# **Oncology Tumor Panel Series**

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

Part 2 — Multiple Myeloma

# **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 multiple myeloma (MM).

# **OVERVIEW OF ACTIVITY**

MM accounts for approximately 10% of all hematologic cancer cases and carries with it the worst death/new cases ratio of nearly 75%. Although patients with asymptomatic smoldering myeloma often have an indolent course for many years without therapy and are usually followed with observation, the course for advanced myeloma is uniformly aggressive. However, the introduction of new agents with substantial activity has improved outcomes and allowed patients to experience longer periods of remission. Both novel proteasome inhibitors and immunomodulatory agents have effectively transformed the standard treatment for patients with newly diagnosed and relapsed/refractory MM.

These video proceedings from the second part of a 5-part integrated CNE curriculum originally held at the 2015 ONS Annual Congress feature discussions with leading hematologic 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 MM.

#### LEARNING OBJECTIVES

 Compare and contrast the benefits and risks of evidencebased treatment regimens, and appropriately sequence available therapies in the long-term care of patients with active MM.

- Develop supportive care algorithms to both recognize and manage side effects attributable to proteasome inhibitors and immunomodulatory agents.
- Counsel individuals regarding the rationale for the use of maintenance therapeutic approaches in the post-transplant and nontransplant settings, focusing on the role of patient-and disease-related factors, including cytogenetic profile.
- Identify opportunities to enhance the collaborative role of oncology nurses in the comprehensive biopsychosocial care of patients with MM.

#### **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 1.6 contact hours is provided by Research To Practice during the period of August 2015 through August 2016.

#### FOR SUCCESSFUL COMPLETION

This is a video CNE program. To receive credit, participants should read the learning objectives and faculty disclosures, watch the video, complete the Post-test with a score of 75% or better and fill out the Educational Assessment and Credit Form located at ResearchToPractice.com/ONSMM2015/CNE.

#### 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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Advisory Committee: Applied Bioscience, Bristol-Myers Squibb Company; Consulting Agreements: Bayer HealthCare Pharmaceuticals, Bristol-Myers Squibb Company, Novartis Pharmaceuticals Corporation, Onyx Pharmaceuticals, an Amgen subsidiary, Pharmacyclics Inc, Sanofi; Contracted Research: Amgen Inc, Celgene Corporation, Onyx Pharmaceuticals, an Amgen subsidiary, Sanofi.

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**Advisory Committee and Consulting Agreements:** Bristol-Myers Squibb Company, Celgene Corporation, Novartis Pharmaceuticals Corporation, Onyx Pharmaceuticals, an Amgen subsidiary, Sanofi, Takeda Oncology.

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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 Scientific and Medical Affairs Inc, AstraZeneca Pharmaceuticals LP, Bayer HealthCare Pharmaceuticals, Biodesix Inc, bioTheranostics Inc, Boehringer Ingelheim Pharmaceuticals Inc, Boston Biomedical Pharma Inc, Bristol-Myers Squibb Company, Celgene Corporation, Clovis Oncology, Daiichi Sankyo Inc, Dendreon Corporation, Eisai Inc, Exelixis Inc, Foundation Medicine, Genentech BioOncology, Genomic Health Inc, Gilead Sciences Inc, ImmunoGen Inc, Incyte Corporation, Janssen Biotech Inc, Jazz Pharmaceuticals Inc, Lilly, Medivation Inc, Merck, Myriad Genetic Laboratories Inc, NanoString Technologies, Novartis Pharmaceuticals Corporation, Novocure, Onyx Pharmaceuticals, an Amgen subsidiary, Pharmacyclics Inc, Prometheus Laboratories Inc, Regeneron Pharmaceuticals, Sanofi, Seattle Genetics, Sigma-Tau Pharmaceuticals Inc, Sirtex Medical Ltd, Spectrum Pharmaceuticals Inc, Taiho Oncology Inc, Takeda Oncology, Teva Oncology, Tokai Pharmaceuticals Inc 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.

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This activity is supported by educational grants from Onyx Pharmaceuticals, an Amgen subsidiary and Takeda Oncology.

# 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

Last review date: August 2015 Expiration date: August 2016

There is no implied or real endorsement of any product by RTP or the American Nurses Credentialing Center.

# **Select Publications**

A phase III randomized, double-blind study of maintenance therapy with CC-5013 (NSC 703813) or placebo following autologous stem cell transplantation for multiple myeloma. NCT00114101

A phase 3, randomized, double-blind, multicenter study comparing oral ixazomib (MLN9708) plus lenalidomide and dexamethasone versus placebo plus lenalidomide and dexamethasone in adult patients with relapsed and/or refractory multiple myeloma. NCT01564537

A phase 3, randomized, placebo-controlled, double-blind study of oral ixazomib citrate (MLN9708) maintenance therapy in patients with multiple myeloma following autologous stem cell transplant. NCT02181413

A phase 3, randomized, placebo-controlled, double-blind study of oral ixazomib maintenance therapy after initial therapy in patients with newly diagnosed multiple myeloma not treated with stem cell transplantation. NCT02312258

Attal M et al. Lenalidomide maintenance after stem-cell transplantation for multiple myeloma: Follow-up analysis of the IFM 2005-02 trial. *Proc ASH* 2013; Abstract 406.

Carfilzomib/cyclophosphamide/dexamethasone with maintenance carfilzomib in untreated transplant-eligible patients with symptomatic MM to evaluate the benefit of upfront ASCT. NCT02315716

CLARION: A randomized, open-label phase 3 study of carfilzomib, melphalan, and prednisone versus bortezomib, melphalan, and prednisone in transplant-ineligible patients with newly diagnosed multiple myeloma. NCT01818752

Davis F et al. Are there benefits to long-term bisphosphonate treatment in multiple myeloma (MM) — Insights from temporal analyses of zoledronic acid (ZOL) versus clodronate (CLO) in the MRC Myeloma IX trial. *Proc ASCO* 2011;Abstract 8011.

ENDEAVOR: A randomized, open-label, phase 3 study of carfilzomib plus dexamethasone vs bortezomib plus dexamethasone in patients with relapsed multiple myeloma. NCT01568866

IFM2005-02: Relevance of maintenance therapy using lenalidomide (Revlimid<sup>®</sup>) after autologous stem cell transplantation patients under the age of 65. (Open, randomised, multi-centric trial versus placebo.) NCT00430365

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 multiple myeloma (NDMM) patients (pts) ineligible for stem cell transplantation (SCT). *Proc ASH* 2013; Abstract 2.

FORTE: Evaluation of the safety and the efficacy of carfilzomib combined with cyclophosphamide and dexamethasone (CCyd) or lenalidomide and dex (CRd) followed by ASCT or 12 cycles of carf combined with dex and len for patients eligible for ASCT with newly diagnosed multiple myeloma. NCT02203643

Fostier K et al. Carfilzomib: A novel treatment in relapsed and refractory multiple myeloma. Onco Targets Ther 2012;5:237-44.

Jakubowiak AJ et al. A phase 1/2 study of carfilzomib in combination with lenalidomide and low-dose dexamethasone as a frontline treatment for multiple myeloma. *Blood* 2012;120(9):1801-9.

Korde N et al. Phase II clinical and correlative study of carfilzomib, lenalidomide, and dexamethasone followed by lenalidomide extended dosing (CRD-R) induces high rates of MRD negativity in newly diagnosed multiple myeloma (MM) patients. *Proc ASH* 2013;Abstract 538.

McCarthy PL et al. Lenalidomide after stem-cell transplantation for multiple myeloma. N Engl J Med 2012;366(19):1770-81.

Mikhael JR et al. Management of newly diagnosed symptomatic multiple myeloma: Updated Mayo Stratification of Myeloma and Risk-Adapted Therapy (mSMART) consensus guidelines 2013. *Mayo Clin Proc* 2013;88(4):360-76.

Palumbo A et al. Autologous transplantation and maintenance therapy in multiple myeloma. *N Engl J Med* 2014;371(10):895-905.

Palumbo A et al. Personalized therapy in multiple myeloma according to patient age and vulnerability: A report of the European Myeloma Network (EMN). *Blood* 2011;118(17):4519-29.

Papadopoulos KP et al. Phase I study of 30-minute infusion of carfilzomib as single agent or in combination with low-dose dexamethasone in patients with relapsed and/or refractory multiple myeloma. *J Clin Oncol* 2015;33(7):732-9.

Phase II study of the combination of MLN 9708 with lenalidomide as maintenance therapy post autologous stem cell transplant in patients with multiple myeloma. NCT01718743

Plesner T et al. Safety and efficacy of daratumumab with lenalidomide and dexamethasone in relapsed or relapsed, refractory multiple myeloma. *Proc ASH* 2014; Abstract 84.

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

# **Select Publications**

Richardson PG et al. Final results for the 1703 phase 1b/2 study of elotuzumab in combination with lenalidomide and dexamethasone in patients with relapsed/refractory multiple myeloma. *Proc ASH* 2014; Abstract 302.

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.

Ruiz Santiago F et al. Comparative review of vertebroplasty and kyphoplasty. World J Radiol 2014;6(6):329-43.

Shah JJ et al. Phase I/II dose expansion of a multi-center trial of carfilzomib and pomalidomide with dexamethasone (Car-Pom-D) in patients with relapsed/refractory multiple myeloma. *Proc ASH* 2013; Abstract 690.

Stewart AK et al. Carfilzomib, lenalidomide, and dexamethasone for relapsed multiple myeloma. *N Engl J Med* 2015;372(2):142-52.

TOURMALINE-MM1: A phase 3, randomized, double-blind, multicenter study comparing oral ixazomib (MLN9708) plus lenalidomide and dexamethasone versus placebo plus lenalidomide and dexamethasone in adult patients with relapsed and/or refractory multiple myeloma. NCT01564537

TOURMALINE-MM2: A phase 3, randomized, double-blind, multicenter study comparing oral ixazomib (MLN9708) plus lenalidomide and dexamethasone versus placebo plus lenalidomide and dexamethasone in adult patients with newly diagnosed multiple myeloma. NCT01850524