Breast Cancer®

An Audio Review Journal for Nurses

Management of Breast Cancer in the Adjuvant and Metastatic Settings

EDITOR

Neil Love, MD

INTERVIEWS

Robert W Carlson, MD

Clifford Hudis, MD

Anne P O'Connor, RN, MSN, AOCN

Additional comments by two healthcare professionals with breast cancer





A Continuing Nursing Education Audio Series

STATEMENT OF NEED/TARGET AUDIENCE

Medical oncology, particularly breast cancer, is one of the most rapidly advancing and developing fields of medicine. The constant emergence of new systemic agents, new indications for existing systemic agents, novel therapies, clinical trials and research findings demands that oncology nurses remain dedicated to continuing education in order to offer their patients the best care possible. This program provides registered nurses access to the most up-to-date research developments in breast cancer and the opinions of oncology nurses and clinical investigators with experience and expertise in the field. This information can be effectively translated into everyday patient management decisions.

PURPOSE STATEMENT

To present the most current research developments in breast cancer and to provide the perspectives of medical oncologists, oncology nurses and patients on the diagnosis and treatment of breast cancer.

EDUCATIONAL OBJECTIVES FOR THIS ISSUE OF BREAST CANCER UPDATE FOR NURSES

- Discuss the clinical implications of emerging clinical trial data in breast cancer treatment and how to incorporate these data into management strategies in the adjuvant, neoadjuvant and metastatic settings.
- Discuss the selection and sequencing of endocrine therapy in the adjuvant and metastatic settings.
- Describe the risks and benefits of chemotherapeutic agents and regimens in the adjuvant and metastatic settings.
- Describe the computerized risk models and genetic markers to determine prognostic information on the quantitative risk of breast cancer relapse.
- Explain the risks and benefits of incorporating biologic agents in the adjuvant and metastatic settings.
- Discuss psychosocial and emotional needs of caregivers, patients and their loved ones associated with the diagnosis and treatment of breast cancer.

ACCREDITATION STATEMENTS

This educational activity for 2.7 contact hours is provided by Research To Practice during the period of August 2007 through August 2008.

Research To Practice is an approved provider of continuing nursing education by the New Jersey State Nurses Association, Provider Number P215-01/07-10. NJSNA is accredited by the ANCC Commission on Accreditation. Provider Approval is valid through January 31, 2010.

HOW TO USE THIS CNE ACTIVITY

This is an audio CNE program. This book contains CNE information, including learning objectives, faculty disclosures, a Post-test and an Evaluation Form. The corresponding website **BreastCancerUpdate.com/Nurses** also includes links to relevant abstracts and full-text articles.

The Post-test and Evaluation Form may be completed in this book and either mailed to Research To Practice, 2 South Biscayne Blvd, Suite 3600, Miami, FL 33131 or faxed to (800) 447-4310. They may also be completed online. A statement of credit will be issued only upon receipt of a completed Post-test with a score of 70 percent or better and a completed Evaluation Form. Your statement of credit will be mailed to you within three weeks or may be printed online.

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EDITOR



Neil Love, MD Medical Oncologist Editor, Breast Cancer Update for Nurses Research To Practice Miami, Florida

FACULTY AFFILIATIONS



Robert W Carlson, MD
Professor of Medicine
Division of Oncology and
Stanford Medical Informatics
Stanford University Medical Center
Stanford, California



Clifford Hudis, MD Chief, Breast Cancer Medicine Service Solid Tumor Division Memorial Sloan-Kettering Cancer Center New York, New York



Anne P O'Connor, RN, MSN, AOCN Clinical Nurse Coordinator — Oncology Lombardi Comprehensive Cancer Center Washington, DC

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QUESTIONS (PLEASE CIRCLE ANSWER):

- Which schedule of administration for an LHRH agonist is more effective in achieving continued ovarian suppression in a premenopausal woman?
 - a. Monthly
 - b. Every three months
- 2. In the EFECT study, comparing fulvestrant to exemestane for postmeno-pausal women with advanced breast cancer, which therapy demonstrated a significantly greater rate of response and time to disease progression?
 - a. Fulvestrant
 - b. Exemestane
 - c. Fulvestrant and exemestane were about the same
- 3. Which of the following endocrine agents is a selective estrogen receptor modulator, with both estrogen-promoting and estrogen-antagonizing effects?
 - a. Tamoxifen
 - b. Anastrozole
 - c. Fulvestrant
 - d. Exemestane
- 4. In an ECOG trial comparing paclitaxel with or without bevacizumab in the metastatic setting, the addition of bevacizumab significantly ______ the duration of progression-free survival.
 - a. Increased
 - b. Decreased
- 5. Which of the following side effects is commonly associated with capecitabine?
 - a. Alopecia areata
 - b. Hand-foot syndrome
 - c. Bone loss
 - d. Uterine cancer

- Premedicating patients with antihistamines and/or dexamethasone to avoid hypersensitivity reactions _____ required when administering nab paclitaxel.
 - a. Is
 - b. Is not
- 7. Adjuvant clinical trials comparing aromatase inhibitors to tamoxifen for postmenopausal women with hormone receptor-positive breast cancer have demonstrated which of the following?
 - a. Aromatase inhibitors result in bone loss
 - b. Aromatase inhibitors are not associated with uterine cancer
 - c. Aromatase inhibitors are more effective in reducing the risk of recurrence
 - d. All of the above
- 8. In a clinical trial that compared doxorubicin/cyclophosphamide to docetaxel/cyclophosphamide in the adjuvant setting, which regimen was more effective in lowering the risk of recurrence?
 - a. Doxorubicin/cyclophosphamide
 - b. Docetaxel/cyclophosphamide
- 9. Based on the Oncotype DX™ assay, patients with a high recurrence score have a _____ chance of benefiting from adjuvant chemotherapy than patients with a low recurrence score.
 - a. Greater
 - b. Lesser
- 10. The TAnDEM trial, comparing anastrozole with or without trastuzumab for women with ER-positive, HER2-overexpressing metastatic breast cancer, demonstrated a significantly prolonged progression-free survival among patients who received
 - a. Anastrozole with trastuzumab
 - b. Anastrozole without trastuzumab

Outstanding

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EXTENT TO WHICH PROGRAM ACTIVITIES MET THE IDENTIFIED GOAL

Good

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Satisfactory

2=

Fair

1 =

Poor

• To present the most current research developments in breast cancer and to provide the perspectives of medical oncologists, oncology nurses and patients on the diagnosis and treatment of breast cancer		
EXTENT TO WHICH PROGRAM ACTIVITIES MET THE IDENTIFIED OBJECTIVES Upon completion of this activity, participants should be better able to:		
Discuss the clinical implications of emerging clinical trial data in breast cancer treatment and how to incorporate these data into management strategies in the adjuvant, neoadjuvant and metastatic settings		
Discuss the selection and sequencing adjuvant and metastatic settings		5 4 3 2 1
Describe the risks and benefits of chemotherapeutic agents and regimens in the adjuvant and metastatic settings		
Describe the computerized risk models and genetic markers to determine prognostic information on the quantitative risk of breast cancer relapse		
• Explain the risks and benefits of incorporating biologic agents in the adjuvant and metastatic settings		
• Discuss psychosocial and emotional needs of caregivers, patients and their loved ones associated with the diagnosis and treatment of breast cancer 5 4 3 2 1		
EFFECTIVENESS OF THE INDIVIDUAL FACULTY MEMBERS		
Faculty	Knowledge of subject matter	Effectiveness as an educator
Faculty Robert W Carlson, MD	Knowledge of subject matter 5 4 3 2 1	Effectiveness as an educator 5 4 3 2 1
Robert W Carlson, MD	5 4 3 2 1	5 4 3 2 1
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IMPACT OF THE ACTIVITY (CONTINUED)	
Will the information presented cause you to make ☐ Yes ☐ No	e any changes in your practice?
If yes, please describe any change(s) you plan to	make in your practice as a result of this activity
If yes, how committed are you to making these characteristics, the committed of the commit	_
FUTURE ACTIVITIES	
Do you feel future activities on this subject matter Yes No	are necessary and/or important to your practice?
Please list any other topics that would be of inter-	est to you for future educational activities:
Additional comments about this activity:	
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As part of our ongoing, continuous quality-improsurveys to assess the impact of our educational indicate your willingness to participate in such a second continuous participate in such as second continuous participate in such a second continuous participate participate in such a second continuous participate	I interventions on professional practice. Please
 Yes, I am willing to participate in a follow-up survey. 	 No, I am not willing to participate in a follow-up survey.
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Editor/CME Director

Managing Editor Kathryn Ault Ziel, PhD
Scientific Director Richard Kaderman. PhD

Senior Director, Medical Affairs Aviva Asnis-Alibozek, PA-C, MPAS

Writers Lilliam Sklaver Poltorack, PharmD

Neil Love, MD

Douglas Paley

Continuing Education Administrator for Nursing Sally Bogert, RNC, WHCNP

Content Validation Margaret Peng

John Brebner Ginelle Suarez Frin Wall

Director, Creative and Copy Editing Aura Herrmann

Creative Manager Fernando Rendina

Graphic Designers Jason Cunnius Tamara Dabney

Shantia Daniel Elisa Stambouli

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Traffic Manager Tere Sosa

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Margo Harris Rosemary Hulce Kirsten Miller Pat Morrissey/Havlin Carol Peschke

Susan Petrone

Production Manager Rena Chiarelli

Audio Production Frank Cesarano

Web Master John Ribeiro

Contact Information Neil Love. MD

Research To Practice One Biscayne Tower

2 South Biscayne Boulevard, Suite 3600

Miami, FL 33131 Fax: (305) 377-9998

Email: NLove@ResearchToPractice.com

For CNE Information Email: CNE@ResearchToPractice.com

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