# Breast Cancer®

# An Audio Review Journal for Nurses

Management of Breast Cancer in the Adjuvant and Metastatic Settings

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Additional comments by a woman with breast cancer and her mother



#### 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 research leaders 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.

#### ACCREDITATION STATEMENT

New Jersey State Nurses Association is accredited as an approver of continuing education in nursing by the American Nurses Credentialing Center's Commission on Accreditation. This activity has been awarded 3.3 contact hours (approval number 6458-06/06-08).

#### HOW TO USE THIS CNE ACTIVITY

This is an audio CNE activity. This book contains a continuing nursing education Post-test, and the corresponding website <code>BreastCancerUpdate.com/Nurses</code> includes links to relevant full-text articles and abstracts. There are no fees for participating and receiving CNE credit for this activity. To receive credit during the period of June 2006 through June 2007, participants should read the learning objectives and faculty disclosures, listen to the CDs and complete the Post-test and Evaluation form located in the back of this book or on the <code>BreastCancerUpdate.com/Nurses</code> website and mail or fax the Post-test and Evaluation form to Research To Practice.

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#### **CNE INFORMATION**

# Breast Cancer®

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#### QUESTIONS (PLEASE CIRCLE ANSWER):

| 1. | Aromatase inhibitors can be effective in patients with ER-positive breast cancer.  a. Premenopausal b. Postmenopausal c. Both pre- and postmenopausal  | p<br>s<br>a      | Patients with node-negative, ER- positive disease and a high recurrence core according to the Onco <i>type</i> DX <sup>TM</sup> possay have been shown to benefit from a city or compared to the Compared to the Onco type DX <sup>TM</sup> possay have been shown to benefit from a city or compared to the Compared to |
|----|--|------------------|--|
| 2. | In the trials comparing aromatase inhibitors to tamoxifen in the adjuvant setting in postmenopausal women, which intervention demonstrated a superior disease-free survival?  a. Tamoxifen b. Aromatase inhibitors                 | v<br>n<br>b      | c. Chemotherapy d. All of the above n the ECOG trial comparing paclitaxel with or without bevacizumab in the netastatic setting, the addition of bevacizumab significantlyesponse rate and the duration of   |
| 3. | Which of the following adverse events occur less frequently with aromatase inhibitors than with tamoxifen?  a. Endometrial cancer b. Thromboembolic events c. Fractures d. Both a and b  | 8. V             | orogression-free survival.  a. Increased b. Decreased  Which endocrine agent is given by ntramuscular injection and has relatively ew side effects?  a. Tamoxifen  |
| 4. | Clinical trials have reported that adjuvant trastuzumab given to a patient with HER2-positive breast cancer reduces her risk of recurrence by approximately  a. 10 percent b. 20 percent c. 30 percent d. 40 percent e. 50 percent | 1<br>t<br>h<br>r | b. Anastrozole c. Letrozole d. Fulvestrant n the pivotal trial comparing paclitaxel .75 mg/m² to nab paclitaxel 260 mg/m², he patients who received lad a significantly higher response ate and improved time to disease brogression. a. Paclitaxel  |
| 5. | Data from the adjuvant trials indicate that trastuzumab is effective in women with, HER2-positive breast cancer.  a. Node-positive b. Node-negative c. Node-positive and node-negative   | 10. <i>I</i>     | b. Nab paclitaxel  Nab paclitaxel require he use of steroid premedication. a. Does b. Does not   |

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The New Jersey State Nurses Association and Research To Practice respect and appreciate your opinions. To assist us in evaluating the effectiveness of this activity and to make recommendations for future educational offerings, please take a few minutes to complete this evaluation form. You must complete this evaluation form to receive acknowledgment of participation for this activity.

| Please answer the following question $5 = 4 = 0$ Outstanding Good   | ons by circ                 | ns by circling the appropriate rations as a Satisfactory |            |            |         | ting:<br>2 =<br>Fair |       |      | 1 =<br>Poor |                   |             |             |
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| 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   |                             |  |            |            |         |                      |       |      |             |                   |             |             |
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| <ul> <li>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.</li> <li>Discuss the selection and sequencing of endocrine therapy in the</li> </ul> |                             |  |            |            |         |                      |       |      |             |                   |             |             |
| adjuvant and metastatic settings  |                             |  |            |            |         |                      |       |      |             |                   |             |             |
| in the adjuvant and metastatic settings   |                             |  |            |            |         |                      |       |      |             |                   |             |             |
| • Explain the risks and benefits of incorporating biologic agents in the adjuvant and metastatic settings   |                             |  |            |            |         |                      |       |      | 1           |                   |             |             |
| EFFECTIVENESS OF THE INDIVIDUAL FACULTY MEMBERS   |                             |  |            |            |         |                      |       |      |             |                   |             |             |
| Faculty   | Knowledge of subject matter |  |            |            |         |                      | educa | ator |             |                   |             |             |
| Robert W Carlson, MD  | 5                           | 4  | 3          | 2          | 1       | 5                    | 4     | 3    | 2           | 1                 |             |             |
| William J Gradishar, MD   | 5                           | 4  | 3          | 2          | 1       | 5                    | 4     | 3    | 2           | 1                 |             |             |
| Enza Esposito Luke, RN, MSN, ONP  | 5                           | 4  | 3          | 2          | 1       | 5                    | 4     | 3    | 2           | 1                 |             |             |
| Steven Shak, MD   | 5                           | 4  | 3          | 2          | 1       | 5                    | 4     | 3    | 2           | 1                 |             |             |
| Eric P Winer, MD  | 5                           | 4  | 3          | 2          | 1       | 5                    | 4     | 3    | 2           | 1                 |             |             |
| OVERALL EFFECTIVENESS OF  | THE AC                      | :TI\   | /ITY       | ,          |         |                      |       |      |             |                   |             |             |
| Will assist me in improving patient care. Fulfilled my educational needs Avoided commercial bias or influence   |                             |  |            |            |         |                      |       | !    | 5 4         | 4 3<br>4 3<br>4 3 | 2<br>2<br>2 | 1<br>1<br>1 |
| IMPACT OF THE ACTIVITY  |                             |  |            |            |         |                      |       |      |             |                   |             |             |
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| The information presented (check a  | II that app                 | ıly):  |            |            |         |                      |       |      |             |                   |             |             |
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| TIMITACT OF THE ACTIVITY (CONTINUED)  |  |
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| Will the information presented cause you to make an   | y changes in your practice?  |
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|   |  |
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| Please list any other topics that would be of interest  | to you for future educational activities:  |
|   |  |
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