Oncology Grand Rounds

Investigators Discuss New Agents and Novel Therapies

A special audio supplement to a CNE symposia series held during the 2017 ONS Annual Congress featuring expert comments on the application of emerging research to patient care

Faculty Interviews

Angeles Alvarez Secord, MD, MHSc
Ovarian Cancer

Ann S LaCasce, MD, MMSc
Lymphomas and Chronic Lymphocytic Leukemia

Denise A Yardley, MD
Breast Cancer

Melissa L Johnson, MD
Non-Small Cell Lung Cancer

Editor

Neil Love, MD

Oncology Grand Rounds: Investigators Discuss New Agents and Novel Therapies

A Continuing Nursing Education Audio Program

OVERVIEW OF ACTIVITY

The treatment of solid tumors and hematologic cancers remains a challenge for many healthcare professionals. The advent of biologic agents and immunotherapies has led to recent improvements in disease-free and overall survival in select patient populations, and published results from ongoing clinical trials lead to the continual emergence of new therapeutic agents and changes in the use of existing treatments. This dynamic therapeutic environment requires the practicing oncology nurse to stay up to date on the benefits and risks of a plethora of novel and emerging treatment options.

To bridge the gap between research and practice, this program features one-on-one interviews with 4 clinical investigators who participated in satellite symposia held in conjunction with the 2017 Oncology Nursing Society's Annual Congress. These faculty members discuss recent clinical research findings in breast cancer (BC), ovarian cancer (OC), non-small cell lung cancer (NSCLC) and lymphomas and chronic lymphocytic leukemia (CLL). Upon completion of this CNE activity, oncology nurses should be able to formulate an up-to-date and more complete approach to the care of patients with these cancers.

PURPOSE STATEMENT

To present the most current research developments and to provide the perspectives of clinical investigators on the diagnosis and treatment of BC, OC, NSCLC and lymphomas and CLL.

LEARNING OBJECTIVES

- Develop evidence-based strategies for the initial and long-term management of NSCLC, OC, BC, lymphomas and CLL.
- Use an understanding of tumor biomarkers, histology and targetable genetic alterations to individualize the care of patients with NSCLC, OC, BC, lymphomas and CLL.
- Refine or validate cancer-specific treatment algorithms based on existing and emerging research data.
- Evaluate the mechanisms of action, tolerability and efficacy of novel agents under investigation in these tumor types, and consider their potential implications for clinical practice.
- Recognize immune-related adverse events and other common side effects associated with approved and investigational immunotherapies in order to offer supportive management strategies.

ACCREDITATION STATEMENT

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CREDIT DESIGNATION STATEMENT

This educational activity for 2.75 contact hours is provided by Research To Practice during the period of December 2017 through December 2018.

This activity is awarded 2.75 ANCC pharmacotherapeutic contact hours.

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FOR SUCCESSFUL COMPLETION

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EDITOR

Neil Love, MD
Research To Practice
Miami, Florida

CONTENT VALIDATION AND DISCLOSURES

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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: **Dr Secord** — Advisory Committee: AstraZeneca Pharmaceuticals LP, Genentech BioOncology, Janssen Biotech Inc, Tesaro Inc; Contracted Research: AbbVie Inc, Amgen Inc, Astellas Pharma Global Development Inc, Astex Pharmaceuticals, AstraZeneca Pharmaceuticals LP, Boehringer Ingelheim Pharmaceuticals Inc, Bristol-Myers Squibb Company, Eisai Inc, Endocyte Inc, Exelixis Inc, Genentech BioOncology, GlaxoSmithKline, Incyte Corporation, Merck, Morphotek Inc, Tesaro Inc. **Dr LaCasce** — Advisory Committee: Forty Seven Inc. **Dr Yardley** — Advisory Committee: Novartis; Speakers Bureau: Eisai Inc, Genentech BioOncology. **Dr Johnson** — Consulting Agreements: Astellas Pharma Global Development Inc, Otsuka Pharmaceutical Co Ltd.

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Submit them to us via Facebook or Twitter and we will do our best to get them answered for you

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POST-TEST

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QUESTIONS (PLEASE CIRCLE ANSWER):

1. **Rucaparib was recently approved by the FDA for patients with OC who have _____.**
   a. Received 2 or more prior chemotherapies
   b. Germline but not somatic BRCA mutations
   c. Both a and b

2. **Results from the GOG-0213 trial investigating the addition of bevacizumab to platinum-based chemotherapy demonstrated a significant improvement in _____ for patients with platinum-sensitive recurrent OC.**
   a. Progression-free survival
   b. Overall survival
   c. Both a and b

3. **Strategies to mitigate the risk of tumor lysis syndrome in patients starting therapy with venetoclax include which of the following?**
   a. Prophylactic hydration
   b. Administration of allopurinol/rasburicase
   c. Five-week ramp-up dosing schedule
   d. All of the above

4. **In comparison to intravenous administration, the subcutaneous administration of rituximab is associated with _____.**
   a. A shorter infusion time of 5 to 7 minutes
   b. Similar efficacy
   c. A higher rate of infusion reactions
   d. All of the above
   e. Both a and b
   f. Both a and c
   g. Both b and c

5. **Which of the following categories reflects the mechanism of action of obinutuzumab?**
   a. Antibody-drug conjugate
   b. Anti-PD-1/PD-L1 antibody
   c. Anti-CD20 antibody
   d. Tyrosine kinase inhibitor

6. **Which of the following ALK inhibitors penetrates the central nervous system (CNS) well and thus exhibits significant activity in patients with NSCLC and CNS metastases?**
   a. Alectinib
   b. Ceritinib
   c. Brigatinib
   d. All of the above
   e. Only a and b

7. **The third-generation EGFR inhibitor osimertinib targets both the T790M mutation and wild-type EGFR.**
   a. True
   b. False

8. **The OlympiAD trial evaluating olaparib monotherapy versus chemotherapy demonstrated an improvement in outcomes in the olaparib arm for which patients with HER2-negative metastatic BC?**
   a. All patients
   b. Those with germline BRCA1 or 2 mutations

9. **Results of the Phase III APHINITY trial evaluating the addition of pertuzumab to trastuzumab and chemotherapy demonstrated a modest improvement in invasive disease-free survival among patients with HER2-positive early BC who received the pertuzumab-containing regimen.**
   a. True
   b. False

10. **Prophylactic administration of antidiarrheal medication and corticosteroids decreases by more than half the incidence of Grade 3 or higher diarrhea associated with neratinib.**
    a. True
    b. False

EDUCATIONAL ASSESSMENT AND CREDIT FORM

Oncology Grand Rounds: Investigators Discuss New Agents and Novel Therapies

Research To Practice is committed to providing valuable continuing education for oncology clinicians, and your input is critical to helping us achieve this important goal. Please take the time to assess the activity you just completed, with the assurance that your answers and suggestions are strictly confidential.

PART 1 — Please tell us about your experience with this educational activity

How would you characterize your level of knowledge on the following topics?

4 = Excellent 3 = Good 2 = Adequate 1 = Suboptimal

	BEFORE	AFTER
OlympiAD: Results of a Phase III trial evaluating olaparib versus chemotherapy for HER2-negative mBC	4 3 2 1	4 3 2 1
Activity and tolerability of CDK4/6 inhibitors in patients with ER-positive, HER2-negative mBC	4 3 2 1	4 3 2 1
Role of niraparib and olaparib as maintenance therapy for patients with platinum-sensitive recurrent OC	4 3 2 1	4 3 2 1
GOG-0213 trial: Improvement in overall survival with the addition of bevacizumab to platinum-based chemotherapy for patients with platinum-sensitive recurrent OC	4 3 2 1	4 3 2 1
Preemptive measures to mitigate the risk of tumor lysis syndrome with venetoclax	4 3 2 1	4 3 2 1
Indications for PD-L1 testing and role of pembrolizumab as first-line therapy for patients with NSCLC and a PD-L1 tumor proportion score higher than or equal to 50%	4 3 2 1	4 3 2 1

Practice Setting:

☐ Academic center/medical school ☐ Community cancer center/hospital ☐ Group practice
☐ Solo practice ☐ Government (eg, VA) ☐ Other (please specify).....

Approximately how many new patients with the following do you see per year?

Breast cancer ..... Ovarian cancer ..... Non-small cell lung cancer .....
Chronic lymphocytic leukemia ..... Follicular lymphoma ..... Mantle cell lymphoma .....
Hodgkin lymphoma .....

Was the activity evidence based, fair, balanced and free from commercial bias?

☐ Yes ☐ No If no, please explain:.....

Will this activity help you improve patient care?

☐ Yes ☐ No ☐ Not applicable

If yes, how will it help you improve patient care?.....

.....

Did the activity meet your educational needs and expectations?

☐ Yes ☐ No If no, please explain:.....

Please respond to the following learning objectives (LOs) by circling the appropriate selection:

4 = Yes 3 = Will consider 2 = No 1 = Already doing N/M = LO not met N/A = Not applicable

As a result of this activity, I will be able to:

- Develop evidence-based strategies for the initial and long-term management of NSCLC, OC, BC, lymphomas and CLL. ..... 4 3 2 1 N/M N/A
- Use an understanding of tumor biomarkers, histology and targetable genetic alterations to individualize the care of patients with NSCLC, OC, BC, lymphomas and CLL. ..... 4 3 2 1 N/M N/A
- Refine or validate cancer-specific treatment algorithms based on existing and emerging research data. ..... 4 3 2 1 N/M N/A
- Evaluate the mechanisms of action, tolerability and efficacy of novel agents under investigation in these tumor types, and consider their potential implications for clinical practice. ..... 4 3 2 1 N/M N/A
- Recognize immune-related adverse events and other common side effects associated with approved and investigational immunotherapies in order to offer supportive management strategies. ..... 4 3 2 1 N/M N/A

What other practice changes will you make or consider making as a result of this activity?

.....

.....

What are the barriers to keep you from making a practice change based upon this educational activity?

.....

.....

What additional information or training do you need on the activity topics or other oncology-related topics?

.....

.....

Additional comments about this activity:

.....

.....

PART 2 — Please tell us about the faculty and editor for this educational activity

4 = Excellent 3 = Good 2 = Adequate 1 = Suboptimal

Faculty	Knowledge of subject matter	Effectiveness as an educator
Angeles Alvarez Secord, MD, MHSc	4 3 2 1	4 3 2 1
Ann S LaCasce, MD, MMSc	4 3 2 1	4 3 2 1
Denise A Yardley, MD	4 3 2 1	4 3 2 1
Melissa L Johnson, MD	4 3 2 1	4 3 2 1
Editor	**Knowledge of subject matter**	**Effectiveness as an educator**
Neil Love, MD	4 3 2 1	4 3 2 1

Please recommend additional faculty for future activities:

.....

Other comments about the faculty and editor for this activity:

.....

.....

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Professional Designation:

☐ MD ☐ DO ☐ PharmD ☐ NP ☐ CNS ☐ RN ☐ PA ☐ Other.....

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City, State, Zip:.....

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Email:.....

Signature:..... Date:.....

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