

DATA AND PERSPECTIVES

Clinical Investigators Review Key Publications and Current Cases in Multiple Myeloma and Non-Hodgkin Lymphoma



*A special audio supplement to a CME conference held during
the 2014 ASCO Annual Meeting featuring expert comments
on the application of emerging research to patient care*

FACULTY INTERVIEWS

Jonathan W Friedberg, MD, MMSc
Sagar Lonial, MD
Martin Dreyling, MD, PhD

EDITOR

Neil Love, MD

CONTENTS

2 Audio CDs

From the publishers of:

**Hematologic
Oncology™**
U P D A T E



 Subscribe to Podcasts or download MP3s of this program at ResearchToPractice.com/ASCOHem14/Audio

 Follow us at Facebook.com/ResearchToPractice  Follow us on Twitter @DrNeilLove

Data and Perspectives: Clinical Investigators Review Key Publications and Current Cases in Multiple Myeloma and Non-Hodgkin Lymphoma

A Continuing Medical Education Audio Program

OVERVIEW OF ACTIVITY

Taken together, it is estimated that 156,420 new cases of lymphoma, multiple myeloma and leukemia will be identified in the United States in the year 2014, and 55,350 individuals will die of these diseases. Of importance, currently more than 60 drug products are labeled for use in the management of hematologic cancers, with more than 70 distinct FDA-approved indications. Although this extensive list of available treatment options is reassuring for patients and oncology healthcare professionals, it poses a challenge to the practicing clinician who must maintain up-to-date knowledge of appropriate clinical management strategies across a vast spectrum of liquid and solid tumors.

This special audio highlights program of a CME satellite symposium held during the 2014 ASCO annual meeting uses one-on-one interviews with 2 leading investigators in lymphoma and 1 in multiple myeloma to discuss cases and questions submitted by meeting attendees. By providing information on the latest research developments and their potential application to routine practice, this activity is designed to assist hematologists, medical oncologists and hematology-oncology fellows with the formulation of up-to-date clinical management strategies.

LEARNING OBJECTIVES

- Compare and contrast completed and ongoing clinical trials evaluating novel investigational approaches for B-cell lymphomas and chronic lymphocytic leukemia (CLL), and prioritize clinical trial opportunities or expanded-access programs available to patients based on this information.
- Appreciate the recent FDA approvals of ibrutinib, idelalisib and obinutuzumab, and discern how these agents can be appropriately integrated into clinical practice for patients with CLL.
- Customize the selection of systemic therapy for patients with progressive mantle-cell lymphoma, recognizing the recent addition of new FDA-endorsed options for these patients.
- Recognize the role of novel agents in the management of peripheral T-cell lymphoma and/or advanced-stage T-cell lymphomas, and ensure appropriate supportive care measures to minimize their associated side effects.
- Compare and contrast the benefits and risks of available immunomodulatory agents, proteasome inhibitors or both as systemic treatment for newly diagnosed active multiple myeloma (MM).
- Customize the use of maintenance therapeutic approaches for MM in the post-transplant and nontransplant settings based on patient- and disease-related factors, including cytogenetic profile.
- Consider available data on the selection, sequencing and/or combination of carfilzomib and pomalidomide in the management of relapsed/refractory MM.
- Assess the ongoing clinical trials evaluating innovative investigational approaches for non-Hodgkin lymphomas and MM, and refer appropriate patients for study participation.

ACCREDITATION STATEMENT

Research To Practice is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.

CREDIT DESIGNATION STATEMENT

Research To Practice designates this enduring material for a maximum of 2.75 *AMA PRA Category 1 Credits*[™]. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

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 CDs, complete the Post-test with a score of 75% 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/ASCOHem14/Audio/CME.

This activity is supported by educational grants from Celgene Corporation, Genentech BioOncology/Biogen Idec, Millennium: The Takeda Oncology Company, Onyx Pharmaceuticals Inc and Spectrum Pharmaceuticals Inc.

FACULTY



Jonathan W. Friedberg, MD, MMSc
Samuel Durand Professor of Medicine
Director, Wilmot Cancer Center
University of Rochester
Rochester, New York



Sagar Lonial, MD
Professor
Vice Chair of Clinical Affairs
Director of Translational Research
B-Cell Malignancy Program
Department of Hematology and
Medical Oncology
Winship Cancer Institute
Emory University School of Medicine
Atlanta, Georgia



Martin Dreyling, MD, PhD
Professor of Medicine
Department of Medicine III
University Hospital LMU Munich
Munich, Germany

EDITOR



Neil Love, MD
Research To Practice
Miami, Florida

Have Questions or Cases You Would Like Us to Pose to the Faculty?



Submit them to us via Facebook or Twitter
and we will do our best to get them answered for you

 [Facebook.com/ResearchToPractice](https://www.facebook.com/ResearchToPractice) or  [Twitter @DrNeilLove](https://twitter.com/DrNeilLove)

If you would like to discontinue your complimentary subscription to *Hematologic Oncology Update*, please email us at Info@ResearchToPractice.com, call us at (800) 648-8654 or fax us at (305) 377-9998. Please include your full name and address, and we will remove you from the mailing list.

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 CME 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: **Dr Friedberg** — Advisory Committee and Other Uncompensated Activities: Genentech BioOncology. **Dr Lonial** — Advisory Committee: Bristol-Myers Squibb Company, Celgene Corporation, Millennium: The Takeda Oncology Company, Novartis Pharmaceuticals Corporation, Onyx Pharmaceuticals Inc, Sanofi. **Dr Dreyling** — Advisory Committee: Bayer HealthCare Pharmaceuticals, Celgene Corporation, Janssen Pharmaceuticals Inc, Pfizer Inc; Contracted Research: Celgene Corporation, Janssen Pharmaceuticals Inc, Mundipharma International Limited, Pfizer Inc, Roche Laboratories Inc; Speaking Honoraria: Celgene Corporation, Janssen Pharmaceuticals Inc, Pfizer Inc.


EDITOR — Dr Love is president and CEO of Research To Practice, which receives funds in the form of educational grants to develop CME activities from the following commercial interests: AbbVie Inc, Amgen Inc, Astellas, AstraZeneca Pharmaceuticals LP, Aveo Pharmaceuticals, Bayer HealthCare Pharmaceuticals, Bodesix Inc, Biogen Idec, Boehringer Ingelheim Pharmaceuticals Inc, Bristol-Myers Squibb Company, Celgene Corporation, Daiichi Sankyo Inc, Dendreon Corporation, Eisai Inc, Exelixis Inc, Genentech BioOncology, Genomic Health Inc, Gilead Sciences Inc, Incyte Corporation, Lilly, Medivation Inc, Merck, Millennium: The Takeda Oncology Company, Novartis Pharmaceuticals Corporation, Novocure, Onyx Pharmaceuticals Inc, Pharmacyclis Inc, Prometheus Laboratories Inc, Regeneron Pharmaceuticals, Sanofi, Seattle Genetics, Spectrum Pharmaceuticals Inc, Teva Oncology and VisionGate Inc.

RESEARCH TO PRACTICE STAFF AND EXTERNAL REVIEWERS — The scientific staff and reviewers for Research To Practice have no real or apparent conflicts of interest to disclose.

This educational activity contains discussion of published and/or investigational uses of agents that are not indicated by the Food and Drug Administration. Research To Practice does not recommend the use of any agent outside of the labeled indications. Please refer to the official prescribing information for each product for discussion of approved indications, contraindications and warnings. The opinions expressed are those of the presenters and are not to be construed as those of the publisher or grantors.

www.ResearchToPractice.com

Your online resource for integrated oncology education



www.ResearchToPractice.com is a comprehensive online resource offering numerous interactive capabilities, search functionality and easy access to:

- Download audio and print programs
- Sign up for audio Podcasts
- Subscribe to RTP programs
- Search specific topics of interest by specialty and tumor type
- Register for upcoming live CME events
- Watch video proceedings

VISIT TODAY!

TRACKS 1-29

Interview with Jonathan W Friedberg, MD, MMSc

- Track 1 Case discussion:** A 79-year-old patient with chronic lymphocytic leukemia (CLL)/small lymphocytic lymphoma and chromosome 13 deletion
- Track 2** Use of obinutuzumab with chlorambucil for older patients with CLL and progressive lymphadenopathy
- Track 3** Results of the CLL11 trial: Obinutuzumab/chlorambucil versus rituximab/chlorambucil for patients with CLL and coexisting conditions
- Track 4** Management of CLL in younger patients with deletion 17p
- Track 5** Interim analysis of the Phase III CLL10 trial: Fludarabine, cyclophosphamide and rituximab (FCR) versus bendamustine and rituximab (BR) for previously untreated and physically fit patients with advanced CLL
- Track 6** Efficacy of small molecule inhibitors in CLL
- Track 7** Phase II trial of idelalisib with the SYK inhibitor GS-9973 in relapsed or refractory CLL and non-Hodgkin lymphoma (NHL)
- Track 8 Case discussion:** A 43-year-old patient with high-risk CLL
- Track 9 Case discussion:** An 87-year-old patient with CLL and adverse cytogenetic features experiences a significant response to ibrutinib
- Track 10** Bendamustine in CLL
- Track 11** Differing mechanisms of action of the anti-CD20 antibodies rituximab and obinutuzumab in CLL and NHL
- Track 12** Brentuximab vedotin in CD30-positive lymphomas
- Track 13** Brentuximab vedotin-associated neuropathy and pancreatitis
- Track 14** Therapeutic options for patients with T-cell lymphomas (TCL)
- Track 15** Crizotinib in relapsed ALK-positive anaplastic large cell lymphoma
- Track 16** Approach to patients with peripheral TCL (PTCL) that is progressing on pralatrexate
- Track 17** Sequencing of pralatrexate and romidepsin in PTCL

Interview with Sagar Lonial, MD

- Track 18 PANORAMA 1:** Results of a Phase III study of the potent pan-deacetylase inhibitor panobinostat with bortezomib and dexamethasone for relapsed/refractory multiple myeloma (MM)
- Track 19 Case discussion:** A 45-year-old patient with MM and adverse cytogenetics who achieves a complete remission after autologous transplant continues to fare well on maintenance with lenalidomide/bortezomib/dexamethasone (RVD) x 3 years → lenalidomide x 1 year
- Track 20** Choice of induction regimen for younger patients with MM
- Track 21** ECOG-E1A11: An ongoing Phase III trial of RVD versus carfilzomib/lenalidomide/dexamethasone (CRd) → limited or indefinite lenalidomide maintenance for patients with newly diagnosed MM
- Track 22** Algorithm for the selection of maintenance therapeutic approach in MM
- Track 23** Role of minimal residual disease assays in the management of MM
- Track 24** Plasmapheresis in addition to cytoreductive therapy to improve renal function
- Track 25** Unique clinical considerations for patients receiving carfilzomib (hydration and cardiopulmonary issues)
- Track 26** Management of neuropathy associated with paraproteins
- Track 27** Emerging treatments for amyloidosis
- Track 28** Current indications, if any, for the use of melphalan in the management of transplant-ineligible MM
- Track 29 Case discussion:** A 78-year-old patient with a history of Stage I CLL presents with progressive anemia, multiple lytic bone lesions and kappa free light-chain MM

Interview with Dr Lonial (continued)

- Track 30** Investigation of BTK inhibitors in MM
- Track 31** Therapeutic approach for older transplant-ineligible patients with newly diagnosed MM
- Track 32** Critical appraisal of available clinical trial data with post-transplant lenalidomide maintenance therapy
- Track 33** **Case discussion:** A 65-year-old patient with MM with high-risk cytogenetics — t(4;14), del(17p) — receives RVD → transplant but experiences disease relapse after 9 months of lenalidomide maintenance therapy
- Track 34** Sequencing of pomalidomide and carfilzomib in patients with MM refractory to lenalidomide and bortezomib

Interview with Martin Dreyling, MD, PhD

- Track 42** **Case discussion:** A 68-year-old patient with relapsed/refractory Stage II follicular lymphoma (FL)
- Track 43** Dosing of bendamustine for older patients with FL
- Track 44** Duration of rituximab maintenance in FL
- Track 45** GALLIUM: A Phase III trial of obinutuzumab with chemotherapy versus rituximab with chemotherapy → obinutuzumab or rituximab maintenance for untreated advanced indolent NHL
- Track 46** Therapeutic options for relapsed/refractory FL
- Track 47** Phase III LYM-3001 study: Increased progression-free survival with bortezomib/rituximab versus rituximab alone in patients with relapsed/refractory FL with prespecified candidate biomarkers
- Track 48** Use of consolidation radioimmunotherapy in FL
- Track 35** **Case discussion:** A 79-year-old patient presents with back pain, fatigue, anemia and mild renal dysfunction and is found to have 50% involvement in the bone marrow with plasma cells and a 4;14 translocation
- Track 36** Salvage therapy for patients with late relapse after transplant
- Track 37** Pomalidomide-associated neutropenia
- Track 38** Ixazomib and other investigational, oral proteasome inhibitors
- Track 39** High cereblon expression as a predictor of response to immunomodulatory drugs in MM
- Track 40** Duration of treatment and antimyeloma effect of bisphosphonates
- Track 41** Promising novel monoclonal antibodies under investigation in MM
- Track 49** Role of allogeneic transplant in FL
- Track 50** Differential benefits with rituximab maintenance based on response to first-line therapy in FL
- Track 51** Treatment of mantle-cell lymphoma (MCL) up front and at early relapse
- Track 52** Sequencing of bortezomib, lenalidomide and ibrutinib in patients with relapsed/refractory MCL
- Track 53** Schedule and method of administration of bortezomib in MCL
- Track 54** Front-line treatment with rituximab/ibrutinib for patients with MCL
- Track 55** Duration of rituximab maintenance in MCL
- Track 56** “Double hit” diffuse large B-cell lymphoma (DLBCL) and other aggressive lymphomas
- Track 57** Incidence of CD30 positivity in DLBCL and potential role of brentuximab vedotin



Visit www.ResearchToPractice.com/ASCOHem14/Video for the full video proceedings from the related CME event at the 2014 ASCO Annual Meeting.

SELECT PUBLICATIONS

A multicentre, Phase III, open label, randomized study in previously untreated patients with advanced indolent non-Hodgkin's lymphoma evaluating the benefit of GA101 (RO5072759) + chemotherapy compared to rituximab + chemotherapy followed by GA101 or rituximab maintenance therapy in responders. NCT01332968

A Phase 3 open-label randomized study to compare the efficacy and safety of rituximab plus lenalidomide (CC-5013) versus rituximab plus chemotherapy followed by rituximab in subjects with previously untreated follicular lymphoma. The "RELEVANCE" trial (rituximab lenalidomide versus any chemotherapy). NCT01650701

Advani RH et al. **A phase II study of cyclophosphamide, etoposide, vincristine and prednisone (CEOP) alternating with pralatrexate as front-line therapy for patients with PTCL: Preliminary results from the T-cell consortium trial. Proc ASH 2013;Abstract 3044.**

Barr PM et al. **Phase 2 trial of GS-9973, a selective syk inhibitor, and idelalisib (idela) in chronic lymphocytic leukemia (CLL) and non-Hodgkin lymphoma (NHL). Proc ASCO 2014;Abstract 7059.**

Casulo C et al. **Early relapse of FL after R-CHOP uniquely defines patients at high risk for death: An analysis from the National LymphoCare Study. Proc ASH 2013;Abstract 510.**

Coiffier B et al. **Prespecified candidate biomarkers identify FL patients who achieved longer progression-free survival with bortezomib-rituximab versus rituximab. Clin Cancer Res 2013;19(9):2551-61.**

Eichhorst B et al. **Chemoimmunotherapy with fludarabine (F), cyclophosphamide (C), and rituximab (R) (FCR) versus bendamustine and rituximab (BR) in previously untreated and physically fit patients (pts) with advanced chronic lymphocytic leukemia (CLL): Results of a planned interim analysis of the CLL10 trial, an international, randomized study of the German CLL Study Group (GCLLSG). Proc ASH 2013;Abstract 526.**

Facon T et al. **Initial Phase 3 results of the FIRST (frontline investigation of lenalidomide + dexamethasone versus standard thalidomide) trial (MM-020/IFM 07 01) in newly diagnosed MM patients ineligible for stem cell transplantation. Proc ASH 2013;Abstract 2.**

Farooqui M et al. **Single agent ibrutinib (PCI-32765) achieves equally good and durable responses in CLL patients with and without deletion 17p. Proc ASH 2013;Abstract 673.**

Friedberg JW et al. **Phase II study of alisertib, a selective Aurora A kinase inhibitor, in relapsed and refractory aggressive B- and T-cell non-Hodgkin lymphomas. J Clin Oncol 2014;32(1):44-50.**

Furman RR et al. **Idelalisib and rituximab in relapsed CLL. N Engl J Med 2014;370(11):997-1007.**

Gandhi M et al. **Impact of induction regimen and consolidative stem cell transplantation in patients with double hit lymphoma (DHL): A large multicenter retrospective analysis. Proc ASH 2013;Abstract 640.**

Kapoor P et al. **Importance of achieving stringent complete response after autologous stem-cell transplantation in MM. J Clin Oncol 2013;31(36):4529-35.**

Leleu X et al. **Pomalidomide plus low-dose dexamethasone in relapsed or refractory multiple myeloma (RRMM) with deletion (del)17p and/or translocation t(4;14). Proc ASH 2013;Abstract 689.**

Mark TM et al. **Sequence impact of pomalidomide and carfilzomib on treatment response in relapsed MM. Proc ASH 2013;Abstract 1954.**

Randomized Phase III trial of bortezomib, lenalidomide and dexamethasone (VRd) versus carfilzomib, lenalidomide, dexamethasone (CRd) followed by limited or indefinite lenalidomide maintenance in patients with newly diagnosed symptomatic multiple myeloma. NCT01863550

Richardson PG et al. **Panorama 1: A randomized, double-blind, phase 3 study of panobinostat or placebo plus bortezomib and dexamethasone in relapsed or relapsed and refractory multiple myeloma. Proc ASCO 2014;Abstract 8510.**

Ruan J et al. **Combination biologic therapy without chemotherapy as initial treatment for MCL: Multi-center Phase II study of lenalidomide plus rituximab. Proc ASH 2013;Abstract 247.**

Taverna CJ et al. **Rituximab maintenance treatment for a maximum of 5 years in FL: Results of the randomized Phase III trial SAKK 35/03. Proc ASH 2013;Abstract 508.**

Vaidya R, Witzig TE. **Prognostic factors for diffuse large B cell lymphoma in the R(X)CHOP era. Ann Oncol 2014;[Epub ahead of print].**

Data and Perspectives: Clinical Investigators Review Key Publications and Current Cases in Multiple Myeloma and Non-Hodgkin Lymphoma

QUESTIONS (PLEASE CIRCLE ANSWER):

1. An interim analysis of the CLL10 trial of fludarabine/cyclophosphamide/rituximab (FCR) versus bendamustine/rituximab (BR) for physically fit patients with previously untreated advanced CLL reported _____.
 - a. Increased efficacy with FCR compared to BR
 - b. Higher rates of severe adverse events with FCR compared to BR
 - c. Both a and b
 - d. Neither a nor b

2. A Phase II trial of idelalisib in combination with the SYK inhibitor GS-9973 in CLL and NHL was discontinued because of a high incidence of fatal pneumonitis.
 - a. True
 - b. False

3. Results of the Phase III PANORAMA 1 study, which evaluated the potent pan-deacetylase inhibitor panobinostat versus placebo in combination with bortezomib/dexamethasone for patients with relapsed/refractory MM, demonstrated improvements in _____.
 - a. Complete response rate
 - b. Depth of response
 - c. Median progression-free survival
 - d. All of the above

4. The ongoing Phase III ECOG-E1A11 trial is evaluating lenalidomide/bortezomib/dexamethasone (RVD) versus _____ followed by limited or indefinite lenalidomide maintenance for patients with newly diagnosed MM.
 - a. Carfilzomib/lenalidomide/dexamethasone (CRd)
 - b. Elotuzumab/lenalidomide/dexamethasone
 - c. Ixazomib/lenalidomide/dexamethasone
 - d. All of the above

5. Which of the following novel monoclonal antibodies has demonstrated single-agent activity for patients with MM?
 - a. Daratumumab
 - b. Elotuzumab
 - c. Both a and b
 - d. Neither a nor b

6. The ongoing Phase III GALLIUM trial is evaluating _____ with chemotherapy versus rituximab with chemotherapy followed by maintenance therapy with _____ or rituximab for patients with untreated advanced indolent NHL.
 - a. Bortezomib
 - b. Ibritumomab tiuxetan
 - c. Obinutuzumab
 - d. All of the above

7. The Phase III RELEVANCE trial is evaluating rituximab/lenalidomide (R²) versus rituximab in combination with standard chemotherapy followed by rituximab maintenance therapy for patients with previously untreated FL.
 - a. True
 - b. False

8. Which of the following small molecule inhibitors is not FDA approved and is undergoing investigation for the treatment of CLL?
 - a. Ibrutinib
 - b. ABT-199
 - c. Idelalisib
 - d. Both b and c
 - e. All of the above

EDUCATIONAL ASSESSMENT AND CREDIT FORM

Data and Perspectives: Clinical Investigators Review Key Publications and Current Cases in Multiple Myeloma and Non-Hodgkin Lymphoma

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	
Available trial data and ongoing evaluation of obinutuzumab for patients with CLL and indolent NHL	4	3	2	1
Differential effectiveness of approved and novel agents in the treatment of various subtypes of TCL	4	3	2	1
Effectiveness of ibrutinib in patients with CLL and a 17p deletion	4	3	2	1
Role of minimal residual disease assays in the management of MM	4	3	2	1
Activity and tolerability of oral proteasome inhibitors (eg, ixazomib, oprozomib) under development for MM	4	3	2	1

Practice Setting:

- Academic center/medical school
 Community cancer center/hospital
 Group practice
 Solo practice
 Government (eg, VA)
 Other (please specify).....

Approximately how many new patients with MM, NHL and CLL do you see per year? MM NHL..... CLL

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
 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:

- Compare and contrast completed and ongoing clinical trials evaluating novel investigational approaches for B-cell lymphomas and chronic lymphocytic leukemia (CLL), and prioritize clinical trial opportunities or expanded-access programs available to patients based on this information..... 4 3 2 1 N/M N/A
- Appreciate the recent FDA approvals of ibrutinib, idelalisib and obinutuzumab, and discern how these agents can be appropriately integrated into clinical practice for patients with CLL... 4 3 2 1 N/M N/A
- Customize the selection of systemic therapy for patients with progressive mantle-cell lymphoma, recognizing the recent addition of new FDA-endorsed options for these patients... 4 3 2 1 N/M N/A
- Recognize the role of novel agents in the management of peripheral T-cell lymphoma and/or advanced-stage T-cell lymphomas, and ensure appropriate supportive care measures to minimize their associated side effects..... 4 3 2 1 N/M N/A
- Compare and contrast the benefits and risks of available immunomodulatory agents, proteasome inhibitors or both as systemic treatment for newly diagnosed active multiple myeloma (MM). 4 3 2 1 N/M N/A

EDUCATIONAL ASSESSMENT AND CREDIT FORM (continued)

As a result of this activity, I will be able to:

- Customize the use of maintenance therapeutic approaches for MM in the post-transplant and nontransplant settings based on patient- and disease-related factors, including cytogenetic profile..... 4 3 2 1 N/M N/A
- Consider available data on the selection, sequencing and/or combination of carfilzomib and pomalidomide in the management of relapsed/refractory MM..... 4 3 2 1 N/M N/A
- Assess the ongoing clinical trials evaluating innovative investigational approaches for non-Hodgkin lymphomas and MM, and refer appropriate patients for study participation. 4 3 2 1 N/M N/A

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:.....

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			
Jonathan W Friedberg, MD, MMSc	4	3	2	1	4	3	2	1
Sagar Lonial, MD	4	3	2	1	4	3	2	1
Martin Dreyling, MD, PhD	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:

.....

REQUEST FOR CREDIT — Please print clearly

Name:..... Specialty:.....

Professional Designation:

MD DO PharmD NP RN PA Other

Street Address:..... Box/Suite:.....

City, State, Zip:.....

Telephone:..... Fax:.....

Email:.....

Research To Practice designates this enduring material for a maximum of 2.75 AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

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

Signature:..... Date:.....

QID 1295

The expiration date for this activity is September 2015. To obtain a certificate of completion and receive credit for this activity, please complete the Post-test, fill out the Educational Assessment and Credit Form and fax both to (800) 447-4310, or mail both to Research To Practice, One Biscayne Tower, 2 South Biscayne Boulevard, Suite 3600, Miami, FL 33131. You may also complete the Post-test and Educational Assessment online at www.ResearchToPractice.com/ASCOHem14/Audio/CME.

Hematologic Oncology™

U P D A T E

Neil Love, MD
Research To Practice
One Biscayne Tower
2 South Biscayne Boulevard, Suite 3600
Miami, FL 33131

PRSRST STD
U.S. POSTAGE
PAID
MIAMI, FL
PERMIT #1317

Copyright © 2014 Research To Practice.

This activity is supported by educational grants from Celgene Corporation, Genentech BioOncology/Biogen Idec, Millennium: The Takeda Oncology Company, Onyx Pharmaceuticals Inc and Spectrum Pharmaceuticals Inc.

Research To Practice®

Sponsored by Research To Practice.

Release date: September 2014

Expiration date: September 2015

Estimated time to complete: 2.75 hours



This program is printed on MacGregor XP paper, which is manufactured in accordance with the world's leading forest management certification standards.