



Visiting Professors

A case-based discussion on the management of breast cancer

CLINICAL INVESTIGATOR

Hyman B Muss, MD

MODERATOR

Neil Love, MD

CONSULTING ONCOLOGIST

Allan Freedman, MD

Featuring a clinical investigator's perspective on a day spent visiting patients with breast cancer in the clinic of a community-based oncologist



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From the publishers of:

Breast Cancer[®]
UPDATE



Visiting Professors: A case-based discussion on the management of breast cancer

OVERVIEW OF ACTIVITY

Individualized treatment decisions for patients with early, locally advanced or metastatic breast cancer are driven by disease- and patient-specific characteristics. The numerous therapeutic agents and regimens with significant activity in the management of breast cancer provide ample opportunity to deliver tailored care. However, the multiplicity of alternatives may also yield clinical scenarios in which several acceptable treatment options are available, with the optimal strategy being highly debatable and dependent on a thorough understanding of each agent's unique benefits and risks.

To provide clinicians with therapeutic strategies to address the disparate needs of patients with breast cancer, the *Visiting Professors* audio series employs an innovative case-based approach that unites the perspectives of leading breast cancer investigators and community oncologists as they explore the intricacies of making treatment decisions. Upon completion of this CME activity, medical oncologists should be able to formulate an up-to-date and more complete approach to the care of patients with breast cancer.

LEARNING OBJECTIVES

- Apply case-based learning, innovative communication strategies and shared clinical insight to provide comprehensive and compassionate oncology care.
- Use currently available tissue-based genomic assays to assist with therapeutic decision-making in the management of node-negative and node-positive early breast cancer.
- Apply the results of emerging research to effectively integrate HER2-directed treatments into the systemic management of both early and advanced HER2-overexpressing breast cancer.
- Effectively integrate biologic, hormonal and cytotoxic therapy into the multifaceted management of metastatic breast cancer.
- Communicate the benefit-risk profile of bevacizumab and its evidence-based therapeutic partners to appropriate patients with metastatic breast cancer.
- Counsel appropriately selected patients about the availability of ongoing clinical trial participation.

ACCREDITATION STATEMENT

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CREDIT DESIGNATION STATEMENT

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HOW TO USE THIS CME ACTIVITY

This CME activity contains an audio component. To receive credit, the participant should review the CME information, listen to the CD, complete the Post-test with a score of 70% or better and fill out the Educational Assessment and Credit Form located in the back of this booklet or on our website at ResearchToPractice.com/VPB211/CME.

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CLINICAL INVESTIGATOR

**Hyman B. Muss, MD**

Professor of Medicine
University of North Carolina
Director of Geriatric Oncology
Lineberger Comprehensive
Cancer Center
Chapel Hill, North Carolina

CONSULTING ONCOLOGIST

**Allan Freedman, MD**

Suburban Hematology-Oncology
Associates, PC
Snellville, Georgia
Clinical Assistant Professor
of Medicine, Department
of Hematology-Oncology, Emory
University School of Medicine
Atlanta, Georgia

MODERATOR

**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 real or apparent conflicts of interest, which have been resolved through a conflict of interest resolution process: **Dr. Muss** — *Consulting Agreements:* Amgen Inc, Boehringer Ingelheim Pharmaceuticals Inc, Bristol-Myers Squibb Company, Celgene Corporation, Eisai Inc, Pfizer Inc, Roche Laboratories Inc, Sandoz. **Dr. Freedman** — *Stock Ownership:* Celgene Corporation, Novartis Pharmaceuticals Corporation.

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QUESTIONS (PLEASE CIRCLE ANSWER):

- 1. The NSABP is conducting a large randomized trial of adjuvant trastuzumab for patients with HER2-normal early breast cancer.**
 - a. True
 - b. False
- 2. In the ECOG-E2100 study, the addition of bevacizumab to first-line paclitaxel in patients with metastatic breast cancer resulted in _____.**
 - a. An improvement in median overall survival
 - b. A near doubling in median progression-free survival
 - c. Both a and b
- 3. What is the “Memorial Sloan-Kettering schedule” for administration of capecitabine?**
 - a. Seven days on, 7 days off
 - b. Fourteen days on, 7 days off
 - c. Twenty-one days on, 14 days off
- 4. Which of the following are commonly observed lapatinib-associated side effects?**
 - a. Diarrhea
 - b. Rash
 - c. Fatigue
 - d. All of the above
- 5. RxPONDER is an ongoing Phase III study evaluating adjuvant endocrine therapy with or without chemotherapy for patients with ER-positive, HER2-negative breast cancer with an Oncotype DX® Recurrence Score® less than or equal to 25 and _____.**
 - a. Negative nodes
 - b. One to 3 positive nodes
 - c. Four or fewer positive nodes
- 6. In the Neo-ALTTO study, no difference was observed in the pathologic complete response (pCR) rate between patients with HER2-positive early breast cancer who received neoadjuvant paclitaxel in combination with trastuzumab/lapatinib compared to those who received paclitaxel in combination with trastuzumab.**
 - a. True
 - b. False
- 7. The BETH trial is evaluating the addition of _____ to adjuvant chemotherapy/trastuzumab for patients with HER2-positive early breast cancer.**
 - a. Lapatinib
 - b. Neratinib
 - c. Bevacizumab
- 8. Which of the following is an antibody-drug conjugate targeting HER2-positive breast cancer?**
 - a. Pertuzumab
 - b. T-DM1
 - c. Neratinib
 - d. Lapatinib
- 9. Patients with low Oncotype DX Recurrence Scores who undergo neoadjuvant chemotherapy are more likely to experience _____.**
 - a. High rates of pCR
 - b. Low rates of pCR
 - c. RS does not predict pCR
- 10. Neutropenic fever is observed in approximately 25% of patients receiving adjuvant docetaxel/cyclophosphamide without growth factor support.**
 - a. True
 - b. False

Educational Assessment and Credit Form
Visiting Professors Breast Cancer, Issue 2, 2011

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			
Prospective clinical trials with the Oncotype DX assay in node-negative (TAILORx) and node-positive (RxPONDER) early breast cancer	4	3	2	1	4	3	2	1
Clinical benefits of chemotherapy/bevacizumab as second-line therapy for HER2-negative metastatic breast cancer (RIBBON 2 trial)	4	3	2	1	4	3	2	1
Neo-ALTO study: Efficacy and tolerability of neoadjuvant paclitaxel with trastuzumab, lapatinib or the combination in HER2-positive early breast cancer	4	3	2	1	4	3	2	1
Novel HER2-targeted therapies currently under investigation in clinical trials	4	3	2	1	4	3	2	1

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

Yes No

If no, please explain:

Please identify how you will change your practice as a result of completing this activity (select all that apply).

- This activity validated my current practice; no changes will be made
- Create/revise protocols, policies and/or procedures
- Change the management and/or treatment of my patients
- Other (please explain):

If you intend to implement any changes in your practice, please provide 1 or more examples:

.....

The content of this activity matched my current (or potential) scope of practice.

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:

- Apply case-based learning, innovative communication strategies and shared clinical insight to provide comprehensive and compassionate oncology care 4 3 2 1 N/M N/A
- Use currently available tissue-based genomic assays to assist with therapeutic decision-making in the management of node-negative and node-positive early breast cancer 4 3 2 1 N/M N/A
- Apply the results of emerging research to effectively integrate HER2-directed treatments into the systemic management of both early and advanced HER2-overexpressing breast cancer.. 4 3 2 1 N/M N/A
- Effectively integrate biologic, hormonal and cytotoxic therapy into the multifaceted management of metastatic breast cancer. 4 3 2 1 N/M N/A
- Communicate the benefit-risk profile of bevacizumab and its evidence-based therapeutic partners to appropriate patients with metastatic breast cancer. 4 3 2 1 N/M N/A
- Counsel appropriately selected patients about the availability of ongoing clinical trial participation. 4 3 2 1 N/M N/A

EDUCATIONAL ASSESSMENT AND CREDIT FORM (continued)

Please describe any clinical situations that you find difficult to manage or resolve that you would like to see addressed in future educational activities:

.....

Would you recommend this activity to a colleague?

Yes No

If no, please explain:

Additional comments about this activity:

.....

As part of our ongoing, continuous quality-improvement effort, we conduct postactivity follow-up surveys to assess the impact of our educational interventions on professional practice. Please indicate your willingness to participate in such a survey.

- Yes, I am willing to participate in a follow-up survey.
- No, I am not willing to participate in a follow-up survey.

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

	4 = Excellent	3 = Good	2 = Adequate	1 = Suboptimal
Faculty	Knowledge of subject matter			Effectiveness as an educator
Hyman B Muss, MD	4	3	2	1
Allan Freedman, MD	4	3	2	1
Moderator	Knowledge of subject matter			Effectiveness as an educator
Neil Love, MD	4	3	2	1

Please recommend additional faculty for future activities:

.....

Other comments about the faculty and moderator for this activity:

.....

REQUEST FOR CREDIT — Please print clearly

Name: Specialty:

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Street Address: Box/Suite:

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I certify my actual time spent to complete this educational activity to be _____ hour(s).

Signature: Date:

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Visiting Professors

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Contact Information	Neil Love, MD Research To Practice One Biscayne Tower 2 South Biscayne Boulevard, Suite 3600 Miami, FL 33131 Fax: (305) 377-9998 Email: DrNeilLove@ResearchToPractice.com
For CME/CNE Information	Email: CE@ResearchToPractice.com

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