

# Oncology Today with Dr Neil Love: Gastrointestinal Cancers Edition 2019 — Gastric Cancer *Video Program*

## CME Information

### TARGET AUDIENCE

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

### OVERVIEW OF ACTIVITY

Approximately 45,160 people will be diagnosed with gastric or esophageal cancer in the United States in 2019 alone, with nearly 27,220 succumbing to their disease. Published results from ongoing trials continually lead to the emergence of new therapeutic targets and regimens, thereby altering existing management algorithms. In order to offer optimal patient care, including the option of clinical trial participation, the practicing medical oncologist must be well informed of these advances.

To bridge the gap between research and patient care, this issue of *Oncology Today with Dr Neil Love* focusing on advanced gastric and gastroesophageal cancer features a discussion with 2 leading gastrointestinal oncology investigators. By providing access to the latest scientific developments and the perspectives of experts in the field, this CME activity assists medical oncologists with the formulation of up-to-date management strategies.

### LEARNING OBJECTIVES

- Compare and contrast the clinical relevance to systemic management of advanced gastric/gastroesophageal cancer of recent pivotal research results published in peer-reviewed journals and/or presented at major oncology conferences.
- Use HER2 status, PD-L1 combined positive score, clinical factors and patient preferences to optimize the selection and sequence of systemic therapy for locally advanced or metastatic gastric/gastroesophageal cancer.
- Appraise the rationale for and clinical data with commercially available and developmental immune checkpoint inhibitors in the treatment of gastric/gastroesophageal cancer.
- Describe ongoing research to validate or identify biomarkers predictive of response to anti-PD-1/PD-L1 antibodies, and use this information to guide future trial design and routine clinical practice.

- Counsel patients regarding the incidence and manifestation of side effects and toxicities associated with systemic agents and regimens commonly used in the management of advanced gastric/gastroesophageal cancer.
- Devise a rational approach to the potential incorporation of TAS-102 into the treatment algorithm for previously treated locally advanced or metastatic gastric/gastroesophageal adenocarcinoma.
- Recall the design of ongoing clinical trials evaluating novel investigational agents for gastric/gastroesophageal cancer, and counsel appropriately selected patients about availability and participation.

### ACCREDITATION STATEMENT

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Successful completion of this CME activity, which includes participation in the evaluation component, enables the participant to earn up to 1.5 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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## HOW TO USE THIS CME ACTIVITY

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/OncologyTodayGI19/Gastric/Video/CME](https://www.researchtopractice.com/OncologyTodayGI19/Gastric/Video/CME). The corresponding audio program is available as an alternative at [ResearchToPractice.com/OncologyTodayGI19/Gastric](https://www.researchtopractice.com/OncologyTodayGI19/Gastric).

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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 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:

### Jaffer A Ajani, MD

Professor of Medicine  
Department of Gastrointestinal Medical Oncology  
The University of Texas MD Anderson Cancer Center  
Houston, Texas

**Advisory Committee and Consulting Agreements:** Astellas Pharma Global Development Inc, AstraZeneca Pharmaceuticals LP, Bristol-Myers Squibb Company, Lilly, Merck, Taiho Oncology Inc; **Contracted Research:** Astellas Pharma Global Development Inc, Bristol-Myers Squibb Company, Lilly, Merck, Roche Laboratories Inc, Zymeworks; **Data and Safety Monitoring Board/Committee:** BEEG (Chinese company).

### Joseph Chao, MD

Assistant Clinical Professor  
Department of Medical Oncology and Therapeutics Research  
Gastrointestinal Cancer Program  
City of Hope Comprehensive Cancer Center  
Duarte, California

**Advisory Committee:** Daiichi Sankyo Inc, Merck, Taiho Oncology Inc; **Consulting Agreements:** AstraZeneca Pharmaceuticals LP, Boston Biomedical Pharma Inc, Foundation Medicine, Lilly; **Contracted Research:** Merck, Novonco Therapeutics Inc; **Speakers Bureau:** Merck.

**MODERATOR** — **Dr Love** is president and CEO of Research To Practice. Research To Practice receives funds in the form of educational grants to develop CME activities from the following commercial interests: AbbVie Inc, Acerta Pharma — A member of the AstraZeneca Group, Adaptive Biotechnologies, Agendia Inc, Agios Pharmaceuticals Inc, Amgen Inc, Ariad Pharmaceuticals Inc, Array BioPharma Inc, Astellas Pharma Global Development Inc, AstraZeneca Pharmaceuticals LP, Bayer HealthCare Pharmaceuticals, Biodesix Inc, bioTheranostics Inc, Boehringer Ingelheim Pharmaceuticals Inc, Boston Biomedical Pharma Inc, Bristol-Myers Squibb Company, Celgene Corporation, Clovis Oncology, Daiichi Sankyo Inc, Dendreon Pharmaceuticals Inc, Eisai Inc, Exelixis Inc, Foundation Medicine, Genentech, Genomic Health Inc, Gilead Sciences Inc, Guardant Health, Halozyme Inc, ImmunoGen Inc, Incyte Corporation, Infinity Pharmaceuticals Inc, Ipsen Biopharmaceuticals Inc, Janssen Biotech Inc, administered by Janssen Scientific Affairs LLC, Jazz Pharmaceuticals Inc, Kite Pharma Inc, Lexicon Pharmaceuticals Inc, Lilly, Loxo Oncology, Merck, Merrimack Pharmaceuticals Inc, Myriad Genetic Laboratories Inc, Natera Inc, Novartis, Pfizer Inc, Pharmacyclics LLC, an AbbVie Company, Prometheus Laboratories Inc, Puma Biotechnology Inc, Regeneron Pharmaceuticals Inc, Sandoz Inc, a Novartis Division, Sanofi Genzyme, Seattle Genetics, Sirtex Medical Ltd, Spectrum Pharmaceuticals Inc, Taiho Oncology Inc, Takeda Oncology, Tesaro Inc, Teva Oncology and Tokai Pharmaceuticals Inc.

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— Planners, scientific staff and independent reviewers for Research To Practice have no relevant conflicts of interest to disclose.

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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:** February 2019

**Expiration date:** February 2020

## Select Publications

- Arkenau H-T et al. **TAGS: A phase 3, randomised, double-blind study of trifluridine/tipiracil (TAS-102) versus placebo in patients with refractory metastatic gastric cancer.** *Proc ESMO* 2018;Abstract LBA25.
- Chen Y et al. **Trastuzumab beyond progression in patients with HER2-positive advanced gastric adenocarcinoma: A retrospective real world study.** *Gastrointestinal Cancers Symposium* 2019;Abstract 113.
- Gopalakrishnan V et al. **Gut microbiome modulates response to anti-PD-1 immunotherapy in melanoma patients.** *Science* 2018;359(6371):97-103.
- Hara H et al. **Phase I/II study of ramucirumab plus nivolumab in patients in second line treatment for advanced gastric adenocarcinoma (NivoRam study).** *Gastrointestinal Cancers Symposium* 2019;Abstract 129.
- Ilson DH et al. **Efficacy and safety of trifluridine/tipiracil (FTD/TPI) in patients (pts) with metastatic gastric cancer (mGC) with or without prior gastrectomy: Results from a phase III study (TAGS).** *Gastrointestinal Cancers Symposium* 2019;Abstract 3.
- Janjigian YY et al. **First-line pembrolizumab (P), trastuzumab (T), capecitabine (C) and oxaliplatin (O) in HER2-positive metastatic esophagogastric adenocarcinoma (mEGA).** *Gastrointestinal Cancers Symposium* 2019;Abstract 62.
- Janjigian YY et al. **CheckMate-032 study: Efficacy and safety of nivolumab and nivolumab plus ipilimumab in patients with metastatic esophagogastric cancer.** *J Clin Oncol* 2018;36(28):2836-44.
- Kelly RJ et al. **Neoadjuvant nivolumab plus concurrent chemoradiation in stage II/III esophageal/gastroesophageal junction cancer.** *Gastrointestinal Cancers Symposium* 2019;Abstract 142.
- Khan U et al. **Impact of antibiotic use on response to treatment with immune checkpoint inhibitors.** *Gastrointestinal Cancers Symposium* 2019;Abstract 143.
- Kojima T et al. **Pembrolizumab versus chemotherapy as second-line therapy for advanced esophageal cancer: Phase III KEYNOTE-181 study.** *Gastrointestinal Cancers Symposium* 2019;Abstract 2.
- Lee DH et al. **Evaluation of safety and tolerability of durvalumab (D) and tremelimumab (T) in combination with first-line chemotherapy in patients (pts) with esophageal squamous-cell carcinoma (ESCC).** *Gastrointestinal Cancers Symposium* 2019;Abstract 146.
- Mamdani H et al. **Safety and efficacy of durvalumab following trimodality therapy for locally advanced esophageal and GEJ adenocarcinoma: Early efficacy results from Big Ten Cancer Research Consortium study.** *Gastrointestinal Cancers Symposium* 2019;Abstract 5.
- Meindl-Beinker NM et al. **Multicenter open-label phase II trial to evaluate nivolumab and ipilimumab for second line therapy in elderly patients with advanced esophageal squamous cell cancer (RAMONA).** *Gastrointestinal Cancers Symposium* 2019;Abstract TPS174.
- Moser J et al. **Survival of patients with metastatic HER2 positive gastroesophageal cancer treated with second-line chemotherapy plus trastuzumab or ramucirumab after progression on frontline chemotherapy plus trastuzumab.** *Gastrointestinal Cancers Symposium* 2019;Abstract 69.
- Shah MA et al. **Efficacy and safety of pembrolizumab for heavily pretreated patients with advanced, metastatic adenocarcinoma or squamous cell carcinoma of the esophagus: The phase 2 KEYNOTE-180 study.** *JAMA Oncol* 2018;[Epub ahead of print].
- Shen J et al. **ARID1A deficiency promotes mutability and potentiates therapeutic antitumor immunity unleashed by immune checkpoint blockade.** *Nat Med* 2018;24(5):556-62.
- Shitara K et al. **Pembrolizumab versus paclitaxel for previously treated, advanced gastric or gastro-oesophageal junction cancer (KEYNOTE-061): A randomised, open-label, controlled, phase 3 trial.** *Lancet* 2018;392(10142):123-33.
- Shitara K et al. **Trifluridine/tipiracil versus placebo in patients with heavily pretreated metastatic gastric cancer (TAGS): A randomised, double-blind, placebo-controlled, phase 3 trial.** *Lancet Oncol* 2018;19(11):1437-48.
- Smyth EC, Petty RD. **Pembrolizumab versus paclitaxel in gastro-oesophageal adenocarcinoma.** *Lancet* 2018;392(10142):97-8.
- Tabernero J et al. **Pertuzumab plus trastuzumab and chemotherapy for HER2-positive metastatic gastric or gastro-oesophageal junction cancer (JACOB): Final analysis of a double-blind, randomised, placebo controlled phase 3 study.** *Lancet Oncol* 2018;19(10):1372-84.
- Uboha N et al. **Phase I/II trial of perioperative avelumab in combination with chemoradiation in the treatment of stage II/III resectable esophageal cancer.** *Gastrointestinal Cancers Symposium* 2019;Abstract TPS181.