combination with capecitabine plus oxaliplatin in HER2-positive advanced or metastatic gastric, esophageal, or gastroesophageal adenocarcinoma: The TRIO-013/LOGiC trial. Proc ASCO 2013;Abstract LBA4001.


Mitchel EP et al. North American subgroup results from VELOUR: Ziv-aflibercept versus placebo plus FOLFIRI in mCRC that is resistant to or has progressed after an oxaliplatin-containing regimen. Gastrointestinal Cancers Symposium 2013;Abstract 465.


RAINBOW: A randomized, multicenter, double-blind, placebo-controlled Phase 3 study of weekly paclitaxel with or without ramucirumab (IMC-1121B) drug product in patients with metastatic gastric adenocarcinoma, refractory to or progressive after first-line therapy with platinum and fluoropyrimidine. NCT01170663


SWOG-S0518: Phase III prospective randomized comparison of depot octreotide plus interferon alpha versus depot octreotide plus bevacizumab (NSC #704865) in advanced, poor prognosis carcinoid patients. NCT00569127


Von Hoff DD et al. Results of a randomized phase III trial (MPACT) of weekly nab-paclitaxel plus gemcitabine versus gemcitabine alone for patients with metastatic adenocarcinoma of the pancreas with PET and CA19-9 correlates. Proc ASCO 2013;Abstract 4005.