Oncology Grand Rounds

Nurse and Physician Investigators Discuss New Agents, Novel Therapies and Actual Cases from Practice

Part 5: Myeloproliferative Neoplasms

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 myeloproliferative neoplasms (MPNs).

OVERVIEW OF ACTIVITY

The Philadelphia chromosome-negative MPNs largely consist of 3 disease entities, all heralding from clonal disorders in which an initial molecular event in the hematopoietic stem cells results in an excessive production of blood cells. Essential thrombocythemia (ET), polycythemia vera (PV) and myelofibrosis (MF) are clinically distinguishable by laboratory and molecular parameters. However, they may represent a disease continuum on which transformation from the normally indolent ET or PV to the more aggressive MF results in a homogenous pathologic entity with a similarly poor prognosis and significant risk for the development of acute myeloid leukemia. MF is a debilitating disease for which the first therapy, the JAK1/2 inhibitor ruxolitinib, was FDA approved in 2011. Despite the significant benefits ruxolitinib has provided, the morbidity and mortality of this disease remain quite significant, and a number of important research efforts have been undertaken in an attempt to find more and better therapies. Thus, the collective attention of the MPN community has turned to ongoing research exploring the potential of other JAK inhibitors for MF, ET and PV, combination approaches and novel agents with unique mechanisms of action. Consequently, a variety of pertinent questions remain regarding the use of JAK inhibitors in these diseases and the optimal approach to management.

Although medical oncologists have been routinely responsible for counseling patients with regard to therapeutic decisionmaking, oncology nurses play an integral role in the successful delivery of systemic anticancer therapy and the preservation of patient physical and psychosocial well-being. These video proceedings from the fifth part of a 7-part integrated CNE curriculum originally held at the 2017 ONS Annual Congress feature discussions with leading MPN 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.

LEARNING OBJECTIVES

- Use an understanding of disease biology and natural history to communicate diagnosis and prognosis to patients with polycythemia vera (PV), essential thrombocythemia (ET) and myelofibrosis (MF).
- Discuss the benefits and risks associated with local and systemic therapies used in the evidence-based treatment of PV, ET and MF.
- Recognize the FDA approval of ruxolitinib for patients with PV, and provide related counseling to individuals who may be appropriate for therapeutic intervention with this agent.
- Counsel patients with JAK2 mutation-positive and mutation-negative MF about the efficacy and safety of ruxolitinib treatment.
- Appraise the role of ruxolitinib in patients with MF and thrombocytopenia, anemia or compromised renal function.
- Develop a plan to manage the side effects associated with ruxolitinib to support quality of life and continuation of treatment.
- Recall ongoing trials of investigational approaches in MF, PV and ET, and obtain consent and refer patients for study participation.

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 July 2017 through July 2018.

This activity is awarded 1.6 ANCC pharmacotherapeutic contact hours.

ONCC/ILNA CERTIFICATION INFORMATION

The program content has been reviewed by the Oncology Nursing Certification Corporation (ONCC) and is acceptable for recertification points. To review certification qualifications please visit **ResearchToPractice.com/ONS2017/ILNA**.

ONCC review is only for designating content to be used for recertification points and is not for CNE accreditation. CNE

programs must be formally approved for contact hours by an acceptable accreditor/approver of nursing CE to be used for recertification by ONCC. If the CNE provider fails to obtain formal approval to award contact hours by an acceptable accrediting/approval body, no information related to ONCC recertification may be used in relation to the program.

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 80% or better and fill out the Educational Assessment and Credit Form located at **ResearchToPractice.com/ONSMPN2017/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 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 — The following faculty (and their spouses/partners) reported relevant conflicts of interest, which have been resolved through a conflict of interest resolution process:

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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, Acerta Pharma, Adaptive Biotechnologies, Agendia Inc, Agios Pharmaceuticals Inc, Amgen Inc, Ariad Pharmaceuticals Inc, Array BioPharma Inc, Astellas Pharma Global Development Inc, AstraZeneca Pharmaceuticals LP, Baxalta Inc, Bayer HealthCare Pharmaceuticals, Biodesix Inc, bioTheranostics Inc, Boehringer Ingelheim Pharmaceuticals Inc, Boston Biomedical Pharma Inc, Bristol-Myers Squibb Company, Celgene Corporation, Clovis Oncology, CTI BioPharma Corp, Dendreon Pharmaceuticals Inc, Eisai Inc, Exelixis Inc, Foundation Medicine, Genentech BioOncology, Genomic Health Inc, Gilead Sciences Inc, Halozyme Inc, ImmunoGen Inc, Incyte Corporation, Infinity Pharmaceuticals Inc, Ipsen Biopharmaceuticals Inc, Janssen Biotech Inc, Jazz Pharmaceuticals Inc, Kite Pharma Inc, Lexicon Pharmaceuticals Inc, Lilly, Medivation Inc, a Pfizer Company, Merck, Merrimack Pharmaceuticals Inc, Myriad Genetic Laboratories Inc, NanoString Technologies, Natera Inc, Novartis, Novocure, Onyx Pharmaceuticals, an Amgen subsidiary, Pharmacyclics LLC, an AbbVie Company, Prometheus Laboratories Inc, Puma Biotechnology Inc, Regeneron Pharmaceuticals Inc, Sanofi Genzyme, Seattle Genetics, Sigma-Tau Pharmaceuticals Inc, Sirtex Medical Ltd, Spectrum Pharmaceuticals Inc, Taiho Oncology Inc, Takeda Oncology, Tesaro Inc, Teva Oncology and Tokai Pharmaceuticals Inc.

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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

Last review date: July 2017

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

Select Publications

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Tefferi A. Essential thrombocythemia, polycythemia vera, and myelofibrosis: Current management and the prospect of targeted therapy. *Am J Hematol* 2008;83(6):491-7.

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