

Oncology Nursing™

U P D A T E

Clinical Investigator and Nursing Perspectives
on the Management of Common Cancers

FACULTY INTERVIEWS

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**METASTATIC
COLORECTAL
CANCER**

CNE
Activity

Oncology Nursing Update Metastatic Colorectal Cancer

A Continuing Nursing Education Audio Series

OVERVIEW OF ACTIVITY

Cancer of the colon and rectum is one of the most rapidly evolving fields in oncology nursing and is the fourth most frequently diagnosed cancer and the second most common cause of death among all neoplasms in the United States (approximately 9% of all cancer deaths). Published results from ongoing trials continually lead to the emergence of novel biomarkers and new therapeutic targets and regimens, so that individualized therapeutic approaches have become the standard. This paradigm shift presents a challenge to practicing oncologists and other members of the treatment team who must grapple with the presentation of ambiguous data sets and their immediate implications for management decisions. To provide oncology nurses with therapeutic strategies to address the disparate needs of patients with metastatic colorectal cancer (mCRC), the *Oncology Nursing Update* audio series employs one-on-one interviews with medical oncologists and nurses who are experts in caring for patients with mCRC. Upon completion of this CNE activity, oncology nurses should be able to formulate an up-to-date and more complete approach to the care of patients with mCRC.

PURPOSE STATEMENT

To present the most current research developments in mCRC and to provide the perspectives of a medical oncologist and oncology nurse on the treatment of mCRC.

LEARNING OBJECTIVES

- Discuss the benefits and risks associated with systemic therapies used in the evidence-based treatment of mCRC, including chemotherapy and targeted biologic approaches.
- Develop a plan of care to manage the side effects associated with these therapies to support quality of life and continuation of treatment.
- Recognize the recent FDA approvals of bevacizumab upon disease progression, aflibercept and regorafenib, and identify clinical situations for which these agents may be appropriate therapeutic options.
- Identify opportunities to enhance the collaborative role of oncology nurses in the comprehensive biopsychosocial care of patients with mCRC.

ACCREDITATION STATEMENT

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CREDIT DESIGNATION STATEMENT

This educational activity for 1.4 contact hours is provided by Research To Practice during the period of March 2014 through March 2015.

FOR SUCCESSFUL COMPLETION

This is an audio CNE program. This booklet contains CNE information, including learning objectives, faculty disclosures, a Post-test and an Educational Assessment and Credit Form. The corresponding website ResearchToPractice.com/ONUCRC114 also includes links to relevant abstracts and full-text articles.

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CNE INFORMATION

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SELECT PUBLICATIONS

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QUESTIONS (PLEASE CIRCLE ANSWER):

- Which of the following is an FDA-approved option for continued anti-angiogenic, VEGF-targeted treatment after disease progression on first-line therapy for mCRC?
 - Aflibercept
 - Bevacizumab beyond progression
 - Cetuximab
 - Both a and b
 - All of the above
- Common side effects associated with aflibercept include _____.
 - Hypertension
 - Neutropenia
 - Diarrhea
 - All of the above
- Patients with _____ do not benefit from treatment with EGFR antibodies (cetuximab, panitumumab).
 - KRAS mutation-positive mCRC
 - KRAS wild-type mCRC
- Potential contraindications to the use of bevacizumab include _____.
 - Recent myocardial infarction
 - Recent stroke
 - Presence of a colon stent
 - All of the above
- Regorafenib is an orally administered _____.
 - EGFR antibody
 - Multikinase inhibitor
 - Immunotherapeutic agent
- On the STEPP study, which evaluated preemptive versus reactive treatment for skin toxicities associated with the use of panitumumab, preemptive skin treatment consisting of _____ resulted in decreased dermatologic toxicities.
 - Skin moisturizing lotions
 - Sunscreen applied before going outdoors
 - Topical steroid cream applied twice a day
 - Doxycycline antibiotic
 - All of the above
- The Phase III CORRECT trial of regorafenib in combination with best supportive care versus placebo in combination with best supportive care for patients with mCRC whose disease progressed on standard therapies reported a statistically significant improvement in median overall survival for patients who received regorafenib.
 - True
 - False
- _____ is a side effect commonly associated with regorafenib therapy for patients with mCRC.
 - Hand-foot skin reaction
 - Hypertension
 - Diarrhea
 - Fatigue
 - All of the above

EDUCATIONAL ASSESSMENT AND CREDIT FORM

Oncology Nursing Update Metastatic Colorectal Cancer — Issue 1, 2014

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
Results of the CORRECT trial of regorafenib with best supportive care (BSC) versus placebo with BSC for patients with mCRC whose disease has progressed after standard therapies	4 3 2 1	4 3 2 1
Management of bevacizumab-associated hypertension	4 3 2 1	4 3 2 1
Prophylaxis of dermatologic toxicities associated with EGFR antibodies	4 3 2 1	4 3 2 1
New options for continued anti-angiogenic treatment — aflibercept, bevacizumab beyond progression, regorafenib — after disease progression on first-line therapy for mCRC	4 3 2 1	4 3 2 1
Prevention and management of regorafenib-related hand-foot syndrome	4 3 2 1	4 3 2 1

Has the activity unfairly influenced you toward a particular product or service?

Yes No

If yes, please describe what was presented:

.....

Will this activity help you improve patient care?

Yes No Not applicable

If yes, how will it help you improve patient care?.....

.....

.....

Did the activity meet your educational needs and expectations?

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:

- Discuss the benefits and risks associated with systemic therapies used in the evidence-based treatment of mCRC, including chemotherapy and targeted biologic approaches.4 3 2 1 N/M N/A
- Develop a plan of care to manage the side effects associated with these therapies to support quality of life and continuation of treatment.4 3 2 1 N/M N/A
- Recognize the recent FDA approvals of bevacizumab upon disease progression, aflibercept and regorafenib, and identify clinical situations for which these agents may be appropriate therapeutic options.4 3 2 1 N/M N/A
- Identify opportunities to enhance the collaborative role of oncology nurses in the comprehensive biopsychosocial care of patients with mCRC.4 3 2 1 N/M N/A

EDUCATIONAL ASSESSMENT AND CREDIT FORM (continued)

What other practice changes will you make or consider making as a result of this activity?

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What additional information or training do you need on the activity topics or other oncology-related topics?

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Additional comments about this activity:

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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 editor for this educational activity

	4 = Excellent	3 = Good	2 = Adequate	1 = Suboptimal				
Faculty	Knowledge of subject matter				Effectiveness as an educator			
Axel Grothey, MD	4	3	2	1	4	3	2	1
Jessica Mitchell, RN, CNP, MPH	4	3	2	1	4	3	2	1
Editor	Knowledge of subject matter				Effectiveness as an educator			
Neil Love, MD	4	3	2	1	4	3	2	1

Please recommend additional faculty for future activities:

.....
.....

Other comments about the faculty and editor for this activity:

.....
.....

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