Oncology Nursing Update, Lymphoma and Multiple Myeloma Edition

Issue 1, 2017 (Video Program)

CME Information

OVERVIEW OF ACTIVITY

The past several years represents a period of substantial progress in the development and evaluation of novel agents in non-Hodgkin lymphoma (NHL), chronic lymphocytic leukemia (CLL) and multiple myeloma (MM). This dynamic therapeutic environment necessitates that the practicing oncology nurse remain up to date on the benefits and risks of a plethora of novel and emerging treatment options. To provide oncology nurses with therapeutic strategies to address the disparate needs of patients, the *Oncology Nursing Update* audio series employs one-on-one interviews with nurses and medical oncologists 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 NHL, CLL and MM.

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 NHL, CLL and MM.

LEARNING OBJECTIVES

- Appreciate the contribution of patient performance status/comorbidities, biomarker profile and prior therapeutic exposure on the selection and sequence of systemic therapy for newly diagnosed and relapsed/refractory (R/R) CLL.
- Recognize the recent FDA approval of venetoclax for the treatment of R/R CLL, and discern how this agent can be safely integrated into general oncology practice.
- Review recent therapeutic advances in the management of follicular and mantle cell lymphoma, and use this information to counsel patients regarding protocol and clinical options.
- Explain the risks and benefits of evidence-based treatment approaches to patients with T-cell lymphoma.
- Evaluate the benefits and risks associated with systemic therapies used in the evidence-based treatment of MM, and develop a plan of care to manage side effects to support quality of life and continuation of treatment.
- Effectively counsel patients regarding the expected efficacy and tolerability of newly approved therapeutics for the management of R/R 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 2.9 contact hours is provided by Research To Practice during the period of November 2017 through November 2018.

This activity is awarded 2.9 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/ONULymphMM117/Video/ILNA**.

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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/ONULymphMM117/Video/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.

The corresponding audio program is available as an alternative at **ResearchToPractice.com/ONULymphMM117**.

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 — 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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Speakers Bureau: Amgen Inc, Celgene Corporation, Janssen Biotech Inc, Onyx Pharmaceuticals, an Amgen subsidiary, Takeda Oncology.

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Hardware/Software Requirements:
A high-speed Internet connection
A monitor set to 1280 x 1024 pixels or more
Internet Explorer 11 or later, Firefox 56 or later, Chrome 61 or later, Safari 11 or later, Opera 48 or later
Adobe Flash Player 27 plug-in or later
Adobe Acrobat Reader
(Optional) Sound card and speakers for audio

Last review date: November 2017

Expiration date: November 2018

Select Publications

Andorsky DJ et al. **Phase IIIb randomized study of lenalidomide plus rituximab (R2) followed by maintenance in relapsed/refractory NHL: Analysis of patients with double-refractory or early relapsed follicular lymphoma (FL).** *Proc ASCO* 2017;**Abstract 7502**.

Avet-Loiseau H et al. **Carfilzomib significantly improves the progression-free survival of high-risk patients in multiple myeloma.** *Blood* 2016;128(9):1174-80.

Chari A et al. **Daratumumab plus pomalidomide and dexamethasone in relapsed and/or refractory multiple myeloma.** *Blood* 2017;130(8):974-81.

Davies A et al. **Efficacy and safety of subcutaneous rituximab versus intravenous rituximab for first-line treatment of follicular lymphoma (SABRINA): A randomised, open-label, phase 3 trial.** *Lancet Haematol* 2017;4(6):e272-82.

Dimopoulos MA et al. **Carfilzomib or bortezomib in relapsed or refractory multiple myeloma (ENDEAVOR): An interim overall survival analysis of an open-label, randomised, phase 3 trial.** *Lancet Oncol* 2017;18(10):1327-37.

Dimopoulos MA et al. **Elotuzumab plus lenalidomide/dexamethasone for relapsed or refractory multiple myeloma: ELOQUENT-2 follow-up and post-hoc analyses on progression-free survival and tumour growth.** *Br J Haematol* 2017;178(6):896-905.

Dimopoulos MA et al; POLLUX Investigators. **Daratumumab, lenalidomide, and dexamethasone for multiple myeloma.** *N Engl J Med* 2016;375(14):1319-31.

Durie BG et al. **Bortezomib with lenalidomide and dexamethasone versus lenalidomide and dexamethasone alone in patients with newly diagnosed myeloma without intent for immediate autologous stem-cell transplant (SWOG S0777): A randomised, open-label, phase 3 trial.** *Lancet* 2017;389(10068):519-27.

Fink AM et al. **Lenalidomide maintenance after front line therapy substantially prolongs progression free survival in high risk CLL: Interim results of a phase 3 study (CLL M1 study of the German CLL Study Group).** *Proc ASH* 2016;**Abstract 229**.

Foa R et al. **Results of the phase 3 study of lenalidomide versus placebo as maintenance therapy following second-line treatment for patients with chronic lymphocytic leukemia (the CONTINUUM trial).** *Proc ASH* 2016;**Abstract 230**.

Goldschmidt H et al. **Bortezomib before and after high-dose therapy in myeloma: Long-term results from the phase III HOVON-65/GMMG-HD4 trial.** *Leukemia* 2017;[Epub ahead of print].

Holstein SA et al. **Updated analysis of CALGB (Alliance) 100104 assessing lenalidomide versus placebo maintenance after single autologous stem-cell transplantation for multiple myeloma: A randomised, double-blind, phase 3 trial.** *Lancet Haematol* 2017;4(9):e431-42.

Hronek J, Reed M. **Nursing roles in cardiac safety: Romidepsin in patients with T-cell lymphoma.** *Oncol Nurs Forum* 2016;43(2):227-34.

Kumar S et al. **Venetoclax monotherapy for relapsed/refractory multiple myeloma: Safety and efficacy results from a phase I study.** *Proc ASH* 2016;**Abstract 488**.

Marcus RE et al. **Obinutuzumab-based induction and maintenance prolongs progression-free survival (PFS) in patients with previously untreated follicular lymphoma: Primary results of the randomized phase 3 GALLIUM study.** *Proc ASH* 2016;**Abstract 6**.

Moreau P et al; TOURMALINE-MM1 Study Group. **Oral ixazomib, lenalidomide, and dexamethasone for multiple myeloma.** *N Engl J Med* 2016;374(17):1621-34.

Palumbo A et al; CASTOR Investigators. **Daratumumab, bortezomib, and dexamethasone for multiple myeloma.** *N Engl J Med* 2016;375(8):754-66.

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

Roussel M et al. **Frontline therapy with carfilzomib, lenalidomide, and dexamethasone (KRd) induction followed by autologous stem cell transplantation, Krd consolidation and lenalidomide maintenance in newly diagnosed multiple myeloma (NDMM) patients: Primary results of the Intergroupe Francophone Du MyeLome (IFM) Krd phase II study.** *Proc ASH* 2016;**Abstract 1142**.

Shah JJ et al. **Carfilzomib, pomalidomide, and dexamethasone for relapsed or refractory myeloma.** *Blood* 2015;126(20):2284-90.

Usmani SZ et al. **Open-label, multicenter, dose escalation phase 1b study to assess the subcutaneous delivery of daratumumab in patients (pts) with relapsed or refractory multiple myeloma (PAVO).** *Proc ASH* 2016;**Abstract 1149**.