

Chronic Lymphocytic Leukemia Update

Issue 1, 2018 (Video Program)

CME Information

TARGET AUDIENCE

This activity is intended for medical oncologists, hematologists, hematology-oncology fellows and other healthcare providers involved in the treatment of chronic lymphocytic leukemia (CLL).

OVERVIEW OF ACTIVITY

The clinical course of CLL and outcomes for patients vary widely, largely based on the presence of individual predictive and other risk factors. In recent years the identification of cytogenetic abnormalities and their subsequent incorporation into traditional clinical staging systems has refined clinicians' ability to determine patient prognosis, and based on the improved understanding of the biology of CLL, a number of novel agents and therapeutic strategies have been investigated. Some of these efforts have proven successful and are already available for use in the clinic, but along with these many exciting advances, vexing questions and clinical challenges are emerging simultaneously. To bridge the gap between research and patient care, this program features one-on-one discussions with leading hematology-oncology investigators. By providing information on the latest clinical developments in the context of expert perspectives, this activity assists medical oncologists, hematologists and hematology-oncology fellows with the formulation of evidence-based and current therapeutic strategies, which in turn facilitates optimal patient care.

LEARNING OBJECTIVES

- Recall the incidence, prognostic significance and clinical implications of select biomarkers and chromosomal abnormalities that may be associated with a diagnosis of CLL, and use this information to develop evidence-based testing algorithms in general oncology practice.
- Individualize the selection of systemic therapy for patients with newly diagnosed CLL, considering clinical presentation, biomarker profile and psychosocial status.
- Implement a plan of care to recognize and manage side effects and toxicities associated with current and recently approved systemic therapies in the management of CLL.
- Appreciate recent therapeutic advances and related FDA approvals in CLL, and discern how these agents can be appropriately integrated into routine clinical practice.

- Review emerging clinical data on the efficacy and safety of the recently FDA-approved antibody-drug conjugate moxetumomab pasudotox for hairy cell leukemia.
- Evaluate available data with and consider the potential clinical roles of novel agents and regimens that may provide treatment options for additional patients beyond those for whom they were initially indicated.

ACCREDITATION STATEMENT

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CREDIT DESIGNATION STATEMENT

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AMERICAN BOARD OF INTERNAL MEDICINE (ABIM) — MAINTENANCE OF CERTIFICATION (MOC)

Successful completion of this CME activity, which includes participation in the evaluation component, enables the participant to earn up to 3 Medical Knowledge 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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This CME activity consists of a video component. To receive credit, the participant should review the CME information, 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/CLLUpdate118/Video/CME. The corresponding audio program is available as an alternative at ResearchToPractice.com/CLLUpdate118.

CONTENT VALIDATION AND DISCLOSURES

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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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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: December 2018

Expiration date: December 2019

Select Publications

- Anderson MA et al. **Clinicopathological features and outcomes of progression of CLL on the BCL2 inhibitor venetoclax.** *Blood* 2017;129(25):3362-70.
- Byrd JC et al. **Acalabrutinib monotherapy in patients with relapsed/refractory (R/R) chronic lymphocytic leukemia: Updated results from the phase 1/2 ACE-CL-001 study.** *Proc ASH* 2017;Abstract 498.
- Davids MS et al. **A multicenter, phase II study of ibrutinib plus FCR (iFCR) as frontline therapy for younger CLL patients.** *Proc ASH* 2017;Abstract 496.
- Davids MS. **How should we sequence and combine novel therapies in CLL?** *Hematology Am Soc Hematol Educ Program* 2017;2017(1):346-53.
- Flinn IW et al. **Safety, efficacy and minimal residual disease negativity of a combination of venetoclax and obinutuzumab in patients with previously untreated chronic lymphocytic leukemia — Results from a phase 1b study.** *Proc ASH* 2017;Abstract 430.
- Goede V et al. **Overall survival benefit of obinutuzumab over rituximab when combined with chlorambucil in patients with chronic lymphocytic leukemia and comorbidities: Final survival analysis of the CLL11 study.** *Proc EHA* 2018;Abstract S151.
- Gribben JG. **How and when I do allogeneic transplant in CLL.** *Blood* 2018;132(1):31-9.
- Jain N et al. **Combined venetoclax and ibrutinib for patients with previously untreated high-risk CLL, and relapsed/refractory CLL: A phase II trial.** *Proc ASH* 2017;Abstract 429.
- Jones JA et al. **Venetoclax for chronic lymphocytic leukaemia progressing after ibrutinib: An interim analysis of a multicentre, open-label, phase 2 trial.** *Lancet Oncol* 2018;19(1):65-75.
- Kreitman RJ et al. **Moxetumomab pasudotox in relapsed/refractory hairy cell leukemia.** *Leukemia* 2018;32(8):1768-77.
- Maddocks KJ et al. **Etiology of ibrutinib therapy discontinuation and outcomes in patients with chronic lymphocytic leukemia.** *JAMA Oncol* 2015;1(1):80-7.
- Michallet AS et al. **High rate of complete response but minimal residual disease still detectable after first-line treatment combining obinutuzumab and ibrutinib in chronic lymphocytic leukemia (CLL): ICLL07 FILO trial.** *Proc EHA* 2018;Abstract S804.
- O'Brien S et al. **Single-agent ibrutinib in treatment-naïve and relapsed/refractory chronic lymphocytic leukemia: A 5-year experience.** *Blood* 2018;131(17):1910-9.
- Robak T et al. **Single-agent ibrutinib versus chemoimmunotherapy regimens for treatment-naïve patients with chronic lymphocytic leukemia: A cross-trial comparison of phase 3 studies.** *Am J Hematol* 2018;93(11):1402-10.
- Rogers KA et al. **Initial results of the phase 2 treatment naïve cohort in a phase 1b/2 study of obinutuzumab, ibrutinib, and venetoclax in chronic lymphocytic leukemia.** *Proc ASH* 2017;Abstract 431.
- Seymour JF et al. **Venetoclax-rituximab in relapsed or refractory chronic lymphocytic leukemia.** *N Engl J Med* 2018;378(12):1107-20.
- Stilgenbauer S et al. **Venetoclax for patients with chronic lymphocytic leukemia with 17p deletion: Results from the full population of a phase II pivotal trial.** *J Clin Oncol* 2018;36(19):1973-80.
- Thompson PA, Wierda WG. **Eliminating minimal residual disease as a therapeutic end point: Working toward cure for patients with CLL.** *Blood* 2016;127(3):279-86.
- Thompson PA et al. **Fludarabine, cyclophosphamide, and rituximab treatment achieves long-term disease-free survival in IGHV-mutated chronic lymphocytic leukemia.** *Blood* 2016;127(3):303-9.
- Troussard X, Cornet E. **Hairy cell leukemia 2018: Update on diagnosis, risk-stratification, and treatment.** *Am J Hematol* 2017;92(12):1382-90.
- Turtle CJ et al. **Durable molecular remissions in chronic lymphocytic leukemia treated with CD19-specific chimeric antigen receptor-modified T cells after failure of ibrutinib.** *J Clin Oncol* 2017;35(26):3010-20.
- Wierda WG et al. **Phase II CAPTIVATE results of ibrutinib (ibr) plus venetoclax (ven) in first-line chronic lymphocytic leukemia (CLL).** *Proc ASCO* 2018;Abstract 7502.
- Wierda W et al. **Venetoclax in relapsed/refractory chronic lymphocytic leukemia (CLL) with 17p deletion: Outcome and minimal residual disease (MRD) from the full population of the pivotal M13-982 trial.** *Proc SOHO* 2017;Abstract CII-102.