Investigator Perspectives on Emerging Concepts in the Management of Genitourinary Cancers

CME Information

TARGET AUDIENCE

This activity is intended for medical oncologists, urologists and radiation oncologists.

OVERVIEW OF ACTIVITY

Cancers of the genitourinary (GU) system affect hundreds of thousands of individuals within the United States each year and account for almost 30% of new cancer diagnoses. Although GU cancers are a diverse array of distinct diseases, tumors of the bladder, kidney (and renal pelvis) and prostate are among the most prevalent and are therefore the topic of extensive ongoing research. As such, the clinical management of these diseases is currently in a state of evolution, necessitating rapid and consistent access to learning opportunities for clinicians who provide care for these patients. Featuring information on the latest research developments along with expert perspectives, this CME program is designed to assist medical oncologists, urologists and radiation oncologists with the formulation of up-to-date clinical management strategies for the care of patients with GU cancers.

LEARNING OBJECTIVES

- Recall existing and emerging research information demonstrating the effects of secondary hormonal interventions on quality and quantity of life for patients with castration-resistant prostate cancer (PC), and use this information to guide therapeutic decision-making.
- Effectively apply evidence-based research findings in the determination of best-practice sequencing of available immunotherapeutic, chemotherapeutic and secondary hormonal agents for patients with metastatic PC.
- Develop an evidence-based approach to the sequencing of systemic therapies for patients with advanced renal cell carcinoma (RCC), incorporating tyrosine kinase inhibitors, anti-VEGF antibodies and mTOR inhibitors.
- Recognize toxicities attributable to diverse molecular-targeted treatments for RCC, and offer preventive or emergent interventions to minimize or ameliorate these side effects.
- Appraise the rationale for and clinical data with investigational anti-PD-1 and anti-PD-L1 antibodies in patients with metastatic RCC and bladder cancer.
- Recognize immune-related adverse events and other common side effects associated with approved and developmental immunotherapeutics in order to offer supportive management strategies.

ACCREDITATION STATEMENT

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

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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

A Phase III, open-label, randomized study of atezolizumab (anti-PD-L1 antibody) in combination with bevacizumab versus sunitinib in patients with untreated advanced renal cell carcinoma. NCT02420821

Antonarakis ES et al. **AR splice variant 7 (AR-V7) and response to taxanes in men with metastatic castration-resistant prostate cancer.** Genitourinary Cancers Symposium 2015;**Abstract 138**.

Antonarakis ES et al. **AR-V7 and resistance to enzalutamide and abiraterone in prostate cancer.** *N Engl J Med* 2014;371(11):1028-38.

Ascierto ML et al. **Transcriptional signatures associated with lack of response to anti-PD-1 therapy in patients with renal cell carcinoma.** *Proc AACR* 2015;**Abstract 1312/11**.

Fizazi K et al. **Assessment of corticosteroid (CS)-associated adverse events (AEs) with long-term (LT) exposure to low-dose prednisone (P) given with abiraterone acetate (AA) to metastatic castration-resistant prostate cancer (mCRPC) patients (Pts).** Genitourinary Cancers Symposium 2015;**Abstract 169**.

Fong L et al. **Activated lymphocyte recruitment into the tumor microenvironment following preoperative sipuleucel-T for localized prostate cancer.** *J Natl Cancer Inst* 2014;106(11).

Hammers HJ et al. **Phase I study of nivolumab in combination with ipilimumab in metastatic renal cell carcinoma (mRCC).** *Proc ASCO* 2014;**Abstract 4504**.

Hoffman-Censits JH et al. **IMvigor 210, a phase II trial of atezolizumab (MPDL3280A) in platinum-treated locally advanced or metastatic urothelial carcinoma (mUC).** Genitourinary Cancers Symposium 2016;**Abstract 355**.

McDermott DF et al. **Atezolizumab, an anti-programmed death-ligand 1 antibody, in metastatic renal cell carcinoma: Long-term safety, clinical activity, and immune correlates from a Phase Ia study.** *J Clin Oncol* 2016;[Epub ahead of print].

Mejri N et al. **Status of HER2 overexpression in muscle invasive urothelial bladder carcinoma: Report of 21 cases.** *Urol Ann* 2014;6(1):63-7.

Motzer RJ et al. **Nivolumab versus everolimus in advanced renal-cell carcinoma.** *N Engl J Med* 2015;373(19):1803-13.

Motzer R et al. **Randomized phase II, three-arm trial of lenvatinib (LEN), everolimus (EVE), and LEN+EVE in patients (pts) with metastatic renal cell carcinoma (mRCC).** *Proc ASCO* 2015;**Abstract 4506**.

Oude Elferink P, Witjes JA. **Blue-light cystoscopy in the evaluation of non-muscle-invasive bladder cancer.** *Ther Adv Urol* 2014;6(1):25-33.

Penson D et al. **A multicenter Phase 2 study of enzalutamide versus bicalutamide in men with nonmetastatic or metastatic castration-resistant prostate cancer: The STRIVE trial.** *Proc AUA* 2015;**Abstract LBA10**.

Petrylak D et al. **A phase Ia study of MPDL3280A (anti-PDL1): Updated response and survival data in urothelial bladder cancer (UBC).** *Proc ASCO* 2015;**Abstract 4501**.

Plimack ER et al. **Pembrolizumab (MK-3475) for advanced urothelial cancer: Updated results and biomarker analysis from KEYNOTE-012.** *Proc ASCO* 2015;**Abstract 4502**.

Powles T et al. **MPDL3280A (anti-PD-L1) treatment leads to clinical activity in metastatic bladder cancer.** *Nature* 2014;515(7528):558-62.

Rosenberg J et al. **Atezolizumab in patients (pts) with locally-advanced or metastatic urothelial carcinoma (mUC): Results from a pivotal multicenter phase II study (IMvigor 210).** *Proc ECCO* 2015;**Abstract 21LBA**.

Taplin ME et al. **Androgen receptor modulation optimized for response: Splice variant (ARMOR3-SV) — Randomized, open-label, multicenter, controlled study of galeterone vs enzalutamide in men with metastatic castration-resistant prostate cancer expressing AR-V7 splice variant.** *Proc ASCO* 2015;**Abstract TPS5069**.