Bladder Cancer Update & Renal Cell Cancer Update, 2017 (Video Program)

CME INFORMATION

TARGET AUDIENCE

This activity is intended for medical oncologists, hematologists, hematology-oncology fellows, radiation oncologists, urologists and other healthcare providers involved in the treatment of bladder and renal cell cancers.

OVERVIEW OF ACTIVITY

Cancers of the genitourinary (GU) system affect hundreds of thousands of individuals within the United States each year. Among these, tumors of the bladder, kidney and renal pelvis are among the most prevalent and are therefore the topic of extensive ongoing clinical research. As such, the clinical management of these diseases is currently in a state of evolution, necessitating rapid and consistent access to learning opportunities for clinicians who provide care for these patients. Featuring information on the latest research developments along with expert perspectives, this CME program is designed to assist medical oncologists, urologists and radiation oncologists with the formulation of up-to-date clinical management strategies for the care of patients with GU cancers.

LEARNING OBJECTIVES

- Develop an evidence-based approach to the sequencing of systemic therapies for patients with advanced renal cell carcinoma (RCC), incorporating cytokines, multikinase inhibitors, anti-VEGF antibodies, mTOR inhibitors and immune checkpoint inhibitors.
- Appreciate the recent FDA approvals in advanced RCC, and develop strategies to optimally integrate these agents into the management of this disease.
- Recognize toxicities attributable to diverse moleculartargeted treatments for RCC, and offer preventive or emergent interventions to minimize or ameliorate these side effects.
- Recall the unique mechanism of action of, available clinical trial data with and clinical indications for the use of atezolizumab in patients with relapsed/refractory advanced urothelial bladder cancer, and use this information to guide off-protocol treatment planning.
- Recognize immune-related adverse events and other common side effects associated with approved and developmental immunotherapeutics in order to offer supportive management strategies.

 Recall available and emerging data with novel anti-PD-1/ PD-L1 antibodies currently under investigation for bladder cancer and RCC, and, where applicable, refer eligible patients for trial participation or expanded access programs.

ACCREDITATION STATEMENT

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Successful completion of this CME activity enables the participant to earn up to 2 MOC points in the American Board of Internal Medicine's (ABIM) Maintenance of Certification (MOC) program. Participants will earn MOC points equivalent to the amount of CME credits claimed for the activity. It is the CME activity provider's responsibility to submit participant completion information to ACCME for the purpose of granting ABIM MOC credit.

Please note, this program has been specifically designed for the following ABIM specialty: **medical oncology**.

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HOW TO USE THIS CME ACTIVITY

This CME activity consists of a video component. To receive credit, the participant should 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/RenalBladder117/Video/CME**.

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 CME 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 physician 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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Consulting Agreements: Merck, Pfizer Inc; **Contracted Research:** Bristol-Myers Squibb Company, Genentech BioOncology, Merck, Pfizer Inc, Roche Laboratories Inc.

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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 **Last review date:** May 2017

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Bladder Cancer

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Galsky MD et al. Comparative effectiveness of cisplatin-based and carboplatin-based chemotherapy for treatment of advanced urothelial carcinoma. *Ann Oncol* 2012;23(2):406-10.

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Rosenberg JE et al. Atezolizumab in patients with locally advanced and metastatic urothelial carcinoma who have progressed following treatment with platinum-based chemotherapy: A single-arm, multicentre, phase 2 trial. *Lancet* 2016;387(10031):1909-20.

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Renal Cell Carcinoma

A phase II, randomized study of atezolizumab (anti PD-L1 antibody) administered as monotherapy or in combination with bevacizumab versus sunitinib in participants with untreated advanced renal cell carcinoma. NCT01984242

A phase III, open-label, randomized study of atezolizumab (anti-PD-L1 antibody) in combination with bevacizumab versus sunitinib in patients with untreated advanced renal cell carcinoma. NCT02420821

Atkins MB et al. Axitinib in combination with pembrolizumab in patients (pts) with advanced renal cell carcinoma (aRCC): Preliminary safety and efficacy results. *Proc ESMO* 2016; Abstract 773PD.

Choueri T et al. Cabozantinib versus sunitinib as initial targeted therapy for patients with metastatic renal cell carcinoma of poor or intermediate risk: The Alliance A031203 CABOSUN trial. *J Clin Oncol* 2017;35(6):591-7.

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Haas NB et al. Initial results from ASSURE (E2805): Adjuvant sorafenib or sunitinib for unfavorable renal carcinoma, an ECOG-ACRIN-led, NCTN phase III trial. *Proc ASCO* 2015; Abstract 403.

Hammers HJ et al. Updated results from a phase I study of nivolumab (Nivo) in combination with ipilimumab (Ipi) in metastatic renal cell carcinoma (mRCC): The CheckMate 016 study. *Proc ESMO* 2016; Abstract 1062P.

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