# Breast Cancer®

## An Audio Review Journal for Nurses Management of Breast Cancer in the Adjuvant and Metastatic Settings

EDITOR

Neil Love, MD

#### FACULTY

Lisa Carey, MD Generosa Grana, MD Jenny C Chang, MD Additional comments by two women with breast cancer





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#### BREAST CANCER UPDATE FOR NURSES

#### 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 STATEMENTS

#### CNA/ANCC

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This is an audio CNE activity. This book contains a continuing nursing education post-test, and the corresponding website **BreastCancerUpdate.com/Nurses** 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 December 2006 through December 2007, participants should read the learning objectives and faculty disclosures, listen to the CDs, review the internet references and complete the Post-test and Evaluation Form located in the back of this book or on the **BreastCancerUpdate.com/Nurses** website and mail or fax the evaluation form to Postgraduate Institute for Medicine.

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#### **CNE INFORMATION**



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#### Breast Cancer Update for Nurses - Issue 5, 2006

#### QUESTIONS (PLEASE CIRCLE ANSWER):

- 1. The ECOG-E2100 trial randomly assigned patients with metastatic breast cancer to paclitaxel with or without \_\_\_\_\_.
  - a. Capecitabine
  - b. Bevacizumab
  - c. Cetuximab
  - d. Gemcitabine
- 2. Which of the following is not associated with the use of *nab* paclitaxel?
  - a. Fewer allergic reactions
  - b. Premedication
  - c. Shorter infusion times
  - d. Chemotherapy-induced peripheral neuropathy

## 3. Which of the following are potential complications related to the use of bevacizumab?

- a. Increased bleeding events
- b. Hypertension
- c. Proteinuria
- d. All of the above
- 4. Which tumor characteristics are indicated for use of the Oncotype DX<sup>™</sup> assay?
  - a. ER-negative, node-negative
  - b. ER-negative, node-positive
  - c. ER-positive, node-negative
  - d. ER-positive, node-positive
- Lapatinib is an oral agent that targets the HER2 and EGF receptors and has been evaluated in patients who progress on \_\_\_\_\_\_.
  - a. Bevacizumab
  - b. Trastuzumab
  - c. Erlotinib
  - d. Gefitinib

- 6. Which of the following adverse events occurs less frequently with aromatase inhibitors than with tamoxifen?
  - a. Endometrial cancer
  - b. Thromboembolic events
  - c. Fractures
  - d. Both a and b
- 7. For patients taking trastuzumab who have been treated with anthracyclinebased chemotherapy, the increased risk for experiencing heart failure is \_\_\_\_\_
  - a. Less than one percent
  - b. About four percent
  - c. About 15 percent
  - d. About 25 percent
- 8. Patients with node-negative, ER-positive disease and a high recurrence score according to the Oncotype DX assay have been shown to benefit from adjuvant
  - a. Fulvestrant
  - b. Anastrozole
  - c. Chemotherapy
  - d. All of the above
- 9. Which of the following therapies does not interact directly with the estrogen receptor?
  - a. Fulvestrant
  - b. Tamoxifen
  - c. Anastrozole
- 10. Which endocrine agent is given by intramuscular injection?
  - a. Tamoxifen
  - b. Anastrozole
  - c. Letrozole
  - d. Fulvestrant

#### Breast Cancer Update for Nurses — Issue 5, 2006

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Please answer the following questions by circling the appropriate rating:				
5 =	4 =	3 =	2 =	1 =
Outstanding	Good	Satisfactory	Fair	Poor

#### EXTENT TO WHICH PROGRAM ACTIVITIES MET THE IDENTIFIED GOAL

•	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	4	3	2	1

#### 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 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

#### EFFECTIVENESS OF THE INDIVIDUAL FACULTY MEMBERS

Faculty	Knowledge of subject matte	r Effectiveness as an educator
Lisa Carey, MD	5 4 3 2 1	5 4 3 2 1
Jenny C Chang, MD	5 4 3 2 1	5 4 3 2 1
Generosa Grana, MD	5 4 3 2 1	5 4 3 2 1

#### OVERALL EFFECTIVENESS OF THE ACTIVITY

Will assist me in improving patient care	5	4	3	2	1
Fulfilled my educational needs.	. 5	4	3	2	1
Avoided commercial bias or influence	. 5	4	3	2	1

#### IMPACT OF THE ACTIVITY

#### The information presented (check all that apply):

□ Reinforced my current practice/treatment habits. □ Enhanced my current knowledge base.

LUAI		

#### Breast Cancer Update for Nurses - Issue 5, 2006

IMPACT OF THE ACTIVITY (CONTINUED)         Will the information presented cause you to make an         Yes       No	y changes in your practice?
If yes, please describe any change(s) you plan to ma	ke in your practice as a result of this activity:
How committed are you to making these changes?	
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Do you feel future activities on this subject matter are	e necessary and/or important to your practice?
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