Gynecologic Oncology Update

Issue 2, 2015

TARGET AUDIENCE
This activity is intended for gynecologic and medical oncologists, gynecologists and other healthcare providers involved in the treatment of gynecologic cancers.

OVERVIEW OF ACTIVITY
Gynecologic cancers are comprised of 5 primary tumor types affecting the ovaries, uterine corpus (endometrial cancer), uterine cervix (cervical cancer), vulva and vagina. In 2016, it is anticipated that approximately 105,890 new cases of gynecologic cancer will be documented in the United States and 30,890 individuals will succumb to these diseases. As with many other tumors, patient outcomes are critically dependent on effective multidisciplinary care, which for these cancers often includes contributions from gynecologic, medical and radiation oncologists in addition to pathologists, diagnostic radiologists, oncology nurses and psychosocial services. Interestingly, despite many commonalities, each of these diseases is in fact quite distinct, and in this regard management algorithms employed for each are varied. To bridge the gap between research and patient care, this program uses discussions with Drs Ursula A Matulonis and Kathleen Moore about treatment controversies and the integration of key data sets into the practical management of gynecologic cancers.

LEARNING OBJECTIVES
• Employ current clinical guidelines and available data in the selection of treatment options for patients with commonly diagnosed gynecologic cancers.
• Consider clinical investigator perspectives regarding the indications for BRCA mutation testing, and use this information to appropriately select patients with ovarian cancer (OC) for this analysis.
• Develop an evidence-based algorithm for the initial and long-term treatment of advanced OC considering the role of the recently approved anti-VEGF antibody bevacizumab.
• Appreciate the recent approval of olaparib for patients with highly refractory advanced OC, and integrate this agent into the clinical care of appropriate individuals.
• Develop an understanding of the emerging efficacy data and toxicity profiles of investigational agents in OC to effectively prioritize clinical trial opportunities for appropriate patients.
• Implement a long-term clinical plan for the management of metastatic endometrial and cervical cancers, incorporating existing, recently approved and investigational targeted treatments.

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Successful completion of this CME activity enables the participant to earn up to 1.75 MOC points in the American Board of Internal Medicine’s (ABIM) Maintenance of Certification (MOC) program. Participants will earn MOC points equivalent to the amount of CME credits claimed for the activity. It is the CME activity provider’s responsibility to submit participant completion information to ACCME for the purpose of granting ABIM MOC credit.

Please note, this program has been specifically designed for the following ABIM specialty: medical oncology.

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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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Borghaei H et al. Phase 1 study of IMGN853, a folate receptor alpha (FRα)-targeting antibody-drug conjugate (ADC) in patients (Pts) with epithelial ovarian cancer (EOC) and other FRA-positive solid tumors. *Proc ASCO* 2015;Abstract 5558.


Disis ML et al. Avelumab (MSB0010718C), an anti-PD-L1 antibody, in patients with previously treated, recurrent or refractory ovarian cancer: A phase Ib, open-label expansion trial. *Proc ASCO* 2015;Abstract 5509.

Do KT et al. Phase I trial of AZD1775 (MK1775), a wee1 kinase inhibitor, in patients with refractory solid tumors. *Proc ASCO* 2014;Abstract 2503.

Domchek SM et al. Efficacy and safety of olaparib monotherapy in germline BRCA1/2 mutation carriers with advanced ovarian cancer and three or more lines of prior therapy. *Gynecol Oncol* 2016;140(2):199-203.


Matulonis U et al. Frequency, severity and timing of common adverse events (AEs) with maintenance olaparib in patients (pts) with platinum-sensitive relapsed serous ovarian cancer (PSR SOC). *Proc ASCO* 2015;Abstract 5550.
