Follicular Lymphoma Update Issue 1, 2019 (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 follicular lymphoma (FL).

OVERVIEW OF ACTIVITY

FL is an indolent form of non-Hodgkin lymphoma that can vary significantly in its clinical presentation. Because of this variety, no single standard approach to the initial management of the disease has been established and available options range from watchful waiting, radiation therapy and rituximab monotherapy to various combinations of chemoimmunotherapy. Recent data sets and corresponding FDA actions have led to the emergence of new therapeutic targets and regimens, thereby altering management algorithms, and 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 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

- Evaluate emerging research data and recent FDA approvals when designing an optimal therapeutic approach for patients with newly diagnosed FL requiring active therapy.
- Recall published research data and other clinical factors in the best-practice selection, sequencing or combining of available therapeutic agents in the nonresearch care of patients with relapsed/refractory (R/R) FL.
- Compare and contrast the efficacy and safety of the PI3-kinase inhibitors approved for the treatment of R/R FL to determine the current role of each in clinical practice.
- Develop practical strategies to prevent, recognize and ameliorate the toxicities associated with therapies routinely used in the management of FL.
- Identify ongoing clinical trials evaluating innovative investigational approaches for FL, and obtain consent from appropriate patients for study participation.

ACCREDITATION STATEMENT

Research To Practice is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.

CREDIT DESIGNATION STATEMENT

Research To Practice designates this enduring material for a maximum of 2.5 *AMA PRA Category 1 Credits*TM. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

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 2.5 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**.

Personal information and data sharing: Research To Practice aggregates deidentified user data for program-use analysis, program development, activity planning and site improvement. We may provide aggregate and deidentified data to third parties, including commercial supporters. We do not share or sell personally identifiable information to any unaffiliated third parties or commercial supporters. Please see our privacy policy at **ResearchToPractice.com/Privacy-Policy** for more information.

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/FLUpdate119/Video/ CME**. The corresponding audio program is available as an alternative at **ResearchToPractice.com/FLUpdate119**.

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:

Nathan H Fowler, MD

Director of Clinical Investigation and Translational Research Lead, Phase I and Indolent Research Groups Department of Lymphoma/Myeloma The University of Texas MD Anderson Cancer Center Houston, Texas

Advisory Committee: AbbVie Inc, Bayer HealthCare Pharmaceuticals, Celgene Corporation, Gilead Sciences Inc, Janssen Biotech Inc, Roche Laboratories Inc, TG Therapeutics Inc; **Contracted Research:** AbbVie Inc, Celgene Corporation, Janssen Biotech Inc, Roche Laboratories Inc, TG Therapeutics Inc.

Gilles A Salles, MD, PhD

Professor of Medicine Université Claude Bernard Head of the Hematology Department Hospices Civils de Lyon Lyon, France

Advisory Committee: AbbVie Inc, Celgene Corporation, Novartis, Roche Laboratories Inc; Consulting Agreements: AbbVie Inc, Amgen Inc, Bristol-Myers Squibb Company, Celgene Corporation, Epizyme Inc, Gilead Sciences Inc, Janssen Biotech Inc, Karyopharm Therapeutics, Kite Pharma Inc, Merck, MorphoSys, Novartis, Roche Laboratories Inc, Servier, Takeda Oncology; Contracted Research: Celgene Corporation, Roche Laboratories Inc.

EDITOR — **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, Medivation Inc, a Pfizer Company, 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.

RESEARCH TO PRACTICE CME PLANNING COMMITTEE MEMBERS, STAFF AND REVIEWERS — Planners, scientific staff and independent reviewers for Research To Practice have no relevant conflicts of interest to disclose.

This educational activity contains discussion of published and/ or investigational uses of agents that are not indicated by the Food and Drug Administration. Research To Practice does not recommend the use of any agent outside of the labeled indications. Please refer to the official prescribing information for each product for discussion of approved indications, contraindications and warnings. The opinions expressed are those of the presenters and are not to be construed as those of the publisher or grantors.

This activity is supported by educational grants from Bayer HealthCare Pharmaceuticals, Celgene Corporation and Gilead Sciences Inc.

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

Release date: February 2019

Expiration date: February 2020

Select Publications

Armitage JO, Longo DL. Which anti-CD20 antibody is better in follicular lymphoma? N Engl J Med 2017;377(14):1389-90.

Bartlett NL et al. Single-agent ibrutinib in relapsed or refractory follicular lymphoma: A phase 2 consortium trial. *Blood* 2018;131(2):182-90.

Cheah CY, Fowler NH. Novel agents for relapsed and refractory follicular lymphoma. *Best Pract Res Clin Haematol* 2018;31(1):41-8.

Cheson BD et al. **Overall survival benefit in patients with rituximab-refractory indolent non-Hodgkin lymphoma who received obinutuzumab plus bendamustine induction and obinutuzumab maintenance in the GADOLIN study.** *J Clin Oncol* 2018;36(22):2259-66.

Dreyling M et al. **Phosphatidylinositol 3-kinase inhibition by copanlisib in relapsed or refractory indolent lymphoma.** *J Clin Oncol* 2017;35(35):3898-905.

Fowler NH et al. Acalabrutinib alone or in combination with rituximab (R) in follicular lymphoma (FL). *Proc ASCO* 2018; Abstract 7549.

Fowler NH et al. A multicenter, randomized, double-blind, placebo-controlled phase III study of the Bruton's tyrosine kinase (BTK) inhibitor, ibrutinib, in combination with rituximab versus placebo in combination with rituximab in patients with treatment-naive follicular lymphoma (PERSPECTIVE). *Proc ASCO* 2017;Abstract TPS7576.

Fowler NH et al. Activity of the immunologic doublet of lenalidomide plus obinutuzumab in relapsed follicular lymphoma: Results of a phase I/II study. *Proc ASCO* 2017; Abstract 7531.

Gopal AK et al. Ibrutinib as treatment for patients with relapsed/refractory follicular lymphoma: Results from the open-label, multicenter, phase II DAWN study. *J Clin Oncol* 2018;36(23):2405-12.

Gopal AK et al. Idelalisib is effective in patients with high-risk follicular lymphoma and early relapse after initial chemoimmunotherapy. *Blood* 2017;129(22):3037-9.

Hiddemann W et al. Immunochemotherapy with obinutuzumab or rituximab for previously untreated follicular lymphoma in the GALLIUM study: Influence of chemotherapy on efficacy and safety. *J Clin Oncol* 2018;36(23):2395-404.

Ito T, Handa H. Cereblon and its downstream substrates as molecular targets of immunomodulatory drugs. *Int J Hematol* 2016;104(3):293-9.

Marcus R et al. Obinutuzumab for the first-line treatment of follicular lymphoma. N Engl J Med 2017;377(14):1331-44.

Morschhauser F et al. An open-label phase 1b study of obinutuzumab plus lenalidomide in relapsed/refractory follicular B-cell lymphoma. *Blood* 2018;132(14):1486-94.

Morschhauser F et al; RELEVANCE trial investigators. **Rituximab plus lenalidomide in advanced untreated follicular lymphoma.** *N Engl J Med* 2018;379(10):934-47.

Nastoupil L et al. High complete response rates with pembrolizumab in combination with rituximab in patients with relapsed follicular lymphoma: Results of an open-label, phase II study. *Proc ASH* 2017; Abstract 414.

Schuster SJ et al. Chimeric antigen receptor T cells in refractory B-cell lymphomas. N Engl J Med 2017;377(26):2545-54.

Sehn LH et al. Randomized phase 2 trial of polatuzumab vedotin (pola) with bendamustine and rituximab (BR) in relapsed/ refractory (r/r) FL and DLBCL. *Proc ASCO* 2018; Abstract 7507.

Smith SM et al. Safety and tolerability of idelalisib, lenalidomide, and rituximab in relapsed and refractory lymphoma: The Alliance for Clinical Trials in Oncology A051201 and A051202 phase 1 trials. *Lancet Haematol* 2017;4(4):e176-82.

Strati P et al. Long-term remissions of patients with follicular lymphoma grade 3 treated with R-CHOP. *Clin Lymphoma Myeloma Leuk* 2018;18(1):e103-8.

Tilly H et al; Lymphoma Study Association. Lenalidomide in combination with R-CHOP (R2-CHOP) as first-line treatment of patients with high tumour burden follicular lymphoma: A single-arm, open-label, phase 2 study. *Lancet Haematol* 2018;5(9):e403-10.

Tran E et al. A milestone for CAR T cells. N Engl J Med 2017;377(26):2593-6.

Younes A et al. Safety and efficacy of atezolizumab in combination with obinutuzumab and bendamustine in patients with previously untreated follicular lymphoma: An interim analysis. *Proc ASH* 2017; Abstract 481.