WHAT CLINICIANS WANT TO KNOW

Addressing the Most Common Questions Regarding the Clinical Management of Non-Hodgkin Lymphoma and Chronic Lymphocytic Leukemia



Proceedings from a Satellite Symposium Preceding the 51st ASH Annual Meeting

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What Clinicians Want To Know: Addressing the Most Common Questions Regarding the Clinical Management of NHL and CLL

A Continuing Medical Education Program

OVERVIEW OF ACTIVITY

Non-Hodgkin lymphomas (NHL) constitute a heterogeneous group of lymphoproliferative disorders. NHL is an area of active research and represents a rapidly evolving field in medical oncology. Published results from ongoing clinical trials lead to the continual emergence of new therapeutic agents and strategies. To bridge the gap between research and patient care, these proceedings from a case-based CME satellite symposium at the 2009 American Society of Hematology Annual Meeting utilize the perspectives of clinical investigators, in addition to the exchange among these individuals, to apply evidence-based concepts to routine clinical care. By providing access to the latest research developments and expert opinions on the disease, this activity will assist medical oncologists, hematologists and hematology-oncology fellows in the formulation of up-to-date clinical management strategies for NHL and chronic lymphocytic leukemia (CLL).

LEARNING OBJECTIVES

- Summarize the therapeutic advances and changing practice standards in NHL and CLL, and apply this information to routine patient care.
- Apply the results of emerging clinical research to the selection of optimal systemic therapy for patients with newly diagnosed and relapsed/refractory CLL.
- Develop an algorithm for the risk-stratified induction treatment for patients with diffuse large B-cell lymphoma (DLBCL) or mantle-cell lymphoma (MCL).
- · Utilize prognostic and predictive clinical and molecular markers to aid in treatment decision-making for NHL and CLL.
- Assess the evidence-based role of maintenance therapy in the management of newly diagnosed and relapsed follicular lymphoma.
- Recount the emerging data with novel agents and combinations in the treatment of relapsed follicular lymphoma.
- Counsel appropriately selected patients about participation in ongoing clinical research studies.

ACCREDITATION STATEMENT

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POST-TEST

What Clinicians Want To Know: Addressing the Most Common Questions Regarding the Clinical Management of NHL and CLL

QUESTIONS (PLEASE CIRCLE ANSWER):

- Ofatumumab is an anti-CD20 monoclonal antibody that is approved for patients with CLL who are refractory to fludarabine and alemtuzumab.
 - a. True
 - b. False
- 2. The German CLL Study Group is conducting a randomized trial evaluating front-line FCR versus ______ for patients with CLL.
 - a. Bortezomib/ofatumumab
 - b. Bendamustine/rituximab
 - c. FCR in combination with bevacizumab
- 3. A study for patients with follicular lymphoma demonstrated that the advantage of prolonged rituximab therapy versus a short course persists for many years after completion of treatment.
 - a. True
 - b. False
- 4. In the United States, bendamustine has been approved for the first-line treatment of CLL.
 - a. True
 - b. False

- In general, nodal follicular lymphomas tend to be more indolent than extranodal gastrointestinal follicular lymphomas.
 - a. True
 - b. False
- 6. The RESORT trial evaluated maintenance rituximab in patients with ______.
 - a. Mantle-cell lymphoma
 - b. Diffuse large B-cell lymphoma
 - c. Indolent lymphoma
- 7. In patients with diffuse large B-cell lymphoma, which of the following are independent predictors of CNS relapse?
 - a. Involvement in two or more extranodal sites
 - b. Elevated serum lactate dehydrogenase
 - c. Neither a nor b
 - d. Both a and b
- 8. The AIDS Malignancy Consortium Phase II randomized study demonstrated that _____ among patients with HIV-associated B-cell NHL.
 - a. EPOCH-R had no increased toxicity but superior outcomes compared to EPOCH → R
 - b. EPOCH-R had increased toxicity and equivalent

EDUCATIONAL ASSESSMENT AND CREDIT FORM

What Clinicians Want To Know: Addressing the Most Common Questions Regarding the Clinical Management of NHL and CLL

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 ONE — 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 = Ade	equate	1 =	nal						
			BEFORE		AFTE	R					
Outcomes of prolonged rituximab therapy in CLL	-		4 3 2 1		4 3 2	1					
Maintenance rituximab in follicular lymphoma, M	/ICL and DLB	CL	4 3 2 1		4 3 2	1					
Weekly versus twice-weekly bortezomib in NHL			4 3 2 1		4 3 2	1					
Deferred initial therapy in MCL			4 3 2 1		4 3 2	1					
EPOCH chemotherapy in combination with ritux treatment of AIDS-related B-cell lymphoma	imab in the		4 3 2 1		4 3 2	1					
Was the activity evidence based, fair, balanced Yes No If no, please explain: Will this activity help you improve patient care?											
☐ Yes ☐ No ☐ Not appli	cable										
If no, please explain:											
Did the activity meet your educational needs and	d expectation	s?									
□ Yes □ No											
If no, please explain:											
Please respond to the following learning objective	es (LOs) by c	ircling th	e appropria	ate s	election	:					
4 = Yes $3 = $ Will consider $2 = $ No $1 = $ Alread	ly doing N/M	1 = LO not	met N/A	= N	ot applica	able					
As a result of this activity, I will be able to:											
Summarize the therapeutic advances and chang in NHL and CLL, and apply this information to ro Apply the results of emerging clinical research to	utine patient o	care	4	3 2	2 1 N/M	N/A					
optimal systemic therapy for patients with newly relapsed/refractory CLL	diagnosed and	d for	4	3 2	2 1 N/M	N/A					
lymphoma (MCL)			4	3 2	2 1 N/M	N/A					
aid in treatment decision-making for NHL and CI • Assess the evidence-based role of maintenance	L		4	3 2	2 1 N/M	N/A					
management of newly diagnosed and relapsed for Recount the emerging data with novel agents and	d combination	s in the									
treatment of relapsed follicular lymphoma • Counsel appropriately selected patients about pa	rticipation in o	ongoing									
clinical research studies			4	3 2	2 1 N/M	N/A					

EDUCATIONAL ASSESSMENT AND CREDIT FORM (continued)

What other practice changes will	you make	or cor	sider	making as	a result o	f this	activi	ity?		
What additional information or tr related topics?	aining do y	ou ne	ed on	the activi	ty topics o	r othe	er once	ology-		
Additional comments about this	activity:									
As part of our ongoing, continuous urveys to assess the impact of o indicate your willingness to participate. Yes, I am willing to participate. No, I am not willing to participate.	ur education sipate in suc e in a follow-	nal int ch a s up su	t erven urvey. ırvey.	tions on pi						
PART TWO — Please tell us	about the fa	aculty	and i	moderator	for this edu	ucatio	nal ac	tivity		
4 = Excellent 3 = Good 2 = Adequate 1 = Suboptimal										
Faculty		Knowledge of subject matter			Effectiveness as an educator					
Jonathan W Friedberg, MD	4	3	2	1	4	3	2	1		
Stephanie A Gregory, MD	4	3	2	1	4	3	2	1		
Fredrick B Hagemeister, MD	4	3	2	1	4	3	2	1		
David G Maloney, MD, PhD	4	3	2	1	4	3	2	1		
Kanti R Rai, MD	4	3	2	1	4	3	2	1		
Wyndham H Wilson, MD, PhD	4	3	2	1	4	3	2	1		
Moderator	Knowledge of subject matter Effectiveness as an educa						educator			
Neil Love, MD	4	3	2	1	4	3	2	1		
Other comments about the facul REQUEST FOR CREDIT —	ty and mod	erator	for t	his activity	':					
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