

Challenging Cases in Lung Cancer

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

The fourth 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 lung cancer.

OVERVIEW OF ACTIVITY

Lung cancer is a devastating disease with broad-reaching impact on public health as it accounts for 15% of all new cancer cases in the United States and the most cancer-related deaths among both men and women. In the year 2013, it is estimated that 228,190 individuals will be diagnosed and 159,480 individuals will die from the disease. Chemotherapy has been the mainstay systemic therapeutic intervention in lung cancer, and the number of available cytotoxic chemotherapies exhibiting activity has increased substantially over the past several years. Development of new therapeutic strategies beyond chemotherapy has been the focus of extensive recent research, and the result has been the availability of several therapies demonstrating some degree of activity in subsets of non-small cell lung cancer (NSCLC) with unique tolerability profiles that are distinct from those of traditional chemotherapeutics. The advent of these next-generation targeted treatments presents new promise of both efficacy and enhanced safety for patients but also challenges clinicians who must integrate such therapies into standard treatment algorithms. 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 fourth part of a 6-part integrated CNE curriculum originally held at the 2013 ONS Annual Congress feature discussions with leading lung 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 lung cancer.

LEARNING OBJECTIVES

- Discuss the benefits and risks associated with systemic treatments used in the evidence-based treatment of metastatic NSCLC, including chemotherapeutic agents and targeted biologic therapies.
- Communicate the clinical relevance of gene mutations and tumor histology to patients with NSCLC.
- Explain the relative risk of treatment-induced side effects to patients with NSCLC who are eligible to receive chemotherapy and bevacizumab.
- Educate patients receiving EGFR inhibitors about preventive and emergent strategies to reduce or ameliorate dermatotoxicity.
- Identify opportunities to enhance the collaborative role of oncology nurses in the comprehensive biopsychosocial care of patients with advanced NSCLC to improve clinical and quality-of-life outcomes.
- Recall ongoing trials of investigational approaches and treatment strategies in NSCLC, 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/ONSLung2013/Video/CNE.

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:

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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

- Gridelli C et al. **Randomized phase IIIb trial evaluating the continuation of bevacizumab beyond disease progression in patients with advanced non-squamous non-small-cell lung cancer after first-line treatment with bevacizumab plus platinum-based chemotherapy: Treatment rationale and protocol dynamics of the AvaALL (MO22097) trial.** *Clin Lung Cancer* 2011;12(6):407-11.
- Janjigian YY et al. **Activity of afatinib/cetuximab in patients (pts) with EGFR mutant non-small cell lung cancer (NSCLC) and acquired resistance (AR) to EGFR inhibitors.** *Proc ESMO* 2012;Abstract 12270.
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- Lynch TJ et al. **Epidermal growth factor receptor inhibitor-associated cutaneous toxicities: An evolving paradigm in clinical management.** *Oncologist* 2007;12(5):610-21.
- Oxnard GR et al. **New strategies in overcoming acquired resistance to epidermal growth factor receptor tyrosine kinase inhibitors in lung cancer.** *Clin Cancer Res* 2011;17(17):5530-7.
- Ramalingam SS et al. **Randomized phase II study of dacomitinib (PF-00299804), an irreversible pan-human epidermal growth factor receptor inhibitor, versus erlotinib in patients with advanced non-small-cell lung cancer.** *J Clin Oncol* 2012;30(27):3337-44.
- Ricciardi S et al. **Toxicity of targeted therapy in non-small-cell lung cancer management.** *Clin Lung Cancer* 2009;10(1):28-35.
- Riely GJ et al. **Prospective assessment of discontinuation and reinitiation of erlotinib or gefitinib in patients with acquired resistance to erlotinib or gefitinib followed by the addition of everolimus.** *Clin Cancer Res* 2007;13(17):5150-5.
- Rosell R et al. **Erlotinib versus standard chemotherapy as first-line treatment for European patients with advanced EGFR mutation-positive non-small-cell lung cancer (EURTAC): A multicentre, open-label, randomised phase 3 trial.** *Lancet Oncol* 2012;13(3):239-46.
- Saif MW et al. **Erlotinib-induced skin rash. Pathogenesis, clinical significance and management in pancreatic cancer patients.** *JOP* 2008;9(3):267-74.
- Shaw AT et al. **Phase III study of crizotinib versus pemetrexed or docetaxel chemotherapy in patients with advanced ALK-positive non-small cell lung cancer (NSCLC) (PROFILE 1007).** *Proc ESMO* 2012;Abstract LBA1_PR.
- Socinski MA et al. **Weekly nab-paclitaxel in combination with carboplatin versus solvent-based paclitaxel plus carboplatin as first-line therapy in patients with advanced non-small-cell lung cancer: Final results of a phase III trial.** *J Clin Oncol* 2012;30(17):2055-62.
- Yang JC et al. **LUX-Lung 3: A randomized, open-label, phase III study of afatinib versus pemetrexed and cisplatin as first-line treatment for patients with advanced adenocarcinoma of the lung harboring EGFR-activating mutations.** *Proc ASCO* 2012;Abstract LBA7500.