

# VIRTUAL CONSULT

## Current Cases and Emerging Research in the Management of Multiple Myeloma, Hodgkin and Non-Hodgkin Lymphomas and Chronic Lymphocytic Leukemia



A special audio supplement to a CME symposium held during the 2016 American Society of Clinical Oncology Annual Meeting featuring expert comments on the application of emerging research to patient care

### Faculty Interviews

Robert Z Orlowski, MD, PhD

Brad S Kahl, MD

### Editor

Neil Love, MD

### Contents


1 Audio CD



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# Hematologic Oncology™

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# Virtual Consult: Current Cases and Emerging Research in the Management of Multiple Myeloma, Hodgkin and Non-Hodgkin Lymphomas and Chronic Lymphocytic Leukemia — A Continuing Medical Education Activity

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## OVERVIEW OF ACTIVITY

Taken together, it is estimated that approximately 111,410 new lymphoma and myeloma cases will be identified in the United States in the year 2016, and 33,920 individuals will die from these diseases. Importantly, more than 65 drug products are currently labeled for use in the treatment of common hematologic cancers, comprising at least 122 distinct FDA-approved indications. Although this extensive list of available treatment options is reassuring for patients and oncology healthcare professionals, it poses a challenge to the practicing clinician who must maintain up-to-date knowledge of appropriate clinical management strategies across a vast spectrum of liquid and solid tumors.

This special audio supplement to a CME satellite symposium held during the 2016 ASCO Annual Meeting uses one-to-one interviews with one leading investigator in lymphoma and one in multiple myeloma (MM) who served as faculty to discuss cases and questions submitted by attendees. By providing information on the latest research developments and their potential application to routine practice, this activity is designed to assist hematologists, medical oncologists and hematology-oncology fellows with the formulation of up-to-date clinical management strategies.

## LEARNING OBJECTIVES

- Customize the use of induction, consolidation and maintenance therapeutic approaches for patients with MM in the transplant and nontransplant settings, considering patient- and disease-related factors.
- Appraise recent data on therapeutic advances and changing practice standards in the management of MM, and integrate this information, as appropriate, into current clinical care.
- Appreciate the FDA approvals of novel targeted agents — ibrutinib, idelalisib, obinutuzumab and venetoclax — for the treatment of chronic lymphocytic leukemia, and discern how these therapies can be appropriately integrated into the clinical management of standard- and high-risk disease.
- Recognize the role of novel agents in the management of indolent and aggressive lymphomas, and ensure appropriate supportive care measures to minimize side effects.
- Incorporate new therapeutic strategies into the best-practice management of Hodgkin lymphoma.
- Assess the ongoing clinical trials investigating innovative approaches for Hodgkin and non-Hodgkin lymphomas and MM, and refer appropriate patients for study participation.

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## CME INFORMATION

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## Interview with Robert Z Orlowski, MD, PhD

### Tracks 1-12

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- Track 2** Results of the Phase III IFM 2009 trial: ASCT for MM in the era of new drugs
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- Track 4** Activity and side-effect profiles of the oral proteasome inhibitors ixazomib and oprozomib in MM
- Track 5** **Second opinion:** Role of maintenance therapy after delayed ASCT
- Track 6** Emerging role of proteasome inhibitors as part of post-transplant maintenance therapy and potential role of ixazomib
- Track 7** Perspective on the results of the Phase III CASTOR study of bortezomib/dexamethasone with or without daratumumab for relapsed/refractory (R/R) MM
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- Track 12** **Second opinion:** Therapeutic options for patients experiencing disease relapse on lenalidomide maintenance therapy

## Interview with Brad S Kahl, MD

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- Track 14** Choosing between FCR (fludarabine/cyclophosphamide/rituximab), bendamustine/rituximab and ibrutinib for younger patients with newly diagnosed CLL
- Track 15** Activity, tolerability and management of tumor lysis syndrome with the recently FDA-approved Bcl-2 inhibitor venetoclax for patients with del(17p) CLL who have received at least 1 prior therapy
- Track 16** Preemptive measures to reduce the risk of tumor lysis syndrome in patients with CLL receiving venetoclax
- Track 17** Mechanism of action, tolerability and ongoing investigations of the second-generation Bruton tyrosine kinase (BTK) inhibitor acalabrutinib (ACP-196) in R/R CLL
- Track 18** Front-line therapy options for follicular lymphoma (FL) with high tumor burden
- Track 19** Obinutuzumab for FL: Activity, management of infusion-related reactions and ongoing investigations
- Track 20** Approach to second-line therapy for patients with FL and disease progression on bendamustine/rituximab
- Track 21** Efficacy and emerging side effects of the novel PI3K inhibitor copanlisib for patients with indolent non-Hodgkin lymphoma
- Track 22** Management of mantle-cell lymphoma in patients experiencing disease progression on ibrutinib
- Track 23** Identification and treatment of primary bone diffuse large B-cell lymphoma (DLBCL)
- Track 24** Appropriate use of lenalidomide for R/R DLBCL
- Track 25** Perspective on the use of brentuximab vedotin as consolidation therapy for patients with Hodgkin lymphoma (HL) at high risk of disease progression after ASCT
- Track 26** Activity of anti-PD-1 antibodies in R/R HL
- Track 27** Investigating the combination of brentuximab vedotin and immune checkpoint inhibitors for advanced HL

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Park SI et al. **A phase 2 trial of ABVD followed by brentuximab vedotin consolidation in limited stage non-bulky Hodgkin lymphoma.** *Proc ASCO* 2016;Abstract 7508.

Younes A et al. **CheckMate 205: Nivolumab (nivo) in classical Hodgkin lymphoma (cHL) after autologous stem cell transplant (ASCT) and brentuximab vedotin (BV) — A phase 2 study.** *Proc ASCO* 2016;Abstract 7535.

### Indolent B-Cell Non-Hodgkin Lymphoma

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Evens AM et al. **Effect of bortezomib on complete remission (CR) rate when added to bendamustine-rituximab (BR) in previously untreated high-risk (HR) follicular lymphoma (FL): A randomized phase II trial of the ECOG-ACRIN Cancer Research Group (E2408).** *Proc ASCO* 2016;Abstract 7507.

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Sehn LH et al. **Randomized phase II trial comparing obinutuzumab (GA101) with rituximab in patients with relapsed CD20+ indolent B-cell non-Hodgkin lymphoma: Final analysis of the GAUSS study.** *J Clin Oncol* 2015;33(30):3467-74.

### Mantle-Cell Lymphoma

Dreyling M et al. **Ibrutinib versus temsirolimus in patients with relapsed or refractory mantle-cell lymphoma: An international, randomised, open-label, phase 3 study.** *Lancet* 2016;387(10020):770-8.

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## MM

Attal M et al. **Autologous transplantation for multiple myeloma in the era of new drugs: A phase III study of the Intergroupe Francophone du Myelome (IFM/DFCI 2009 trial).** *Proc ASH* 2015;Abstract 391.

Avet-Loiseau H et al. **Evaluation of minimal residual disease (MRD) by next generation sequencing (NGS) is highly predictive of progression free survival in the IFM/DFCI 2009 trial.** *Proc ASH* 2015;Abstract 191.

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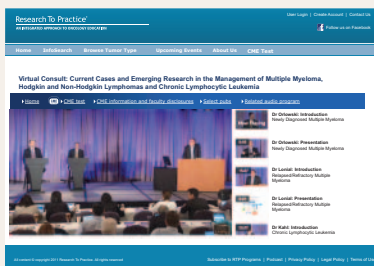
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## Related Video Program



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Newly diagnosed multiple myeloma (MM) — Robert Z Orlowski, MD, PhD  
Relapsed/refractory MM — Sagar Lonial, MD  
Chronic lymphocytic leukemia — Brad S Kahl, MD  
Hodgkin lymphoma — Ranjana Advani, MD  
Follicular and mantle-cell lymphoma — Stephen M Ansell, MD, PhD  
Diffuse large B-cell and T-cell lymphoma — Christopher Flowers, MD, MS



Virtual Consult: Current Cases and Emerging Research in the Management of Multiple Myeloma, Hodgkin and Non-Hodgkin Lymphomas and Chronic Lymphocytic Leukemia

QUESTIONS (PLEASE CIRCLE ANSWER):

1. Results of the Phase III SWOG-S0777 trial evaluating lenalidomide/dexamethasone with or without bortezomib for patients with previously untreated MM without an intent for immediate ASCT demonstrated significant improvement in \_\_\_\_\_ with the addition of bortezomib.
  - a. Overall survival
  - b. Progression-free survival (PFS)
  - c. Both a and b
  - d. Neither a nor b
2. Which of the following oral proteasome inhibitors is FDA approved for the treatment of MM?
  - a. Ixazomib
  - b. Oprozomib
  - c. Both a and b
  - d. Neither a nor b
3. Results of the Phase III IFM 2009 trial evaluating early ASCT versus additional cycles of lenalidomide/bortezomib/dexamethasone (RVD) after RVD induction therapy for newly diagnosed MM demonstrated a PFS advantage with \_\_\_\_\_.
  - a. Additional cycles of RVD
  - b. Early ASCT
  - c. Neither, PFS was equivalent on each arm
4. In the Phase III POLLUX and CASTOR studies, the addition of daratumumab to which of the following regimens for R/R MM significantly improved PFS?
  - a. Bortezomib/dexamethasone
  - b. Lenalidomide/dexamethasone
  - c. Both a and b
  - d. Neither a nor b
5. The combination of elotuzumab and lenalidomide/dexamethasone was recently FDA approved for \_\_\_\_\_.
  - a. Patients with newly diagnosed MM
  - b. Patients with MM who have received 1 to 3 prior therapies
  - c. Both a and b
6. Which of the following statements is true of venetoclax in the treatment of CLL?
  - a. It acts by inhibiting Bcl-2
  - b. It is not effective in patients with del(17p) CLL
  - c. It can cause tumor lysis syndrome
  - d. All of the above
  - e. Both a and c
7. What is the mechanism of action of acalabrutinib (ACP-196)?
  - a. Antibody-drug conjugate
  - b. BTK inhibitor
  - c. Immunomodulatory drug
  - d. Proteasome inhibitor
8. Nivolumab was recently approved by the FDA for patients with classical HL that has relapsed or progressed after \_\_\_\_\_.
  - a. ASCT
  - b. Post-transplant brentuximab vedotin
  - c. Both a and b
9. Which of the following agents is classified as a PI3 kinase inhibitor?
  - a. Copanlisib
  - b. Daratumumab
  - c. Elotuzumab
  - d. Idelalisib
  - e. All of the above
  - f. Both b and c
  - g. Both a and d
10. Single-agent lenalidomide has demonstrated preferential activity in which of the following phenotypes of DLBCL?
  - a. Germinal center B-cell (GCB) DLBCL
  - b. Activated B-cell DLBCL (non-GCB DLBCL)
  - c. Neither, lenalidomide activity is equivalent in each phenotype



**EDUCATIONAL ASSESSMENT AND CREDIT FORM**

**Virtual Consult: Current Cases and Emerging Research in the Management of Multiple Myeloma, Hodgkin and Non-Hodgkin Lymphomas and Chronic Lymphocytic Leukemia**

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.

**PART 1 — Please tell us about your experience with this educational activity**

**How would you characterize your level of knowledge on the following topics?**

	4 = Excellent	3 = Good	2 = Adequate	1 = Suboptimal
	BEFORE		AFTER	
Implications of the Phase III SWOG-S0777 and IFM 2009 data sets on the selection of induction regimen and the role of transplant for newly diagnosed MM	4	3	2	1
Results of Phase III studies of daratumumab in combination with bortezomib/dexamethasone (CASTOR) or with lenalidomide/dexamethasone (POLLUX) for R/R MM	4	3	2	1
Optimal integration of recently approved agents into the treatment algorithm for CLL	4	3	2	1
Activity of obinutuzumab in FL, management of infusion-related reactions and ongoing investigations	4	3	2	1
Mechanism of action, tolerability and ongoing investigations of the second-generation BTK inhibitor acalabrutinib in R/R CLL	4	3	2	1

**Practice Setting:**

- Academic center/medical school     
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- Yes     
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 Other (please explain): .....

**If you intend to implement any changes in your practice, please provide 1 or more examples:**

.....

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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:**

- Customize the use of induction, consolidation and maintenance therapeutic approaches for patients with MM in the transplant and nontransplant settings, considering patient- and disease-related factors. ....4 3 2 1 N/M N/A
- Appraise recent data on therapeutic advances and changing practice standards in the management of MM, and integrate this information, as appropriate, into current clinical care. ....4 3 2 1 N/M N/A
- Appreciate the FDA approvals of novel targeted agents — ibrutinib, idelalisib, obinutuzumab and venetoclax — for the treatment of chronic lymphocytic leukemia, and discern how these therapies can be appropriately integrated into the clinical management of standard- and high-risk disease .....4 3 2 1 N/M N/A

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**As a result of this activity, I will be able to:**

- Recognize the role of novel agents in the management of indolent and aggressive lymphomas, and ensure appropriate supportive care measures to minimize side effects. . . . . 4 3 2 1 N/M N/A
- Incorporate new therapeutic strategies into the best-practice management of Hodgkin lymphoma. . . . . 4 3 2 1 N/M N/A
- Assess the ongoing clinical trials investigating innovative approaches for Hodgkin and non-Hodgkin lymphomas and MM, and refer appropriate patients for study participation. . . . . 4 3 2 1 N/M N/A

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**Would you recommend this activity to a colleague?**

Yes     No    If no, please explain: .....

PART 2 — Please tell us about the faculty and editor for this educational activity									
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Brad S Kahl, MD		4	3	2	1	4	3	2	1
Editor		Knowledge of subject matter				Effectiveness as an educator			
Neil Love, MD		4	3	2	1	4	3	2	1

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