

The original live presentation was recorded at an international lung cancer conference in August 2009.

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Individualizing Treatments for Thoracic Malignancies

STATEMENT OF NEED

Almost 50% of patients diagnosed with NSCLC already have stage 4 disease, and in those with stage 4 disease, only 2% will be alive in one year.¹ After basic diagnostic testing, each patient needs to be tested for genetic alterations such as EGFR, K-RAS, EML4-ALK, and BRAF. Targeting these specific alterations allows NSCLC to be treated as multiple disease entities that can be individually managed with specific agents. Novel agents targeting specific pathways associated with apoptosis, cell proliferation, angiogenesis, and other mechanisms have emerged as a separate and unique therapeutic class delivering promising results in a vast number of malignancies.² Clinicians need to know the evidence for targeted therapies—how they may improve outcomes and possibly reduce overall side effect burden. Faculty in this interactive case-based symposium will translate the latest evidence on gene alterations and emerging management strategies to improve individualized treatments and optimize outcomes of patients with NSCLC.

¹ Lung Cancer in the United States: Facts. National Lung Cancer Partnership; 2008.

² Alvarez M, Roman E, Santos ES, Raez LE. New targets for non-small-cell lung cancer therapy. *Expert Rev Anticancer Ther* 2007;7:1423-1437.

ACTIVITY GOAL

To provide an evidence-based review of best practices for diagnosis, treatment, and management of NSCLC that can be integrated into clinical practice for improved patient outcomes.

LEARNING OBJECTIVES

- Institute behavioral changes to routinely screen patients for genetic alterations that result in improved diagnosis of non-small cell lung cancer.
- Apply results of genetic testing to the development of targeted treatments for patients with non-small cell lung cancer.
- Compare and contrast new and individualized treatments for non-small cell lung cancer.

The following learning objectives pertain only to those who request CNE credit:

- Describe behavioral changes to routinely screen patients for genetic alterations that may result in improved diagnosis of NSCLC.
- Identify link between results of genetic testing and the development of targeted treatments for patients with NSCLC.
- Compare and contrast new and individualized treatments for NSCLC.

TARGET AUDIENCE

Physicians, nurse practitioners, nurses, pharmacists, and allied health professionals involved in delivering care to patients diagnosed with lung cancer.

COMMERCIAL SUPPORTER

This activity is supported by unrestricted educational grants from Pfizer Inc. and OSI Pharmaceuticals, Inc.

CME Outfitters, LLC, has also provided financial support for this activity.

Based on a Live Symposium held on August 3, 2009, in San Francisco, CA.

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