Oncology Today with Dr Neil Love: Diffuse Large B-Cell Lymphoma Edition

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 diffuse large B-cell lymphoma (DLBCL).

OVERVIEW OF ACTIVITY

DLBCL is the most common type of non-Hodgkin lymphoma. Approximately 60% of patients with DLBCL are cured with standard chemotherapy that includes rituximab, cyclophosphamide, doxorubicin, vincristine and prednisone (R-CHOP). However, 30% to 40% of patients develop relapsed or refractory disease that cannot be cured with R-CHOP, indicating the need for more effective therapies for this patient subset. The recently emerging chimeric antigen receptor (CAR) T-cell therapy and several other novel agents demonstrating promise in clinical development appear poised to disrupt long-standing management algorithms for this disease, 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 a joint discussion with 2 leading hematology oncology investigators on recently approved and emerging strategies for patients with DLBCL. By providing access to the latest scientific developments and the perspectives of experts in the field, this CME activity will assist medical oncologists with the formulation of up-to-date strategies for the management of this disease.

LEARNING OBJECTIVES

- Evaluate the clinical relevance to the management of DLBCL of recent pivotal research results published in peer-reviewed journals and/or presented at major oncology conferences.
- Consider patient and disease characteristics in the up-front and subsequent treatment of DLBCL.
- Assess existing efficacy and safety data from clinical trials of approved CAR T-cell therapies directed at CD19 for patients with relapsed/refractory B-cell lymphomas, and use this information to identify suitable candidates for this approach.
- Recall the mechanisms of action of and available and emerging data with novel investigational agents currently under evaluation for DLBCL, and where applicable, refer eligible patients for trial participation.

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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 1.75 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 specialties: **medical oncology** and **hematology**.

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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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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, Genmab, 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, Teva Oncology and Tokai Pharmaceuticals Inc.

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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

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Select Publications

A phase 2/3, randomised, multicentre study of MOR208 with bendamustine versus rituximab with bendamustine in patients with relapsed or refractory diffuse large b-cell lymphoma (R-R DLBCL) who are not eligible for high-dose chemotherapy (HDC) and autologous stem-cell transplantation (ASCT). NCT02763319

A phase III, multicenter, randomized, double-blind, placebo-controlled trial comparing the efficacy and safety of polatuzumab vedotin in combination with rituximab and CHP (R-CHP) versus rituximab and CHOP (R-CHOP) in previously untreated patients with diffuse large B-cell lymphoma. NCT03274492

A phase 3, randomized, open-label study evaluating efficacy of axicabtagene ciloleucel versus standard of care therapy in subjects with relapsed/refractory diffuse large B cell lymphoma. NCT03391466

A randomized, open-label, phase III study comparing thalidomide combined with R-CHOP and R-CHOP in newly diagnosed double-expressor diffuse large B-cell lymphoma patients. NCT03318835

Abramson JS et al. **Updated safety and long term clinical outcomes in TRANSCEND NHL 001, pivotal trial of lisocabtagene maraleucel (JCAR017) in R/R aggressive NHL.** *Proc ASCO* 2018;**Abstract 7505**.

Armand P et al. **Pembrolizumab in patients with relapsed or refractory primary mediastinal large B-cell lymphoma (PMBCL): Data from the Keynote-013 and Keynote-170 Studies.** *Proc ASH* 2018;**Abstract 228**.

Castellino A et al. **High efficacy of lenalidomide plus R-CHOP (R2CHOP) combination in first line treatment of activated B-cell (ABC) DLBCL defined using gene-expression profiling: A combined analysis from two phase 2 trials.** *Proc ASH* 2018;**Abstract 2962**.

Chow VA et al. **Outcomes of patients with large B-cell lymphomas and progressive disease following CD19-specific CAR T-cell therapy.** *Proc ASH* 2018;**Abstract 94**.

Chow VA et al. **Translating anti-CD19 CAR T-cell therapy into clinical practice for relapsed/refractory diffuse large B-cell lymphoma.** *Blood* 2018;132(8):777-81.

Cordeiro A et al. **Late effects of CD19-targeted CAR-T cell therapy.** *Proc ASH* 2018;**Abstract 223**.

Faramand R et al. **Prediction of CAR T-related toxicities in R/R DLBCL patients treated with axicabtagene ciloleucel using point of care cytokine measurements.** *Proc ASH* 2018;**Abstract 95**.

Jacobson CA et al. **Axicabtagene ciloleucel in the real world: Outcomes and predictors of response, resistance and toxicity.** *Proc ASH* 2018;**Abstract 92**.

Landsburg D et al. **Outcomes of patients with relapsed/refractory double expressor B cell lymphoma as defined by multicenter pathology review treated with ibrutinib monotherapy.** *Proc ASH* 2018;**Abstract 455**.

Locke FL et al. **Long-term safety and activity of axicabtagene ciloleucel in refractory large B-cell lymphoma (ZUMA-1): A single-arm, multicentre, phase 1-2 trial.** *Lancet Oncol* 2019;20(1):31-42.

Locke FL et al. **Durability of response in ZUMA-1, the pivotal phase 2 study of axicabtagene ciloleucel (Axi-Cel) in patients (Pts) with refractory large B cell lymphoma.** *Proc ASCO* 2018;**Abstract 3003**.

Moskowitz AJ et al. **Nivolumab combined with brentuximab vedotin for relapsed/refractory primary mediastinal large B-cell lymphoma: Preliminary results from the phase 2 CheckMate 436 trial.** *Proc ASH* 2018;**Abstract 1691**.

Nastoupil LJ et al. **Axicabtagene ciloleucel (Axi-cel) CD19 chimeric antigen receptor (CAR) T-cell therapy for relapsed/refractory large B-cell lymphoma: Real world experience.** *Proc ASH* 2018;**Abstract 91**.

Phase III, randomized controlled trial of R-GemOx versus R-miniCHOP regimen in first-line treatment of elderly diffuse large B cell lymphoma. NCT02767674

Phase 3 randomized, double-blind, placebo controlled, multicenter study to compare the efficacy and safety of lenalidomide (CC-5013) plus R-CHOP chemotherapy (R2-CHOP) versus placebo plus R-CHOP chemotherapy in subjects with previously untreated activated B-cell type diffuse large B-cell lymphoma. NCT02285062

Prospective, multicenter, randomized, open-labeled, phase III study comparing high-dose intravenous methotrexate versus intrathecal methotrexate for the prophylaxis of central nervous system relapse in diffuse large B cell lymphoma. NCT03123718

Park JH et al. **A phase I first-in-human clinical trial of CD19-targeted 19-28z/4-1BBL "armored" CAR T cells in patients with relapsed or refractory NHL and CLL including Richter's transformation.** *Proc ASH* 2018;**Abstract 224**.

Ramchandren R et al. **The iR^2 regimen (ibrutinib, lenalidomide, and rituximab) is active with a manageable safety profile in patients with relapsed/refractory non-germinal center-like diffuse large B-cell lymphoma.** *Proc ASH* 2018;**Abstract 402**.

Select Publications

Study evaluating relapses in central nervous system in patients with diffuse large B-cell lymphoma treated with chemotherapy with or without CNS prophylaxis. Multicentric, prospective, randomized phase III study. NCT02777736

Sub-cutaneous rituximab-miniCHOP versus sub-cutaneous rituximab-miniCHOP + lenalidomide (R2-miniCHOP) in diffuse large B cell lymphoma for patients of 80 years old or more. A multicentric phase III study of the LYSA Association. NCT02128061

Salles GA et al. **Single-arm phase II study of MOR208 combined with lenalidomide in patients with relapsed or refractory diffuse large B-cell lymphoma: L-Mind.** *Proc ASH* 2018;**Abstract 227**.

Sano D et al. **Safety of axicabtagene ciloleucel CD19 CAR T-cell therapy in elderly patients with relapsed or refractory large B-cell lymphoma.** *Proc ASH* 2018;**Abstract 96**.

Schuster SJ et al; JULIET Investigators. **Tisagenlecleucel in adult relapsed or refractory diffuse large B-cell lymphoma.** *N Engl J Med* 2019;380(1):45-56.

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**.

Tisagenlecleucel versus standard of care in adult patients with relapsed or refractory aggressive B-cell non-Hodgkin lymphoma: A randomized, open label, phase III trial (BELINDA). NCT03570892

Thieblemont C et al. **First analysis of an international double-blind randomized phase III study of lenalidomide maintenance in elderly patients with DLBCL treated with R-CHOP in first line, the Remarc study from Lysa.** *Proc ASH* 2016;**Abstract 471**.

Tilly H et al. **A phase 3 study comparing polatuzumab vedotin plus R-CHP versus R-CHOP in patients with DLBCL (POLARIX).** *Proc ASCO* 2018;**Abstract TPS7589**.

Younes A et al. **A global, randomized, placebo-controlled, phase 3 study of ibrutinib plus rituximab, cyclophosphamide, doxorubicin, vincristine, and prednisone (RCHOP) in patients with previously untreated non-germinal center B-cell-like (GCB) diffuse large B-cell lymphoma (DLBCL).** *Proc ASH* 2018;**Abstract 784**.