Challenging Cases in Non-Hodgkin Lymphoma

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

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 non-Hodgkin lymphoma (NHL) and chronic lymphocytic leukemia (CLL).

OVERVIEW OF ACTIVITY

It is estimated that approximately 86,500 new cases of NHL and CLL will be identified in the United States in the year 2014, and 23,590 individuals will die from these diseases. Currently more than 60 drug products with more than 70 distinct FDA-approved indications are labeled for use in the management of hematologic cancers. 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.

These video proceedings from the third part of a 6-part integrated CNE curriculum originally held at the 2014 ONS Annual Congress feature discussions with leading hematologyoncology 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.

PURPOSE STATEMENT

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 NHL and CLL.

LEARNING OBJECTIVES

- Provide patient-focused education regarding the available therapeutic agents used in the management of indolent and aggressive forms of B-cell NHL to enhance clinical decision-making.
- Apply the results of emerging clinical research to the therapeutic and supportive care of patients with newly diagnosed and relapsed/refractory NHL and CLL.

- Explain the risks and benefits of evidence-based treatment approaches to patients with T-cell lymphoma requiring systemic therapy.
- Evaluate the preliminary safety profiles and response outcomes of investigational agents and treatment strategies undergoing evaluation in NHL and CLL, and counsel appropriately selected patients about the potential for enrollment in clinical trials.
- Identify opportunities to enhance the collaborative role of oncology nurses in the comprehensive biopsychosocial care of patients with NHL/CLL to optimize clinical and qualityof-life outcomes.

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 1.7 contact hours is provided by Research To Practice during the period of August 2014 through August 2015.

FOR SUCCESSFUL COMPLETION

This is a video CNE program. To receive credit, participants should read the learning objectives and faculty disclosures, watch the video and complete the Post-test and Educational Assessment and Credit Form located at ResearchToPractice. com/ONSNHL2014/CNE. A statement of credit will be issued only upon receipt of a completed Post-test with a score of 75% or better and a completed Educational Assessment and Credit Form.

CONTENT VALIDATION AND DISCLOSURES

Research To Practice (RTP) is committed to providing its participants with high-quality, unbiased and state-of-theart 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 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:

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No real or apparent conflicts of interest to disclose.

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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, Amgen Inc, Astellas, AstraZeneca Pharmaceuticals LP, 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, 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, Prometheus Laboratories Inc, Regeneron Pharmaceuticals, Sanofi, Seattle Genetics, Spectrum Pharmaceuticals Inc, Teva Oncology and VisionGate Inc.

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.

Select Publications

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 (RELEVANCE). NCT01650701

Alduaij W et al. Novel type II anti-CD20 monoclonal antibody (GA101) evokes homotypic adhesion and actin-dependent, lysosome-mediated cell death in B-cell malignancies. *Blood* 2011;117(17):4519-29.

An open-label, multi-center, three arm randomized study to investigate the safety and efficacy on progression-free survival of RO5072759 + chlorambucil (GClb) compared to rituximab + chlorambucil (RClb) or chlorambucil (Clb) alone in previously untreated CLL patients with comorbidities. NCT01010061

Badoux XC et al. Phase II study of lenalidomide and rituximab as salvage therapy for patients with relapsed or refractory chronic lymphocytic leukemia. *J Clin Oncol* 2013;31(5):584-91.

Byrd JC et al. Targeting BTK with ibrutinib in relapsed chronic lymphocytic leukemia. N Engl J Med 2013;369(1):32-42.

Coiffier B et al. Results from a pivotal, open-label, phase II study of romidepsin in relapsed or refractory peripheral T-cell lymphoma after prior systemic therapy. *J Clin Oncol* 2012;30(6):631-6.

Coutre SE et al. Combinations of the selective phosphatidylinositol 3-kinase-delta (PI3Kdelta) inhibitor GS-1101 (CAL-101) with rituximab and/or bendamustine are tolerable and highly active in patients with relapsed or refractory chronic lymphocytic leukemia (CLL): Results from a Phase I study. *Proc ASH* 2012; Abstract 191.

Davids MS et al. Updated results of a phase I first-in-human study of the BCL-2 inhibitor ABT-199 (GDC-0199) in patients with relapsed/refractory non-Hodgkin lymphoma (NHL). *Proc ASCO* 2013; Abstract 8520.

Davids MS, Letai A. ABT-199: Taking dead aim at BCL-2. Cancer Cell 2013;23(2):139-41.

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.

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Flinn IW et al. Idelalisib, a selective inhibitor of phosphatidylinositol 3-kinase- δ , as therapy for previously treated indolent non-Hodgkin lymphoma. *Blood* 2014;123(22):3406-13.

Furman RR et al. Ibrutinib resistance in chronic lymphocytic leukemia. N Engl J Med 2014;370(24):2352-4.

Goede V et al. **Obinutuzumab plus chlorambucil in patients with CLL and coexisting conditions.** *N Engl J Med* 2014;370(12):1101-10.

Goy A et al. Single-agent lenalidomide in patients with mantle-cell lymphoma who relapsed or progressed after or were refractory to bortezomib: Phase II MCL-001 (EMERGE) study. *J Clin Oncol* 2013;31(29):3688-95.

Goy A et al. Bortezomib in patients with relapsed or refractory mantle cell lymphoma: Updated time-to-event analyses of the multicenter phase 2 PINNACLE study. *Ann Oncol* 2009;20(3):520-5.

Herter S et al. Superior efficacy of the novel type II, glycoengineered CD20 antibody GA101 vs the type I CD20 antibodies rituximab and ofatumumab. *Proc ASH* 2010; Abstract 3925.

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Kluin-Nelemans HC et al. Treatment of older patients with mantle-cell lymphoma. N Engl J Med 2012;367(6):520-31.

Maloney DG. Anti-CD20 antibody therapy for B-cell lymphomas. N Engl J Med 2012;366(21):2008-16.

Mössner E et al. Increasing the efficacy of CD20 antibody therapy through the engineering of a new type II anti-CD20 antibody with enhanced direct and immune effector cell-mediated B-cell cytotoxicity. *Blood* 2010;115(22):4393-402.

National Cancer Institute. **FDA approval for obinutuzumab** [press release]. Available at: http://www.cancer.gov/cancertopics/ druginfo/fda-obinutuzumab.

Niederfellner G et al. Epitope characterization and crystal structure of GA101 provide insights into the molecular basis for type I/II distinction of CD20 antibodies. *Blood* 2011;118(2):358-67.

O'Connor OA et al. ECHELON-2: Phase 3 trial of brentuximab vedotin and CHP versus CHOP in the frontline treatment of patients (pts) with CD30+ mature T-cell lymphomas (MTCL). *Proc ICML* 2013; Abstract 138.

Select Publications

O'Connor OA et al. Phase III trial of brentuximab vedotin and CHP versus CHOP in the frontline treatment of patients (pts) with CD30+ mature T-cell lymphomas (MTCL). Proc ASCO 2013; Abstract TPS8611.

O'Connor OA et al. Pralatrexate in patients with relapsed or refractory peripheral T-cell lymphoma: Results from the pivotal **PROPEL study.** *J Clin Oncol* 2011;29(9):1182-9.

Paramore A, Frantz S. Bortezomib. Nat Rev Drug Discov 2003;2(8):611-2.

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Rituximab, bendamustine hydrochloride, and bortezomib followed by rituximab and lenalidomide in treating older patients with previously untreated mantle cell lymphoma. NCT01415752

Rummel MJ et al. Bendamustine plus rituximab versus CHOP plus rituximab as first-line treatment for patients with indolent and mantle-cell lymphomas: An open-label, multicentre, randomised, phase 3 non-inferiority trial. *Lancet* 2013;381(9873):1203-10.

Wang ML et al. Targeting BTK with ibrutinib in relapsed or refractory mantle-cell lymphoma. *N Engl J Med* 2013;369(6):507-16.

Wierda WG. Making advances in first-line chronic lymphocytic leukemia treatment. J Clin Oncol 2012;30(26):3162-4.

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