

# Meet The Professors

A case-based discussion on the management  
of chronic lymphocytic leukemia, non-Hodgkin  
lymphomas and multiple myeloma



## **MODERATOR**

Neil Love, MD

## **FACULTY**

Stephanie A Gregory, MD

Robert Z Orlowski, MD, PhD



Subscribe to Podcasts  
or download MP3s  
of this program at  
[ResearchToPractice.  
com/MTPH109](http://ResearchToPractice.com/MTPH109)

From the publishers of:

**Hematologic  
Oncology™**  
U P D A T E



# Meet The Professors: A case-based discussion on the management of chronic lymphocytic leukemia, non-Hodgkin lymphomas and multiple myeloma

## OVERVIEW OF ACTIVITY

Currently, more than 45 drug products are approved for use in the management of hematologic cancer, comprising more than 55 distinct FDA-approved indications. The evidence-based use of cytotoxic chemotherapeutic agents, autologous and/or allogeneic hematopoietic stem cell transplants and biologic or molecularly targeted therapies has been the focus of treatment algorithms designed to assist clinicians in the care of patients with hematologic cancer. Standard interventions, emerging trends and areas of active investigation for the most frequently observed lymphoid and myeloid cancer types pose a challenge to the practicing oncologist, who must maintain current knowledge of appropriate interventions for an expansive and diverse array of tumors. Featuring information on the latest research developments along with experts' perspectives, this CME program is designed to assist medical oncologists and hematologists with the formulation of up-to-date clinical management strategies to facilitate optimal patient care.

## LEARNING OBJECTIVES

- Recognize the unique laboratory findings and clinical characteristics of patients with chronic lymphocytic leukemia (CLL), non-Hodgkin lymphoma (NHL) and multiple myeloma (MM).
- Utilize case-based interactive learning to develop a therapeutic algorithm for the evidence-based management of follicular and mantle-cell NHL.
- Compare and contrast the benefits and risks of chemotherapy and combination chemoimmunotherapeutic regimens for patients with CLL.
- Identify individualized treatment approaches for patients with MM, considering the efficacy and safety of proteasome inhibitors, immunomodulatory agents and autologous stem cell transplant.
- Recommend prophylactic and acute supportive management strategies to reduce or ameliorate side effects associated with systemic therapy for hematologic cancer.
- Counsel appropriately selected patients on the availability of clinical trials offering novel treatment approaches for the management of myeloid and lymphoid disorders.

## 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 educational activity for a maximum of 1.75 *AMA PRA Category 1 Credits™*. Physicians should only claim credit commensurate with the extent of their participation in the activity.

## HOW TO USE THIS CME ACTIVITY

This CME activity contains an audio component. To receive credit, the participant should review the CME information, listen to the CD and bonus web-only audio and complete the Educational Assessment and Credit Form located in the back of this booklet or on our website at **CME. ResearchToPractice.com**.

***This program is supported by educational grants from Centocor Ortho Biotech Services LLC, Genentech BioOncology/Biogen Idec and Millennium Pharmaceuticals Inc.***

---

Last review date: June 2009; Release date: June 2009; Expiration date: June 2010

## CONTENT VALIDATION AND DISCLOSURES

Research To Practice (RTP) is committed to providing its participants with high-quality, unbiased and state-of-the-art education. We assess potential conflicts of interest with faculty, planners and managers of CME activities. Real or apparent 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 real or apparent conflicts of interest, which have been resolved through a conflict of interest resolution process: **Dr Gregory** — **Advisory Committee:** Amgen Inc, Novartis Pharmaceuticals Corporation; **Speakers Bureau:** Cephalon Inc, Genentech BioOncology, GlaxoSmithKline, Millennium Pharmaceuticals Inc. **Dr Orlowski** — **Advisory Committee:** Amgen Inc, Celgene Corporation, Centocor Ortho Biotech Services LLC, Millennium Pharmaceuticals Inc.

**COMMUNITY PANEL** — **Drs Levy and Schwartz** had no real or apparent conflicts of interest to disclose. **Dr Hart** — **Speakers Bureau:** GlaxoSmithKline. **Dr Joshua** — **Stock Ownership:** Amgen Inc, Genentech BioOncology. **Dr Hussein** — **Advisory Committee:** Eisai Inc, Novartis Pharmaceuticals Corporation; **Speakers Bureau:** Amgen Inc, Novartis Pharmaceuticals Corporation, Sanofi-Aventis. **Dr Rodriguez** — **Speakers Bureau:** Eli Lilly and Company, Millennium Pharmaceuticals Inc.

**MODERATOR** — **Neil Love:** Dr Love is president and CEO of Research To Practice, which receives funds in the form of educational grants to develop CME activities from the following commercial interests: Abraxis BioScience, AstraZeneca Pharmaceuticals LP, Aureon Laboratories Inc, Bayer Pharmaceuticals Corporation/Onyx Pharmaceuticals Inc, Biogen Idec, Boehringer Ingelheim Pharmaceuticals Inc, Bristol-Myers Squibb Company, Celgene Corporation, Centocor Ortho Biotech Services LLC, Cephalon Inc, Eisai Inc, Eli Lilly and Company, Genentech BioOncology, Genomic Health Inc, Genzyme Corporation, GlaxoSmithKline, ImClone Systems Incorporated, Merck and Company Inc, Millennium Pharmaceuticals Inc, Novartis Pharmaceuticals Corporation, OSI Oncology, Pfizer Inc, Roche Laboratories Inc, Sanofi-Aventis, Synta Pharmaceuticals Corp and Wyeth.

**RESEARCH TO PRACTICE STAFF AND EXTERNAL REVIEWERS** — The scientific staff and reviewers for Research To Practice have no real or apparent 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.*

---

### Medical Oncologist Community Panel

---

#### **Lowell L Hart, MD**

Research Director, Florida  
Cancer Specialists  
Fort Myers, Florida

#### **Gracy Joshua, MD**

Board Certified in Oncology  
Private Practice  
Lake Worth, Florida  
Chief of Oncology, JFK Medical Center  
Atlantis, Florida

#### **Isaac Levy, MD**

Memorial Hospital West  
Pembroke Pines, Florida

#### **Michael A Schwartz, MD**

Attending, Mount Sinai  
Medical Center  
Miami Beach, Florida

#### **Atif M Hussein, MD**

Medical Director  
Memorial Cancer Institute  
Hollywood, Florida

#### **Frank A Rodriguez, MD**

Florida Cancer Specialists  
Fort Myers, Florida

---

### MEET THE PROFESSORS DOWNLOADABLE AUDIO AND PODCASTS

MP3 audio files are available for download on our website [www.ResearchToPractice.com/MTPH109](http://www.ResearchToPractice.com/MTPH109)

---

## Case Studies

---

**Case 1 from the practice of Lowell L Hart, MD:** A 79-year-old man diagnosed with chronic lymphocytic leukemia (CLL) with trisomy 12 in 2002 was observed until 2006, when he received cyclophosphamide and prednisone for bothersome, progressive lymphadenopathy. Treatment was repeated in 2007 for recurrent lymphadenopathy. Recently, his WBC count rose to 60,000/mm<sup>3</sup> and his platelet count was 100,000/mm<sup>3</sup>. A CT scan revealed splenomegaly and abdominal lymphadenopathy, with the largest mass measuring 10 x 16 centimeters (presented to Stephanie A Gregory, MD).

**Case 2 from the practice of Gracy Joshua, MD:** A 61-year-old woman diagnosed with follicular lymphoma repeatedly experienced infusion reactions to rituximab. She received six cycles of COP and experienced a partial remission. Upon disease progression, she received four cycles of single-agent fludarabine but developed pancytopenia. With extensive steroids, antihistamine and IV meperidine, four cycles of rituximab were successfully administered and she achieved a partial response, but her disease progressed within six months. After four cycles of bendamustine/rituximab, a PET-CT showed complete remission (presented to Dr Gregory).

**Case 3 from the practice of Isaac Levy, MD:** An 83-year-old woman presented six years ago with a palpable neck mass, diffuse lymphadenopathy and normal laboratory results. The patient received a differential diagnosis of marginal zone lymphoma versus SLL/CLL, which was widespread on imaging studies. She was lost to follow-up but returned after a couple of years, underwent repeat biopsy and was diagnosed with mantle-cell lymphoma. She experienced a complete response with R-CHOP. Sixteen months later, she presented with a new cervical mass and widespread disease seen on PET-CT. She was treated with five cycles of fludarabine/mitoxantrone/dexamethasone/rituximab and had a complete response but developed pancytopenia (presented to Dr Gregory).

**Case 4 from the practice of Michael A Schwartz, MD:** A 49-year-old man with multiple myeloma and a 13q14 deletion was treated with six cycles of bortezomib/pegylated liposomal doxorubicin/dexamethasone (PAD) and experienced a major, but not complete, response. He received high-dose melphalan and an autologous stem cell transplant in February 2008. At this time, his only evidence of disease is a residual M-protein level of 0.1 to 0.2 mg/dL (presented to Robert Z Orlowski, MD, PhD).

**Case 5 from the practice of Atif M Hussein, MD:** A 58-year-old man presented with a pathologic femur fracture and multiple lytic lesions and was diagnosed with multiple myeloma and chromosome 13 deletion. He received induction bortezomib/thalidomide/dexamethasone (VTD), to which he experienced a very good partial response, followed by an autologous stem cell transplant (presented to Dr Orlowski).

**Case 6 from the practice of Frank A Rodriguez, MD:** A 57-year-old man experienced abrupt and persistent pain from a pathologic humerus fracture and was diagnosed with multiple myeloma and chromosome 13 deletion with several lytic lesions. He received cyclophosphamide and PAD on a clinical trial along with zoledronic acid. His bone disease has not improved, but his kappa/lambda ratio has decreased substantially (presented to Dr Orlowski).

**Case 7 from the practice of Dr Joshua:** A 59-year-old man with a history of hypertension and diabetes was treated in 2000 with induction thalidomide/dexamethasone for multiple myeloma, and he experienced a complete remission within six to nine months. He underwent an autologous stem cell transplant followed by thalidomide maintenance therapy. During the next two years he slowly developed a protein spike, and in January 2008 his IgG level began rising and he developed pancytopenia. He was treated with bortezomib/dexamethasone and his IgG decreased, but he developed significant neuropathy and remains pancytopenic (presented to Dr Orlowski).

---

## Guide to Audio Program

---

Track 1 — case from Dr Hart; Track 2 — case from Dr Joshua; Track 3 — case from Dr Levy; Track 4 — case from Dr Schwartz; Track 5 — case from Dr Hussein; Track 6 — case from Dr Rodriguez; Track 7 — case from Dr Joshua

**Educational Assessment and Credit Form:**  
**Meet The Professors Hematologic Cancer, Issue 1, 2009**

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 = Adequate	1 = Suboptimal		
				BEFORE	AFTER
Strategies to ameliorate infusion reactions secondary to rituximab				4 3 2 1	4 3 2 1
Bendamustine as treatment for elderly patients with progressive CLL				4 3 2 1	4 3 2 1
Incorporation of bortezomib into the treatment of mantle-cell lymphoma				4 3 2 1	4 3 2 1
Clinical outcomes with maintenance rituximab in follicular lymphoma				4 3 2 1	4 3 2 1
Rationale for delayed transplant for patients with multiple myeloma in complete remission after induction treatment alone				4 3 2 1	4 3 2 1
RVD (lenalidomide/bortezomib/dexamethasone) in multiple myeloma				4 3 2 1	4 3 2 1

**Was the activity evidence based, fair, balanced and free from commercial bias?**

☐ Yes                      ☐ No

If no, please explain: .....

**Will this activity help you improve patient care?**

☐ Yes                      ☐ No                      ☐ Not applicable

If no, please explain: .....

**Did the activity meet your educational needs and expectations?**

☐ Yes                      ☐ No

If no, please explain: .....

**Please respond to the following learning objective (LO) by circling the appropriate selection:**

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

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

- Recognize the unique laboratory findings and clinical characteristics of patients with chronic lymphocytic leukemia (CLL), non-Hodgkin lymphoma (NHL) and multiple myeloma (MM) ..... 4 3 2 1 N/M N/A
- Utilize case-based interactive learning to develop a therapeutic algorithm for the evidence-based management of follicular and mantle-cell NHL ..... 4 3 2 1 N/M N/A
- Compare and contrast the benefits and risks of chemotherapy and combination chemoimmunotherapeutic regimens for patients with CLL ..... 4 3 2 1 N/M N/A
- Identify individualized treatment approaches for patients with MM, considering the efficacy and safety of proteasome inhibitors, immunomodulatory agents and autologous stem cell transplant ..... 4 3 2 1 N/M N/A
- Recommend prophylactic and acute supportive management strategies to reduce or ameliorate side effects associated with systemic therapy for hematologic cancer. .... 4 3 2 1 N/M N/A
- Counsel appropriately selected patients on the availability of clinical trials offering novel treatment approaches for the management of myeloid and lymphoid disorders ..... 4 3 2 1 N/M N/A

EDUCATIONAL ASSESSMENT AND CREDIT FORM (continued)

What other practice changes will you make or consider making as a result of this activity?

What additional information or training do you need on the activity topics or other oncology-related topics?

Additional comments about this activity:

As part of our ongoing, continuous quality-improvement effort, we conduct postactivity follow-up surveys to assess the impact of our educational interventions on professional practice. Please indicate your willingness to participate in such a survey.

- ☐ Yes, I am willing to participate in a follow-up survey.  
☐ No, I am not willing to participate in a follow-up survey.

**PART TWO — Please tell us about the faculty and moderator for this educational activity**

	4 = Excellent	3 = Good	2 = Adequate	1 = Suboptimal	
Faculty	Knowledge of subject matter				Effectiveness as an educator
Stephanie A Gregory, MD	4	3	2	1	4 3 2 1
Robert Z Orlowski, MD, PhD	4	3	2	1	4 3 2 1
Moderator	Knowledge of subject matter				Effectiveness as an educator
Neil Love, MD	4	3	2	1	4 3 2 1

Please recommend additional faculty for future activities:

Other comments about the faculty and moderator for this activity:

**REQUEST FOR CREDIT — Please print clearly**

Name: ..... Specialty: .....

Professional Designation:

☐ MD ☐ DO ☐ PharmD ☐ NP ☐ RN ☐ PA ☐ Other .....

Medical License/ME Number: ..... Last 4 Digits of SSN (required): .....

Street Address: ..... Box/Suite: .....

City, State, Zip: .....

Telephone: ..... Fax: .....

Email: .....

Research To Practice designates this educational activity for a maximum of 1.75 *AMA PRA Category 1 Credits™*. Physicians should only claim credit commensurate with the extent of their participation in the activity.

I certify my actual time spent to complete this educational activity to be \_\_\_\_\_ hour(s).

Signature: ..... Date: .....

MTPH109

To obtain a certificate of completion and receive credit for this activity, please fill out the Educational Assessment and Credit Form and fax to (800) 447-4310, or mail to Research To Practice, One Biscayne Tower, 2 South Biscayne Boulevard, Suite 3600, Miami, FL 33131. You may also complete the Educational Assessment online at [CME.ResearchToPractice.com](http://CME.ResearchToPractice.com).

# Meet The Professors

<b>Moderator</b>	Neil Love, MD
<b>Managing Editor</b>	Kathryn Ault Ziel, PhD
<b>Scientific Director</b>	Richard Kaderman, PhD
<b>Senior Director, Medical Affairs</b>	Aviva Asnis-Alibozek, PA-C, MPAS
<b>Writers</b>	Lillian Sklaver Poltorack, PharmD Douglas Paley
<b>Continuing Education Administrator for Nursing Content Validation</b>	Sally Bogert, RNC, WHCNP Margaret Peng Erin Wall Clayton Campbell Jessica McCarrick
<b>Director, Creative and Copy Editing Creative Manager Graphic Designers</b>	Aura Herrmann Fernando Rendina Jessica Benitez Jason Cunniss Tamara Dabney Claudia Munoz Deepti Nath
<b>Senior Production Editor Traffic Manager Copy Editors</b>	Alexis Oneca Tere Sosa Margo Harris David Hill Rosemary Hulce Kirsten Miller Pat Morrissey/Havlin Carol Peschke Susan Petrone
<b>Production Manager Audio Production Web Master Faculty Relations Manager CME Director/CPD Director Contact Information</b>	Tracy Potter Frank Cesarano John Ribeiro Melissa Vives Isabelle Vacher Neil Love, MD Research To Practice One Biscayne Tower 2 South Biscayne Boulevard, Suite 3600 Miami, FL 33131 Fax: (305) 377-9998 Email: <a href="mailto:DrNeilLove@ResearchToPractice.com">DrNeilLove@ResearchToPractice.com</a> Email: <a href="mailto:CE@ResearchToPractice.com">CE@ResearchToPractice.com</a>
<b>For CME/CNE Information</b>	

Copyright © 2009 Research To Practice. All rights reserved.

The compact disc, Internet content and accompanying printed material are protected by copyright. No part of this program may be reproduced or transmitted in any form or by any means, electronic or mechanical, including photocopying, recording or utilizing any information storage and retrieval system, without written permission from the copyright owner.

The opinions expressed are those of the presenters and are not to be construed as those of the publisher or grantors.

Participants have an implied responsibility to use the newly acquired information to enhance patient outcomes and their own professional development. The information presented in this activity is not meant to serve as a guideline for patient management.

Any procedures, medications or other courses of diagnosis or treatment discussed or suggested in this activity should not be used by clinicians without evaluation of their patients' conditions and possible contraindications or dangers in use, review of any applicable manufacturer's product information and comparison with recommendations of other authorities.

Copyright © 2009 Research To Practice.  
This program is supported by educational grants from  
Centocor Ortho Biotech Services LLC, Genentech BioOncology/Biogen Idec  
and Millennium Pharmaceuticals Inc.

## Research To Practice®

Sponsored by Research To Practice.

Last review date: June 2009  
Release date: June 2009  
Expiration date: June 2010  
Estimated time to complete: 1.75 hours