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Oncology Nursing™ UPDATE

LUNG CANCER EDITION

An Audio Review Journal for Nurses
Bridging the Gap between Research and Patient Care

FACULTY INTERVIEWS

Sarah B Goldberg, MD, MPH
Ann Culkin, RN, OCN
Anne S Tsao, MD
Gary Deng, MD, PhD

EDITOR

Neil Love, MD

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2 Audio CDs

CNE Activity

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Oncology Nursing Update Lung Cancer Edition

A Continuing Nursing Education Audio Series

OVERVIEW OF ACTIVITY

Traditionally, chemotherapy, surgery and radiation therapy have had a modest effect on long-term outcomes for patients with lung cancer. However, the advent of biologic agents and immunotherapies has led to recent improvements in disease-free and overall survival in select patient populations. Importantly, published results from ongoing clinical trials lead to the continual emergence of new therapeutic agents and changes in the use of existing treatments. To provide oncology nurses with therapeutic strategies to address the disparate needs of patients with lung cancer, the *Oncology Nursing Update* audio series employs one-on-one interviews with medical oncologists and nurses who are experts in the field. 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 lung cancer.

PURPOSE STATEMENT

To present the most current research developments and to provide the perspectives of nurse practitioners and clinical investigators on the diagnosis and treatment of lung cancer.

LEARNING OBJECTIVES

- Discuss the benefits and risks associated with systemic therapies used in the evidence-based treatment of lung cancer, including chemotherapy regimens, targeted biologic treatments and immunotherapeutic approaches.
- Communicate the clinical relevance of gene mutations and tumor histology to patients with non-small cell lung cancer (NSCLC).
- Educate patients receiving EGFR and ALK inhibitors about potential side effects, and provide preventive and emergent strategies to reduce or ameliorate these toxicities.
- Develop an understanding of the mechanism of action, efficacy and safety/toxicities of anti-PD-1 checkpoint inhibitors to enable their appropriate integration into routine clinical practice.
- Recognize the recent FDA approvals of ramucirumab and necitumumab, and discern how these agents can be safely administered to appropriate patients with squamous and nonsquamous disease.
- Explore the role of integrative oncology approaches, including complementary and alternative therapies, in patient care.

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 2.7 contact hours is provided by Research To Practice during the period of April 2016 through April 2017.

This activity is awarded 2.7 ANCC pharmacotherapeutic contact hours.

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The program content has been reviewed by the Oncology Nursing Certification Corporation (ONCC) and is acceptable for recertification points.

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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/ONULung116** also includes links to relevant abstracts and full-text articles.

To receive credit, participants should read the learning objectives and faculty disclosures, listen to the CDs and complete the Post-test and Educational Assessment and Credit Form located in the back of this booklet or on our website at **ResearchToPractice.com/ONULung116/CNE**. A statement of credit will be issued only upon receipt of a completed Post-test with a score of 80% or better and a completed Educational Assessment and Credit Form. Your statement of credit will be mailed to you within 3 weeks or may be printed online.

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EDITOR

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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 conflicts of interest with faculty, planners and managers of CNE activities. 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 — **Dr Deng** has no relevant conflicts of interest to disclose. The following faculty (and their spouses/partners) reported relevant conflicts of interest, which have been resolved through a conflict of interest resolution process: **Dr Goldberg** — Advisory Committee: Clovis Oncology; Contracted Research: AstraZeneca Pharmaceuticals LP, Boehringer Ingelheim Pharmaceuticals Inc. **Ms Culkin** — Advisory Committee: Novartis Pharmaceuticals Corporation, TESARO Inc. **Dr Tsao** — Advisory Committee: Boehringer Ingelheim Pharmaceuticals Inc, Bristol-Myers Squibb Company, Genentech BioOncology, Lilly, Merck, Novartis Pharmaceuticals Corporation, Roche Laboratories Inc.

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Track 6 Mind-body approaches for patients with cancer

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QUESTIONS (PLEASE CIRCLE ANSWER):

1. **Which of the following is true regarding osimertinib in the treatment of NSCLC?**
   a. It is a recently FDA-approved third-generation EGFR TKI
   b. It is effective against tumors with the T790M mutation
   c. It is commonly associated with hyperglycemia
   d. All of the above
   e. Both a and b

2. **Which of the following side effects is of concern when counseling patients with NSCLC who are about to initiate treatment with the ALK inhibitor crizotinib?**
   a. Autoimmune diseases
   b. Gastrointestinal toxicities
   c. Visual disturbances
   d. Both b and c

3. **The Phase III REVEL trial of second-line docetaxel with or without ramucirumab for patients with Stage IV NSCLC after disease progression on a platinum-based regimen demonstrated a statistically significant benefit in _____ with the addition of ramucirumab to docetaxel.**
   a. Progression-free survival
   b. Overall survival
   c. Both a and b

4. **Alectinib and ceritinib both cause responses in patients with ALK rearrangements who experience disease progression on crizotinib.**
   a. True
   b. False

5. **Which of the following are potential contraindications to the use of bevacizumab?**
   a. Squamous cell histology
   b. Hemoptysis
   c. Tumors invading the mediastinal structures
   d. All of the above

6. **Which of the following is true regarding nivolumab and pembrolizumab in the treatment of NSCLC?**
   a. They are antibodies that block the PD-1 receptor
   b. They are approved only for patients with nonsquamous disease
   c. They are associated with durable responses
   d. Both a and c

7. **Anti-PD-1 antibodies are associated with which of the following types of adverse events?**
   a. Endocrinopathies
   b. Alopecia
   c. Both a and b

8. **Management strategies for the dermatologic toxicities associated with anti-EGFR antibodies include _____.**
   a. Avoiding sun exposure
   b. Topical antibiotics
   c. Topical corticosteroids
   d. All of the above

9. **The anti-EGFR antibody necitumumab was recently approved by the FDA in combination with chemotherapy as first-line treatment for advanced _____.**
   a. Squamous cell carcinoma
   b. Nonsquamous cell carcinoma
   c. Both a and b

10. **Side effects associated with rociletinib include _____.**
    a. Hyperglycemia
    b. Alopecia
    c. QTc prolongation
    d. All of the above
    e. Both a and c

EDUCATIONAL ASSESSMENT AND CREDIT FORM

Oncology Nursing Update Lung Cancer Edition — Issue 1, 2016

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
Efficacy and tolerability of the recently FDA-approved EGFR TKI osimertinib	4 3 2 1	4 3 2 1
Rationale for the use of immune checkpoint inhibitors in the management of lung cancer	4 3 2 1	4 3 2 1
Available data with and side effects of the second-generation ALK inhibitors ceritinib and alectinib	4 3 2 1	4 3 2 1
Clinical strategies to prevent and manage EGFR TKI-associated dermatotoxicities	4 3 2 1	4 3 2 1
Mechanisms of action of ramucirumab and necitumumab and incorporation into current clinical management	4 3 2 1	4 3 2 1
Mindfulness-based stress reduction to help patients cope with cancer	4 3 2 1	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 lung cancer do you see per year? ..... patients

Was the activity evidence based, fair, balanced and free from commercial bias?

☐ Yes ☐ No
If no, please explain:.....

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 lung cancer, including chemotherapy regimens, targeted biologic treatments and immunotherapeutic approaches. . . . . 4 3 2 1 N/M N/A
- Communicate the clinical relevance of gene mutations and tumor histology to patients with non-small cell lung cancer (NSCLC). . . . . 4 3 2 1 N/M N/A
- Educate patients receiving EGFR and ALK inhibitors about potential side effects, and provide preventive and emergent strategies to reduce or ameliorate these toxicities. . . . . 4 3 2 1 N/M N/A
- Develop an understanding of the mechanism of action, efficacy and safety/toxicities of anti-PD-1 checkpoint inhibitors to enable their appropriate integration into routine clinical practice. . . . . 4 3 2 1 N/M N/A
- Recognize the recent FDA approvals of ramucirumab and necitumumab, and discern how these agents can be safely administered to appropriate patients with squamous and nonsquamous disease. . . . . 4 3 2 1 N/M N/A
- Explore the role of integrative oncology approaches, including complementary and alternative therapies, in patient care. . . . . 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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.....

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Additional comments about this activity:

.....

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.....

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
Sarah B Goldberg, MD, MPH	4 3 2 1	4 3 2 1
Ann Culkin, RN, OCN	4 3 2 1	4 3 2 1
Anne S Tsao, MD	4 3 2 1	4 3 2 1
Gary Deng, 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 ☐ CNS ☐ RN ☐ PA ☐ Other.....

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City, State, Zip:.....

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

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

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