# Challenging Cases in Prostate Cancer

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

The second 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 prostate cancer.

#### **OVERVIEW OF ACTIVITY**

Cancers of the genitourinary system affect hundreds of thousands of individuals within the United States each year, accounting for almost 30% of all newly diagnosed human cancers. Tumors of the prostate are definitively the most prevalent and are thus the topic of extensive ongoing clinical research. Consequently, the clinical management of prostate cancer is frequently in a state of evolution, necessitating rapid and consistent clinician access to emerging data sets of relevance to the continuous delivery of quality cross-functional care.

These video proceedings from the second part of a 6-part integrated CNE curriculum originally held at the 2013 ONS Annual Congress feature discussions with leading prostate 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 prostate cancer.

#### **LEARNING OBJECTIVES**

- Discuss the benefits and risks associated with systemic therapies used in the evidence-based treatment of castration-resistant prostate cancer (CRPC), including "secondary" hormonal agents, chemotherapy and immunotherapeutics.
- Develop a plan to manage the side effects associated with commonly used systemic therapies in CRPC to support patient quality of life and minimize the potential for treatment discontinuation.

- Review the available efficacy and safety data related to the use of radium-223 chloride and other bone-targeted agents in patients with skeletal metastases to facilitate appropriate counseling for these individuals.
- Identify opportunities to enhance the collaborative role of oncology nurses in the biopsychosocial care of patients with advanced prostate cancer to optimize clinical and quality-of-life outcomes.
- Recall ongoing trials of investigational approaches and agents in advanced prostate 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/ONSProstate2013/Video/CNE.

## **CONTENT VALIDATION AND DISCLOSURES**

Research To Practice (RTP) is committed to providing its participants with high-quality, unbiased and state-of-the-art education. We assess potential conflicts of interest with faculty, planners and managers of CNE activities. Real or apparent conflicts of interest are identified and resolved through a conflict of interest resolution process. In addition, all activity content is reviewed by both a member of the RTP scientific staff and an external, independent physician reviewer for fair balance, scientific objectivity of studies referenced and patient care recommendations.

**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:

#### William K Oh, MD

Chief, Division of Hematology and Medical Oncology Professor of Medicine and Urology Ezra M Greenspan, MD Professor in Clinical Cancer Therapeutics Mount Sinai School of Medicine Associate Director of Clinical Research The Tisch Cancer Institute New York, New York

Consulting Agreements: Amgen Inc, Astellas, Bayer HealthCare Pharmaceuticals, Bellicum Pharmaceuticals Inc, Dendreon Corporation, Janssen Pharmaceuticals Inc, Medivation Inc, Pfizer Inc, Sanofi; Paid Research: Millennium: The Takeda Oncology Company.

## Doris Pindilli, MS, APN-C, AOCNP

Advanced Practice Nurse
Department of Medicine
The Cancer Institute of New Jersey
New Brunswick, New Jersey
Adjunct Faculty Member
UMDNJ School of Nursing
Newark, New Jersey

No real or apparent conflicts of interest to report.

## A Oliver Sartor, MD

Medical Director, Tulane Cancer Center Laborde Professor of Cancer Research Professor of Medicine and Urology Tulane Medical School New Orleans, Louisiana

Advisory Committee: Bayer HealthCare Pharmaceuticals, Sanofi; Consulting Agreements: Algeta US, Bayer HealthCare Pharmaceuticals, Celgene Corporation, GlaxoSmithKline, Medivation Inc, Millennium: The Takeda Oncology Company, OncoGenex Pharmaceuticals Inc, Pfizer Inc, Sanofi; Contracted Research: AstraZeneca Pharmaceuticals LP, Bayer HealthCare Pharmaceuticals, Millennium: The Takeda Oncology Company, Sanofi.

## Victoria Sinibaldi, MS, CRNP

Adult and Geriatric Nurse Practitioner Research Associate in Oncology Faculty School of Medicine Research Program Coordinator, GU Oncology Johns Hopkins University Baltimore, Maryland

No real or apparent conflicts of interest to report.

**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.

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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

Berthold DR et al. **Docetaxel plus prednisone or mitoxantrone plus prednisone for advanced prostate cancer: Updated survival in the TAX 327 study.** *J Clin Oncol* 2008;26(2):242-5.

Crook JM et al. Intermittent androgen suppression for rising PSA level after radiotherapy. *N Engl J Med* 2012;367(10):895-903.

De Bono JS et al. Primary, secondary, and quality-of-life endpoint results from the phase III AFFIRM study of MDV3100, an androgen receptor signaling inhibitor. *Proc ASCO* 2012; Abstract 4519.

De Bono JS et al. Prednisone plus cabazitaxel or mitoxantrone for metastatic castration-resistant prostate cancer progressing after docetaxel treatment: A randomised open-label trial. *Lancet* 2010;376(9747):1147-54.

Fizazi K et al. Abiraterone acetate for treatment of metastatic castration-resistant prostate cancer: Final overall survival analysis of the COU-AA-301 randomised, double-blind, placebo-controlled phase 3 study. *Lancet Oncol* 2012;13(10):983-92.

Halperin EC, Perez CA, Brady LW, eds. *Principles and Practice of Radiation Oncology.* 5th ed. Philadelphia, PA: Lippincott Williams & Wilkins: 2008.

Harrison MR et al. Radium-223 chloride: A potential new treatment for castration-resistant prostate cancer patients with metastatic bone disease. *Cancer Manag Res* 2013;5:1-14.

Hussain M et al. Intermittent versus continuous androgen deprivation in prostate cancer. N Engl J Med 2013;368(14):1314-25.

Kantoff P et al. **Updated survival results of the IMPACT trial of sipuleucel-T for metastatic castration-resistant prostate cancer (CRPC).** Genitourinary Cancers Symposium 2010; **Abstract 8**.

Kantoff PW et al; IMPACT Study Investigators. **Sipuleucel-T immunotherapy for castration-resistant prostate cancer.** *N Engl J Med* 2010;363(5):411-22.

McDevitt MR et al. Radioimmunotherapy with alpha-emitting nuclides. Eur J Nucl Med 1998;25(9):1341-51.

Parker C et al. Updated survival, quality of life (QOL), and safety data of radium-223 chloride (Ra-223) in patients with castration-resistant prostate cancer (CRPC) with bone metastases from the phase 3 double-blind, randomized, multinational study (ALSYMPCA). *Proc ESMO* 2012. No abstract available

Porter AT et al. Results of a randomized phase-III trial to evaluate the efficacy of strontium-89 adjuvant to local field external beam irradiation in the management of endocrine resistant metastatic prostate cancer. Int J Radiat Biol Phys 1993;25(5):805-13.

Ryan CJ et al. Interim analysis results of COU-AA-302, a randomized, phase III study of abiraterone acetate in chemotherapynaive patients with metastatic castration-resistant prostate cancer. *Proc ASCO* 2012; Abstract LBA4518.

Sartor O. Androgen deprivation — Continuous, intermittent, or none at all? N Engl J Med 2012;367(10):945-6.

Scher HI et al. Increased survival with enzalutamide in prostate cancer after chemotherapy. *N Engl J Med* 2012;367(13):1187-97.

Tannock IF et al. **Docetaxel plus prednisone or mitoxantrone plus prednisone for advanced prostate cancer.** *N Engl J Med* 2004;351(15):1502-12.