

#### **FACULTY INTERVIEWS**

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Society of Clinical Oncology Meeting in Chicago

From the publishers of:







#### A Continuing Medical Education Audio Series

#### OVERVIEW OF ACTIVITY

Oncology is one of the most rapidly evolving fields in medicine. Results presented at major cancer conferences from a myriad of ongoing clinical trials lead to the continual emergence of new therapeutic agents and changes in the indications for existing treatments. In order to offer optimal patient care, medical oncologists and hematologists must be well informed of these advances

To bridge the gap between research and clinical practice, this issue of *Cancer Conference Update* features one-on-one discussions with Drs Wolchok, Leonard, Oh, Saltz, Kim, Giralt, Gralow, O'Brien and Karlan about the integration of key data sets presented at the 2011 American Society of Clinical Oncology Annual Meeting in Chicago, Illinois into the practical management of patients diagnosed with a number of solid tumors and hematologic cancers.

#### LEARNING OBJECTIVES

- Incorporate emerging clinical trial data on novel antibody therapy into treatment decision-making for patients with advanced melanoma.
- Assess the practical implications of emerging research examining the use of biologic agents, novel androgen-targeted
  agents and bone-directed therapies for castration-resistant, metastatic prostate cancer.
- Incorporate emerging research information on the use of novel schedules, regimens and agents into the systemic treatment of various hematologic cancers.
- Develop a therapeutic algorithm for the use of mTOR and VEGF inhibitors in the management of metastatic renal cell carcinoma.
- Apply pivotal clinical trial results with cytotoxic, molecular-targeted and locally directed therapies to the multimodality management of diverse forms of gastrointestinal cancer.
- Employ individualized patient assessment to tailor the use of cytotoxic, biologic and/or small-molecule targeted therapy for non-small cell lung cancer.
- Recognize the emerging contribution of induction chemotherapy and biologic agents to standard chemoradiation therapy approaches for head and neck cancer.
- Communicate the benefits and risks of anti-angiogenic therapy, novel targeted agents, anti-HER2 treatments and PARP inhibitors to appropriately selected patients with advanced breast cancer.
- Assess the relevance of emerging research information on PARP inhibitors and anti-angiogenic therapies to current
  protocol and nonprotocol management of advanced ovarian cancer.

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#### **AUDIO PROGRAM GUIDE**



Melanoma — Jedd D Wolchok, MD, PhD

Director, Immunotherapy Clinical Trials, Department of Medicine Associate Attending Physician, Melanoma-Sarcoma Service Associate Director, Ludwig Center for Cancer Immunotherapy Memorial Sloan-Kettering Cancer Center, New York, New York

#### **TRACKS**

- Abstract LBA5: A Phase III study of ipilimumab in combination with dacarbazine (DTIC) versus DTIC alone as first-line treatment in unresectable Stage III or IV melanoma
- 2 Ipilimumab-associated side effects
- 3 Immune-related tumor responses with ipilimumab therapy
- 4 Incorporation of ipilimumab into the treatment algorithm for melanoma
- 5 Ongoing investigations to identify predictive biomarkers to ipilimumab
- 6 Abstract 8511: A Phase I trial of ipilimumab in combination with bevacizumab in unresectable Stage III or IV melanoma

- 7 Clinical manifestation of hypophysitis with ipilimumab/ bevacizumab
- 8 Abstract LBA4: Phase III multicenter BRIM3 trial comparing BRAF inhibitor vemurafenib to dacarbazine in V600EBRAF-mutated melanoma
- 9 Abstract 8509: BRIM-2 A multicenter Phase II study of vemurafenib in patients with previously treated BRAF V600E mutation-positive metastatic melanoma
- 10 Abstract 8520: Frequent underlying RAS mutations in cutaneous squamous cell carcinomas and keratoacanthomas that develop in patients during vemurafenib therapy



Chronic Lymphocytic Leukemia, Non-Hodgkin Lymphoma — John P Leonard, MD

Richard T Silver Distinguished Professor of Hematology and Medical Oncology Professor of Medicine, Weill Cornell Medical College, New York, New York

- 1 Abstract 8022: Bortezomib in combination with DA-EPOCH-rituximab followed by bortezomib maintenance versus observation in previously untreated mantle-cell lymphoma (MCL)
- 2 Abstract 8033: Complete responses on a Phase II study of romidepsin in relapsed or

- refractory peripheral T-cell lymphoma (PTCL)
- 3 Development of tyrosine kinase inhibitors (TKIs) targeting B-cell-related signaling pathways in lymphoma
- 4 Abstract 6508: Activity and tolerability of the Bruton's tyrosine kinase inhibitor PCI-32765 in chronic lymphocytic leukemia/

- small lymphocytic lymphoma (CLL/SLL) — Interim results of a Phase Ib/II study
- 5 Abstract 6558: Lenalidomide after rituximab (R) and fludarabine in untreated CLL
- 6 Abstract 6629: A Phase II study of chlorambucil in combination with rituximab followed by maintenance versus observation in elderly patients with previously untreated CLL Results of the induction phase
- 7 Abstract 8001: Phase III
  Intergroup trial (SWOG-S9704)
  comparing CHOP with or without
  R x 8 versus CHOP with or
  without R x 6 followed by highdose therapy and ASCT for diffuse
  aggressive non-Hodgkin lymphoma
  (NHL) in high-intermediate or
  high IPI risk groups

- 8 Abstract 8015: Combination of lenalidomide with R-CHOP (R2CHOP) as initial therapy for aggressive B-cell lymphomas A Phase I/II study
- 9 11<sup>th</sup> International Conference on Malignant Lymphoma; Abstract 19: Preliminary results of quality of life analyses from the Intergroup Phase III study of rituximab versus a watch-and-wait approach in advanced stage, asymptomatic, nonbulky follicular lymphoma (FL)
- 10 16<sup>th</sup> Congress of the European Hematology Association; Abstract 0504: Rituximab maintenance significantly prolongs duration of remission in elderly patients with mantle-cell lymphoma. First results of a randomized trial of the European MCL Network



Prostate Cancer, Renal Cell Cancer — William K Oh, MD

Chief, Division of Hematology and Medical Oncology; Professor of Medicine and Urology; Ezra M Greenspan, MD Professor in Clinical Cancer Therapeutics Mount Sinai School of Medicine; Associate Director of Clinical Research, The Tisch Cancer Institute, New York, New York

- Abstract 4516: Cabozantinib
   (XL184) in metastatic castrationresistant prostate cancer
   (mCRPC): Results from a Phase II
  randomized discontinuation trial
- 2 Abstract 4531: Safety, efficacy and pharmacodynamics of the investigational agent TAK-700 in mCRPC: Updated data from a Phase I/II study
- 3 Abstract LBA4517: Circulating tumor cells as an efficacy response biomarker of overall survival in mCRPC — Planned final analysis of COU-AA-301, a Phase III study of abiraterone acetate in combination with lowdose prednisone post docetaxel
- 4 Abstract 4520: COU-AA-301
  Phase III study of the effect
  of abiraterone acetate on pain
  control and skeletal-related events
  in patients with mCRPC post
  docetaxel
- 5 Abstract 4533: Effect of denosumab versus zoledronic acid in patients with CRPC and bone metastases Subgroup analyses by prior skeletal-related events and baseline pain
- 6 Abstract 4514: A Phase III randomized trial of intermittent versus continuous androgen suppression for PSA progression after radical therapy
- 7 Abstracts 4503, 4504 and 4547: Axitinib in metastatic renal cell carcinoma (mRCC)

#### **TRACKS**

- 8 Abstract 4546: BEVLIN —
  Prospective study of the
  safety and efficacy of first-line
  bevacizumab in combination with
  low-dose interferon-α2a in mRCC
- 9 Abstract 4548: Final Phase II safety and efficacy results of study MC0452 — A Phase I/II trial of mTOR inhibition and bevacizumab in advanced RCC



Gastrointestinal Stromal Tumor, Colorectal Cancer, Gastric Cancer, Gastroesophageal Junction Cancer — Leonard B Saltz, MD

Attending Physician; Colorectal Disease Management Team Leader, Memorial Sloan-Kettering Cancer Center; Professor of Medicine, Weill Medical College of Cornell University, New York, New York

#### **TRACKS**

- Abstract LBA1: Final results of SSGXVIII/AIO — 12 versus 36 months of adjuvant imatinib as treatment of operable GIST with a high risk of recurrence
- Abstract 3503: NSABP-R-04

   The effect of capecitabine and oxaliplatin in the preoperative multimodality treatment of carcinoma of the rectum
- 3 Combining oxaliplatin with a fluoropyrimidine and radiation therapy as neoadjuvant therapy for rectal cancer in NSABP-R-04
- 4 Abstract LBA3505: Preoperative chemoradiation therapy and postoperative chemotherapy with 5-FU and oxaliplatin versus 5-FU alone in locally advanced rectal

- cancer First results of the German CAO/ARO/AIO-04 Phase III trial
- 5 Abstract 3511: Influence of KRAS G13D mutations on outcome in metastatic colorectal cancer (mCRC) treated with first-line chemotherapy with or without cetuximab
- 6 Abstract 3510: Final results from PRIME — A Phase III study of panitumumab with FOLFOX4 for first-line mCRC
- 7 Abstract LBA4002: Phase III CLASSIC trial of adjuvant CAPOX for gastric cancer
- 8 Abstracts 4012, 4013 and 4014: HER2 expression/amplification in gastric and GE junction cancer



Non-Small Cell Lung Cancer, Squamous Cell Carcinoma of the Head and Neck — Edward S Kim, MD

Associate Professor of Medicine; Chief, Section of Head and Neck Medical Oncology; Director, Clinical Research Operations, Department of Thoracic/Head and Neck Medical Oncology, The University of Texas MD Anderson Cancer Center, Houston, Texas

- 1 Abstract 7503: Interim results of the EURTAC Phase III study — Erlotinib versus chemotherapy in patients with advanced NSCLC and EGFR mutations
- 2 Assessment of EGFR mutation status in patients with NSCLC

- 3 Abstract 7505: Final results of OAM4558g A randomized Phase II study evaluating MetMAb or placebo in combination with erlotinib in advanced NSCLC
- 4 Abstracts 7507 and 7514: Crizotinib in advanced, ALKpositive NSCLC
- 5 Abstract CRA7510: PARAMOUNT

   A Phase III study of
  maintenance pemetrexed in
  combination with best supportive
  care (BSC) versus placebo
  with BSC after induction
  pemetrexed/cisplatin for advanced
  nonsquamous NSCLC
- 6 First-line therapy with carboplatin/ pemetrexed/bevacizumab followed by maintenance bevacizumab with or without pemetrexed in bevacizumab-eligible patients with advanced NSCLC
- 7 Abstract 7019: Multicenter Phase II study of cetuximab with concomitant radiotherapy followed by consolidation chemotherapy in locally advanced NSCLC

- 8 Phase III study of chemoradiation therapy with or without cetuximab in locally advanced NSCLC
- 9 Abstract 7020: A Phase II trial of erlotinib and radiation therapy after chemoradiation therapy for Stage III NSCLC
- 10 Abstract 5500: RTOG-0522 — A Phase III study of concurrent accelerated radiation in combination with cisplatin with or without cetuximab for Stage III-IV squamous cell carcinoma of the head and neck (SCCHN)
- 11 Abstract 5520: Randomized trial of a short course of erlotinib 150 to 300 mg daily prior to surgery for SCCHN in current, former and never smokers — Objective responses and clinical outcomes
- 12 Effect of smoking on the pharmacokinetics of erlotinib



Multiple Myeloma — Sergio Giralt, MD

Chief, Adult Bone Marrow Transplant Service Memorial Sloan-Kettering Cancer Center, New York, New York

- Abstract 8020: A Phase III study of melphalan/prednisone/ lenalidomide (MPR) versus high-dose melphalan and ASCT (MEL200) in newly diagnosed multiple myeloma (MM)
- 2 Perspective on potential increases in secondary tumors with longer-term lenalidomide treatment in MM
- 3 Abstract 8007: Incidence of second primary cancer in MPR followed by lenalidomide

- maintenance (MPR-R) in patients age 65 or older with newly diagnosed MM
- 4 Abstract 8008: Incidence of second primary tumors after six years of follow-up with continuous lenalidomide in first-line treatment of MM
- 5 Abstract 8009: MM-009/010 Lenalidomide and dexamethasone in patients with relapsed or refractory MM and risk of second primary tumors

#### **TRACKS**

6 Abstracts 8010 and 8011: Are there benefits to long-term bisphosphonate treatment in MM?

Insights from temporal analyses of zoledronic acid versus clodronate in the MRC Myeloma IX trial



Breast Cancer — Julie R Gralow, MD

Professor, Medical Oncology, University of Washington and Fred Hutchinson Cancer Research Center; Director, Breast Medical Oncology, Seattle Cancer Care Alliance/University of Washington. Seattle. Washington

#### **TRACKS**

- Abstract 505: TBCRC 006 —
   A multicenter Phase II study of neoadjuvant lapatinib and trastuzumab in HER2-overexpressing breast cancer (BC)
- 2 Abstract 506: Correlation of molecular effects and pathologic complete response to preoperative lapatinib or trastuzumab, alone or in combination, prior to neoadjuvant chemotherapy
- 3 Abstract LBA1005: The effect on pCR of bevacizumab and/or antimetabolites added to standard neoadjuvant chemotherapy in NSABP-B-40
- 4 Effect of bevacizumab on triplenegative breast cancer (TNBC) in NSABP-B-40
- 5 Clinical use of chemotherapy/ bevacizumab in metastatic TNBC

- 6 Abstract 1007: A Phase III study of iniparib (BSI-201) in combination with gemcitabine/ carboplatin in metastatic TNBC
- 7 Abstract 1060: The relationship between age and survival outcomes for eribulin in metastatic BC
- 8 Peripheral neuropathy associated with taxanes, ixabepilone or eribulin
- 9 Abstract 1010: Effect of bevacizumab on efficacy of second-line chemotherapy for metastatic TNBC in RIBBON 2
- 10 Perspective on the uncertain role of bevacizumab in the current treatment of metastatic BC



Chronic Myeloid Leukemia, Acute Myelogenous Leukemia, Myelodysplastic Syndromes — Susan M O'Brien, MD

Professor of Medicine, Department of Leukemia, The University of Texas MD Anderson Cancer Center, Houston, Texas

- Abstract 6511: Nilotinib versus imatinib in newly diagnosed chronic myeloid leukemia in chronic phase (CML-CP) in ENESTnd 24-month follow-up
- 2 Abstract 6502: Incidence of BCR-ABL mutations in ENESTnd 24-month follow-up

- 3 Abstract 6509: BELA 18-month follow-up Bosutinib versus imatinib in CML-CP
- 4 Abstract 6510: Dasatinib or imatinib in newly diagnosed CML-CP — Two-year follow-up from DASISION
- 5 Initial treatment of CML-CP in the era of second-generation TKIs
- 6 Abstract 6513: A survey of current practices in the management of CML
- 7 Clinical use of high-dose imatinib
- 8 Abstract 6503: Phase III CLASSIC 1 study — Cytarabine with or without clofarabine in older patients with relapsed or refractory acute myelogenous leukemia (AML)

- 9 Abstract 6504: Results from a Phase III study of decitabine versus supportive care or low-dose cytarabine for older patients with newly diagnosed AML
- 10 Abstract 6505: Phase I study results of sequential azacitidine and lenalidomide in elderly patients with AML
- 11 Abstract 6522: Early lenalidomide dose intensity and durable RBC-transfusion independence in low-/int-1-risk myelodysplastic syndromes (MDS) and del5q



Ovarian Cancer — Beth Y Karlan, MD

Director, Women's Cancer Program, Samuel Oschin Comprehensive Cancer Institute, Division of Gynecologic Oncology, Department of Obstetrics and Gynecology, Cedars-Sinai Medical Center; Professor of Obstetrics and Gynecology, David Geffen School of Medicine at UCLA, Los Angeles, California

- 1 Abstract 5003: A Phase II randomized placebo-controlled study of olaparib (AZD2281) in platinum-sensitive relapsed serous ovarian cancer
- 2 Future directions in the development of olaparib for ovarian cancer
- 3 Abstract LBA5007: OCEANS A Phase III trial of chemotherapy with or without bevacizumab in platinum-sensitive recurrent epithelial ovarian, primary peritoneal or fallopian tube cancer
- 4 Abstract LBA5006: Interim analysis of overall survival in the GCIG ICON7 Phase III trial of bevacizumab in newly diagnosed ovarian cancer
- 5 Clinical use of bevacizumab in recurrent ovarian cancer
- 6 Effectiveness of bevacizumab with or without chemotherapy in the amelioration of ascites and pleural effusion in ovarian cancer

#### POST-TEST

#### Cancer Conference Update — Issue 2, 2011

#### QUESTIONS (PLEASE CIRCLE ANSWER):

- Treatment with vemurafenib can result in the regression of melanoma harboring
  - a. Activating mutations in the KIT gene
  - b. BRAF V600E mutation
  - c. Neither of the above
  - d. Both of the above
- 2. A Phase III randomized study of ipilimumab with dacarbazine versus dacarbazine alone as first-line therapy for patients with unresectable Stage III or IV melanoma reported a statistically significant improvement in \_\_\_\_\_ with the addition of ipilimumab.
  - a. Overall survival
  - b. Progression-free survival
  - c. Neither of the above
  - d. Both of the above
- In a Phase II study of romidepsin in patients with relapsed or refractory PTCL, the response rate was approximately 30%.
  - a. True
  - b. False
- 4. An ongoing study is evaluating

  as maintenance therapy
  after rituximab and fludarabine in
  untreated CLL.
  - a. Bortezomib
  - b. Thalidomide
  - c. Lenalidomide
- 5. A trial evaluating maintenance rituximab after induction therapy with R-CHOP or FCR for elderly patients with MCL reported that progression-free survival was substantially improved in patients receiving rituximab maintenance versus IFN maintenance.
  - a. True
  - b. False

- Which of the following is the mechanism of action of the novel agent TAK-700?
  - a. HER2 inhibitor
  - b. GnRH modulator
  - c. Sex hormone synthesis inhibitor
- 7. In the SSGXVIII/AIO Phase III trial evaluating 12 versus 36 months of adjuvant imatinib as treatment of operable GIST with a high risk of recurrence, which arm reported significantly improved overall survival and disease-free survival?
  - a. 12 months of adjuvant imatinib
  - b. 36 months of adjuvant imatinib
- 8. The Phase III CLASSIC trial evaluated \_\_\_\_\_ as adjuvant therapy for patients with gastric cancer.
  - a. CAPOX
  - b. FOLFOX
  - c. FOLFIRI
- Approximately what proportion of patients with adenocarcinoma of the lung have MET-positive disease by IHC?
  - a. Fewer than 10%
  - b. 30% to 50%
  - c. More than 90%
- On the Phase II OAM4558g trial evaluating MetMAb or placebo in combination with erlotinib in advanced NSCLC, no additional overall or progression-free survival benefits were reported for patients with MET positivity.
  - a. True
  - b. False
- 11. Crizotinib is a targeted agent used in the treatment of ALK-positive NSCLC.
  - a. True
  - b. False

#### Cancer Conference Update — Issue 2, 2011

#### QUESTIONS (PLEASE CIRCLE ANSWER):

- 12. An analysis of data from the EMBRACE trial on the relationship between age and survival outcome for patients receiving eribulin as treatment for metastatic breast cancer reported that efficacy and toxicity outcomes differed among younger and older patients.
  - a. True
  - h False
- 13. In the DASISION trial, the confirmed complete cytogenetic response rate by 12 months was significantly better with imatinib compared to dasatinib in patients with newly diagnosed CML-CP.
  - a. True
  - b. False
- 14. In the ENESTnd study, the major molecular response rate at 12 months was significantly better with nilotinib compared to imatinib in patients with newly diagnosed CML-CP.
  - a. True
  - b. False
- 15. The Phase III OCEANS study, which is evaluating carboplatin and gemcitabine with or without bevacizumab in platinum-sensitive recurrent epithelial ovarian, primary peritoneal or fallopian tube cancer, reported significant improvements in \_\_\_\_\_ for patients who received bevacizumab.
  - a. Progression-free survival
  - b. Overall survival
  - c. Duration of response
  - d. All of the above
- An interim analysis of overall survival (OS) in the GCIG ICON7 Phase III trial of bevacizumab in newly diagnosed ovarian cancer did not report an OS advantage.
  - a. True
  - b. False

- 17. In a study of the Bruton's tyrosine kinase inhibitor PCI-32765 in newly diagnosed and relapsed/refractory CLL/SLL, the rate of nodal response (>50% reduction in target lesions) among evaluable patients was approximately \_\_\_\_\_\_.
  - a. 20%
  - b. 50%
  - c. 90%
- 18. The Phase III Intergroup trial (SWOG-S9704) comparing 8 cycles to 6 cycles of R-CHOP with R for diffuse, aggressive NHL in high-intermediate and high IPI risk groups failed to demonstrate a survival advantage with ASCT in first remission.
  - a. True
  - b. False
- 19. In the Intergroup study of rituximab versus a watch-and-wait approach for advanced-stage, asymptomatic, nonbulky FL, a quality-of-life analysis revealed which of the following observations?
  - a. Emotional well-being improved in both groups over time
  - b. Patients undergoing watch and wait had higher levels of anxiety related to their disease
  - c. Both a and b
- 20. A randomized study for elderly patients with MCL demonstrated an improvement in progression-free survival among patients who received R-CHOP followed by maintenance
  - a. Interferon
  - b. Rituximab
  - c. Ofatumumab
  - d. Bortezomib

#### EDUCATIONAL ASSESSMENT AND CREDIT FORM

Ipilimumab in combination with DTIC versus DTIC alone as first-

line treatment in unresectable Stage III or IV melanoma

#### Cancer Conference Update — Issue 2, 2011

Research To Practice is committed to providing valuable continuing education for oncology clinicians, and your input is critical to helping us achieve this important goal. Please take the time to assess the activity you just completed, with the assurance that your answers and suggestions are strictly confidential.

> 3 = Good 2 = Adequate 1 = Suboptimal**BEFORE**

> > 4 3 2 1

**AFTER** 

4 3 2 1

#### PART ONE — Please tell us about your experience with this educational activity

How would you characterize you	ir level of knowled	ge on the fo	llowing topics?
	4 = Excellent	3 = Good	2 = Adequat

Bortezomib and DA-EPOCH-rituximab → bortezomib maintenance in previously untreated MCL	4 3 2 1	4 3 2 1
Lenalidomide after rituximab and fludarabine in untreated CLL	4 3 2 1	4 3 2 1
Duration of adjuvant imatinib as treatment for operable GIST with a high risk of recurrence	4 3 2 1	4 3 2 1
OAM4558g trial: MetMAb or placebo in combination with erlotinib in advanced NSCLC	4 3 2 1	4 3 2 1
RTOG-0522: Concurrent accelerated radiation therapy and cisplatin with or without cetuximab for Stage III-IV SCCHN	4 3 2 1	4 3 2 1
Relationship between age and survival outcomes for eribulin in mBC	4 3 2 1	4 3 2 1
Use of sequential azacitidine and lenalidomide in elderly patients with AML	4 3 2 1	4 3 2 1
Was the activity evidence based, fair, balanced and free from com-	mercial bias?	
□ Yes □ No		
If no, please explain:		
Please identify how you will change your practice as a result of conthat apply).		
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Please identify how you will change your practice as a result of conthat apply).  This activity validated my current practice; no changes will be recorded to contain the content of the content of my patients.  Create/revise protocols, policies and/or procedures.  Change the management and/or treatment of my patients.  Other (please explain):  If you intend to implement any changes in your practice, please procedures.	mpleting this act	re examples:

#### EDUCATIONAL ASSESSMENT AND CREDIT FORM (continued)

#### Please respond to the following learning objectives (LOs) by circling the appropriate selection:

4 = Yes 3 = Will consider 2 = No 1 = Already doing N/M = LO not met N/A = Not applicable

As a result of this activity, I will be able to:
<ul> <li>Incorporate emerging clinical trial data on novel antibody therapy into treatment decision-making for patients with advanced melanoma</li></ul>
<ul> <li>Assess the practical implications of emerging research examining the use of biologic agents, novel androgen-targeted agents and bone-directed therapies for castration-resistant, metastatic prostate cancer 4 3 2 1 N/M N/A</li> </ul>
<ul> <li>Incorporate emerging research information on the use of novel schedules, regimens and agents into the systemic treatment of various hematologic cancers</li></ul>
<ul> <li>Develop a therapeutic algorithm for the use of mTOR and VEGF inhibitors in the management of metastatic renal cell carcinoma</li></ul>
<ul> <li>Apply pivotal clinical trial results with cytotoxic, molecular-targeted and locally directed therapies to the multimodality management of diverse forms of gastrointestinal cancer</li></ul>
<ul> <li>Employ individualized patient assessment to tailor the use of cytotoxic, biologic and/or small-molecule targeted therapy for non-small cell lung cancer</li></ul>
<ul> <li>Recognize the emerging contribution of induction chemotherapy and biologic agents to standard chemoradiation therapy approaches for head and neck cancer</li></ul>
<ul> <li>Communicate the benefits and risks of anti-angiogenic therapy, novel targeted agents, anti-HER2 treatments and PARP inhibitors to appropriately selected patients with advanced breast cancer</li></ul>
<ul> <li>Assess the relevance of emerging research information on PARP inhibitors and anti-angiogenic therapies to current protocol and nonprotocol management of advanced ovarian cancer</li></ul>
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William K Oh, MD	4	3	2	1	4	3	2	1
Leonard B Saltz, MD	4	3	2	1	4	3	2	1
Edward S Kim, MD	4	3	2	1	4	3	2	1
Sergio Giralt, MD	4	3	2	1	4	3	2	1
Julie R Gralow, MD	4	3	2	1	4	3	2	1
Susan M O'Brien, MD	4	3	2	1	4	3	2	1
Beth Y Karlan, MD	4	3	2	1	4	3	2	1
Editor	Knowled	ge of	subje	ct matter	Effective	ness	as an	educator
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