

Challenging Cases in Breast Cancer

Oncologist and Nurse Investigators Consult on Actual Patients from the Practices of the Invited Faculty

The fifth of 6 integrated symposia in an oncology curriculum

CNE INFORMATION

TARGET AUDIENCE

This activity has been designed to meet the educational needs of oncology nurses, nurse practitioners and clinical nurse specialists involved in the treatment of breast cancer.

OVERVIEW OF ACTIVITY

Breast cancer remains the most frequently diagnosed cancer in women and will culminate in an estimated 232,340 new cases and 39,620 attributable deaths in the United States in 2013 alone. Advances in screening and prevention have resulted in a steady down-stage migration at the time of disease presentation, such that only 5% of women have identifiable distant metastases at primary diagnosis. Because of this the number of individuals living with breast cancer has increased substantially, as has the population “at risk” for recurrent disease. Thus, the long-term care of patients with breast cancer remains an important issue to researchers and clinicians alike, and oncology nurses play an integral role in the successful delivery of systemic anticancer therapy and in the maintenance of patient physical and psychosocial well-being.

These video proceedings from the fifth part of a 6-part integrated CNE curriculum originally held at the 2013 ONS Annual Congress feature discussions with leading breast cancer investigators and their nursing counterparts regarding actual patient cases and recent clinical research findings affecting the optimal therapeutic and supportive care for each patient scenario. By providing information on the latest research developments in the context of expert perspectives, this CNE activity will assist oncology nurses, nurse practitioners and clinical nurse specialists with the formulation of state-of-the-art clinical management strategies to facilitate optimal care of patients with breast cancer.

LEARNING OBJECTIVES

- Discuss the benefits and risks associated with systemic therapies used in the evidence-based treatment of breast cancer, including endocrine agents, chemotherapy regimens and biologic treatments.

- Develop a plan to manage the side effects associated with these therapies to support quality of life and continuation of treatment.
- Identify opportunities to enhance the collaborative role of oncology nurses in the comprehensive biopsychosocial care of patients with breast cancer to improve clinical outcomes.
- Recall ongoing trials of investigational approaches and treatment strategies in breast cancer, and consent and refer patients for study participation.

ACCREDITATION STATEMENT

Research To Practice is accredited as a provider of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation.

CREDIT DESIGNATION STATEMENT

This educational activity for 1.5 contact hours is provided by Research To Practice during the period of July 2013 through July 2014.

HOW TO USE THIS CNE ACTIVITY

This CNE activity consists of a video component. To receive credit, the participant should watch the video, complete the Post-test with a score of 70% or better and fill out the Educational Assessment and Credit Form located at ResearchToPractice.com/ONSBreast2013/Video/CNE.

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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:

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MODERATOR — Dr Love is president and CEO of Research To Practice, which receives funds in the form of educational grants to develop CME/CNE activities from the following commercial interests: AbbVie Inc, Algeta US, Allos Therapeutics, Amgen Inc, ArQule Inc, Astellas, Aveo Pharmaceuticals, Bayer HealthCare Pharmaceuticals, Biodesix Inc, Biogen Idec, Boehringer Ingelheim Pharmaceuticals Inc, Bristol-Myers Squibb Company, Celgene Corporation, Daiichi Sankyo Inc, Dendreon Corporation, Eisai Inc, EMD Serono Inc, Foundation Medicine Inc, Genentech BioOncology, Genomic Health Inc, Gilead Sciences Inc, Incyte Corporation, Lilly USA LLC, Medivation Inc, Merck, Millennium: The Takeda Oncology Company, Mundipharma International Limited, Novartis Pharmaceuticals Corporation, Onyx Pharmaceuticals Inc, Prometheus Laboratories Inc, Regeneron Pharmaceuticals, Sanofi, Seattle Genetics, Spectrum Pharmaceuticals Inc and Teva Oncology.

RESEARCH TO PRACTICE STAFF AND EXTERNAL

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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

There is no implied or real endorsement of any product by RTP or the American Nurses Credentialing Center

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SELECT PUBLICATIONS

A randomized multicenter, double-blind, placebo-controlled comparison of chemotherapy plus trastuzumab plus placebo versus chemotherapy plus trastuzumab plus pertuzumab as adjuvant therapy in patients with operable HER2-positive primary breast cancer. NCT01358877

A study of trastuzumab-DM1 plus pertuzumab versus trastuzumab [Herceptin] plus a taxane in patients with metastatic breast cancer. NCT01120184

Baselga J et al. **Everolimus in postmenopausal hormone-receptor-positive advanced breast cancer.** *N Engl J Med* 2012;366(6):520-29.

Baselga J et al. **Pertuzumab plus trastuzumab plus docetaxel for metastatic breast cancer.** *N Engl J Med* 2012;366(2):109-19.

Bergh J et al. **FACT: An open-label randomized phase III study of fulvestrant and anastrozole in combination compared with anastrozole alone as first-line therapy for patients with receptor-positive postmenopausal breast cancer.** *J Clin Oncol* 2012;30(16):1919-25.

Blackwell K et al. **Overall survival benefit with lapatinib in combination with trastuzumab for patients with human epidermal growth factor receptor 2-positive metastatic breast cancer: Final results from the EGF104900 Study.** *J Clin Oncol* 2012;30(21):2585-92.

Cortes J et al. **Eribulin monotherapy versus treatment of physician's choice in patients with metastatic breast cancer (EMBRACE): A phase 3 open-label randomised study.** *Lancet* 2011;377(9769):914-23.

Datko F et al. **Phase II study of pertuzumab, trastuzumab, and weekly paclitaxel in patients with metastatic HER2-overexpressing metastatic breast cancer.** *Proc SABCS 2012*;Abstract P5-18-20.

Di Cosimo S, Baselga J. **Management of breast cancer with targeted agents: Importance of heterogeneity.** *Nat Rev Clin Oncol* 2010;7(3):139-47.

Jordan MA et al. **The primary antimetabolic mechanism of action of the synthetic halichondrin E7389 is suppression of microtubule growth.** *Mol Cancer Ther* 2005;4(7):1086-95.

Kaufman PA et al. **A phase III, open-label, randomized, multicenter study of eribulin mesylate versus capecitabine in patients with locally advanced or metastatic breast cancer previously treated with anthracyclines and taxanes.** *Proc SABCS 2012*;Abstract S6-6.

LoRusso PM et al. **Trastuzumab emtansine: A unique antibody-drug conjugate in development for human epidermal growth factor receptor 2-positive cancer.** *Clin Cancer Res* 2011;17(20):6437-47.

Mehta RS et al. **Combination anastrozole and fulvestrant in metastatic breast cancer.** *N Engl J Med* 2012;367(5):435-44.

Rugo HS et al. **CALGB 40502/NCCTG N063H: Randomized phase III trial of weekly paclitaxel (P) compared to weekly nanoparticle albumin bound nab-paclitaxel (NP) or ixabepilone (Ix) with or without bevacizumab (B) as first-line therapy for locally recurrent or metastatic breast cancer (MBC).** *Proc ASCO 2012*;Abstract CRA 1002.

Seah et al. **Use and duration of chemotherapy (CT) in patients (pts) with metastatic breast cancer (MBC) according to tumor subtype (TS) and line of therapy (tx).** *Proc ASCO 2012*;Abstract 6089.

Swain SM et al. **Pertuzumab, trastuzumab, and docetaxel for HER2-positive metastatic breast cancer (CLEOPATRA study): Overall survival results from a randomised, double-blind, placebo-controlled, phase 3 study.** *Lancet Oncol* 2013;14(6):461-71.

Swain S et al. **Confirmatory overall survival (OS) analysis of CLEOPATRA: A randomized, double-blind, placebo-controlled phase III study with pertuzumab (P), trastuzumab (T), and docetaxel (D) in patients (pts) with HER2-positive first-line (1L) metastatic breast cancer (MBC).** *Proc SABCS 2012*;Abstract P5-18-26.

Verma S et al. **Trastuzumab emtansine for HER2-positive advanced breast cancer.** *N Engl J Med* 2012;367(19):1783-91.