

# Oncology Q&A: Addressing Common Questions Posed by Patients with Metastatic Triple-Negative Breast Cancer

*A Live Webinar for Patients, Developed in Partnership with the Triple Negative Breast Cancer Foundation*

**Wednesday, November 13, 2024**

**6:00 PM – 7:00 PM ET**

## **Faculty**

**Lisa A Carey, MD, ScM, FASCO**

**Rita Nanda, MD**

## **Moderator**

**Neil Love, MD**

# Faculty



**Lisa A Carey, MD, ScM, FASCO**  
L Richardson and Marilyn Jacobs Preyer  
Distinguished Professor for  
Breast Cancer Research  
Deputy Director for Clinical Sciences  
Lineberger Comprehensive Cancer Center  
University of North Carolina  
Chapel Hill, North Carolina



**MODERATOR**  
**Neil Love, MD**  
Research To Practice  
Miami, Florida



**Rita Nanda, MD**  
Director, Breast Oncology  
Associate Professor of Medicine  
Section of Hematology/Oncology  
The University of Chicago  
Chicago, Illinois

# Survey Participants



**Adam M Brufsky, MD, PhD**  
Professor of Medicine  
UPMC Hillman Cancer Center  
Department of Medicine  
University of Pittsburgh  
Pittsburgh, Pennsylvania



**Priyanka Sharma, MD**  
Frank B Tyler Professor in Cancer Research  
Division of Medical Oncology, Department of  
Internal Medicine  
Co-Program Leader  
Drug Discovery, Delivery and Experimental  
Therapeutics Program  
The University of Kansas Cancer Center  
Westwood, Kansas



**Joyce O'Shaughnessy, MD**  
Celebrating Women Chair in Breast  
Cancer Research  
Baylor University Medical Center  
Chair, Breast Disease Committee  
Sarah Cannon Research Institute  
Dallas, Texas



**Seth Wander, MD, PhD**  
Assistant Professor of Medicine  
Harvard Medical School  
Attending Physician  
Massachusetts General Hospital  
Boston, Massachusetts

# Commercial Support

This activity is supported by an educational grant from Gilead Sciences Inc.

## Dr Love — Disclosures

**Dr Love** is president and CEO of Research To Practice. Research To Practice receives funds in the form of educational grants to develop CME activities from the following companies: AbbVie Inc, Adaptive Biotechnologies Corporation, ADC Therapeutics, Agios Pharmaceuticals Inc, Alexion Pharmaceuticals, Amgen Inc, Array BioPharma Inc, a subsidiary of Pfizer Inc, Arvinas, Astellas, AstraZeneca Pharmaceuticals LP, Aveo Pharmaceuticals, Bayer HealthCare Pharmaceuticals, BeiGene Ltd, BeyondSpring Pharmaceuticals Inc, Black Diamond Therapeutics Inc, Blueprint Medicines, Boehringer Ingelheim Pharmaceuticals Inc, Bristol Myers Squibb, Celgene Corporation, Clovis Oncology, Coherus BioSciences, CTI BioPharma, a Sobi Company, Daiichi Sankyo Inc, Eisai Inc, Elevation Oncology Inc, EMD Serono Inc, Epizyme Inc, Exact Sciences Corporation, Exelixis Inc, Five Prime Therapeutics Inc, Foundation Medicine, G1 Therapeutics Inc, Genentech, a member of the Roche Group, Genmab US Inc, Geron Corporation, Gilead Sciences Inc, Grail Inc, GSK, Halozyme Inc, Helsinn Healthcare SA, Hologic Inc, ImmunoGen Inc, Incyte Corporation, Ipsen Biopharmaceuticals Inc, Janssen Biotech Inc, administered by Janssen Scientific Affairs LLC, Jazz Pharmaceuticals Inc, Karyopharm Therapeutics, Kite, A Gilead Company, Kronos Bio Inc, Legend Biotech, Lilly, Loxo Oncology Inc, a wholly owned subsidiary of Eli Lilly & Company, MEI Pharma Inc, Merck, Mersana Therapeutics Inc, Mirati Therapeutics Inc, Mural Oncology Inc, Natera Inc, Novartis, Novartis Pharmaceuticals Corporation on behalf of Advanced Accelerator Applications, Novocure Inc, Nuvalent, Oncopeptides, Pfizer Inc, Pharmacyclics LLC, an AbbVie Company, Puma Biotechnology Inc, Regeneron Pharmaceuticals Inc, R-Pharm US, Sanofi, Seagen Inc, Servier Pharmaceuticals LLC, SpringWorks Therapeutics Inc, Stemline Therapeutics Inc, Sumitomo Dainippon Pharma Oncology Inc, Syndax Pharmaceuticals, Taiho Oncology Inc, Takeda Pharmaceuticals USA Inc, TerSera Therapeutics LLC, Tesaro, A GSK Company, TG Therapeutics Inc, Turning Point Therapeutics Inc, Verastem Inc, and Zymeworks Inc.

# Research To Practice CME Planning Committee Members, Staff and Reviewers

Planners, scientific staff and independent reviewers for Research To Practice have no relevant conflicts of interest to disclose.

# Dr Carey — Disclosures Faculty

No relevant conflicts of interest to disclose.

# Dr Nanda — Disclosures Faculty

<b>Advisory Committees</b>	AstraZeneca Pharmaceuticals LP, Daiichi Sankyo Inc, Exact Sciences Corporation, GE Healthcare, Gilead Sciences Inc, Guardant Health, Merck, Moderna, Novartis, OBI Pharma Inc, Pfizer Inc, Sanofi, Seagen Inc, Stemline Therapeutics Inc, Summit Therapeutics
<b>Contracted Research</b>	Arvinas, AstraZeneca Pharmaceuticals LP, Bristol Myers Squibb, Corcept Therapeutics, Genentech, a member of the Roche Group, Gilead Sciences Inc, GSK, Merck, Novartis, OBI Pharma Inc, Pfizer Inc, Relay Therapeutics, Seagen Inc, Sun Pharmaceutical Industries Ltd, Taiho Oncology Inc



# Dr Brufsky — Disclosures

## Survey Participant

<b>Consulting Agreements</b>	Agendia Inc, AstraZeneca Pharmaceuticals LP, BriaCell, Daiichi Sankyo Inc, Genentech, a member of the Roche Group, Gilead Sciences Inc, Jazz Pharmaceuticals Inc, Lilly, Merck, Myriad Genetic Laboratories Inc, Natera Inc, Novartis, Pfizer Inc, Puma Biotechnology Inc, Sanofi
------------------------------	---

# Dr O'Shaughnessy — Disclosures

## Survey Participant

<b>Advisory Committees and Consulting Agreements</b>	Agendia Inc, Aptitude Health, AstraZeneca Pharmaceuticals LP, BioNTech SE, Byondis, Caris Life Sciences, Daiichi Sankyo Inc, DAVA Oncology, Eisai Inc, Exact Sciences Corporation, Fishawack Health, G1 Therapeutics Inc, Genentech, a member of the Roche Group, Gilead Sciences Inc, Guardant Health, Lilly, Loxo Oncology Inc, a wholly owned subsidiary of Eli Lilly & Company, Menarini Group, Merck, Mersana Therapeutics Inc, Novartis, Ontada, Pfizer Inc, Pierre Fabre, Puma Biotechnology Inc, Roche Laboratories Inc, Samsung Bioepis, Sanofi, Seagen Inc, Stemline Therapeutics Inc, Tempus, Veru Inc
--	---

# Dr Sharma — Disclosures

## Survey Participant

<b>Consulting Agreements</b>	AstraZeneca Pharmaceuticals LP, Genzyme Corporation, Gilead Sciences Inc, GSK, Merck, Novartis, Pfizer Inc, Sanofi
<b>Contracted Research</b>	Gilead Sciences Inc, Merck, Novartis
<b>Stock Options/Stock — Public Company</b>	Amgen Inc, Janssen Biotech Inc, Johnson & Johnson Pharmaceuticals, Sanofi

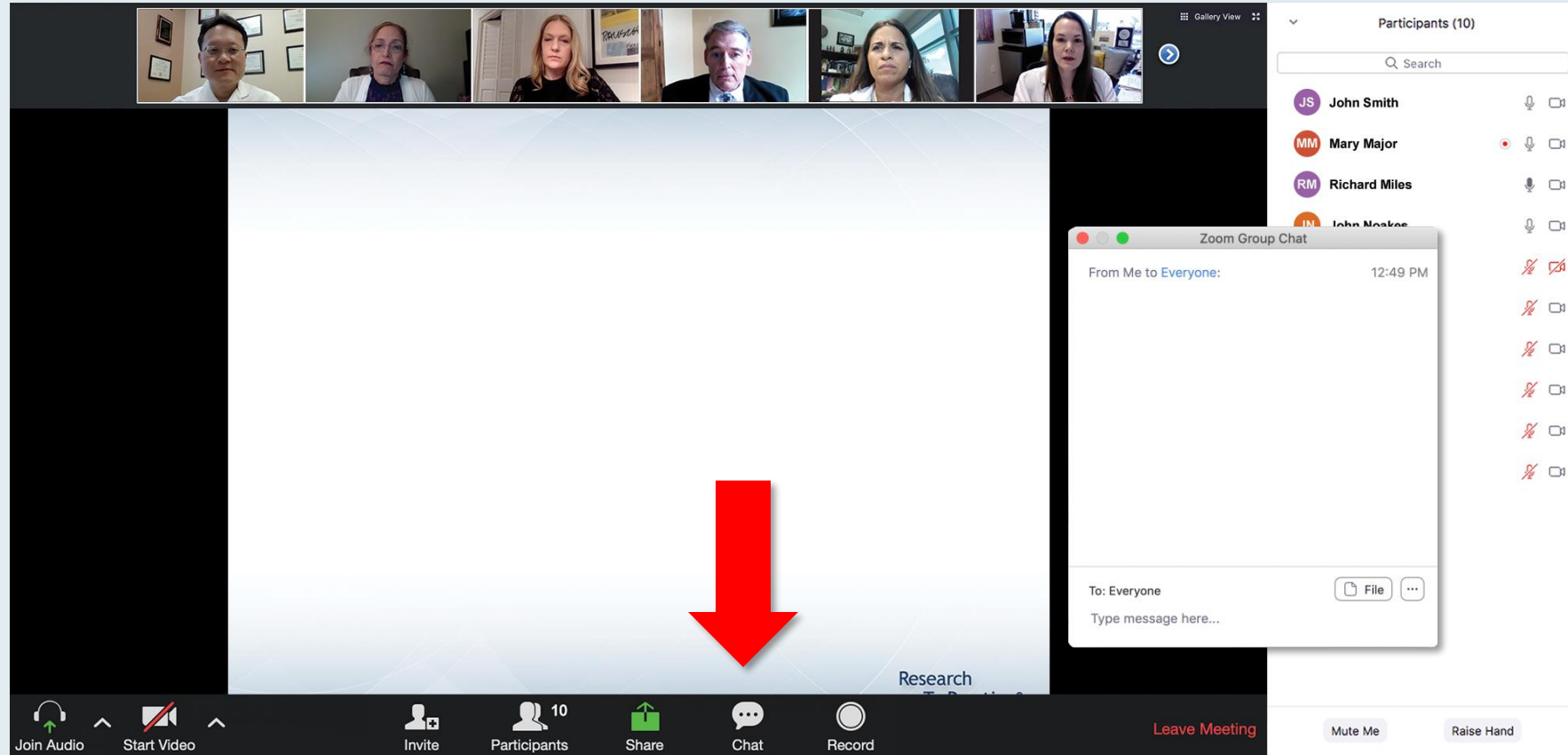
# Dr Wander — Disclosures

## Survey Participant

<b>Advisory Committees</b>	Biovica International AB, Genentech, a member of the Roche Group, Hologic Inc, Pfizer Inc, Puma Biotechnology Inc, Regor Therapeutics Group
<b>Consulting Agreements</b>	AstraZeneca Pharmaceuticals LP, Foundation Medicine, Lilly, Novartis
<b>Contracted Research</b>	Genentech, a member of the Roche Group, Lilly, Nuvation Bio, Pfizer Inc, Regor Therapeutics Group, Sermonix Pharmaceuticals
<b>Data and Safety Monitoring Board/Committee</b>	Regor Therapeutics Group
<b>Speakers Bureaus</b>	Guardant Health, Lilly
<b>Nonrelevant Financial Relationship</b>	2nd.MD

**This educational activity contains discussion of non-FDA-approved uses of agents and regimens. Please refer to official prescribing information for each product for approved indications.**

# We Encourage Patients to Submit Questions



Feel free to submit questions now before the program begins and throughout the program.

# Familiarizing Yourself with the Zoom Interface

## Expand chat submission box

The screenshot shows a Zoom meeting interface. At the top, there are video thumbnails for participants: RTP Coordinat..., Kirsten Miller, RTP Mike Rivera, and Lisa Suarez. A 'Recording...' indicator is visible. The main content is a slide titled 'Meet The Professor Program Participating Faculty' with six faculty members listed:

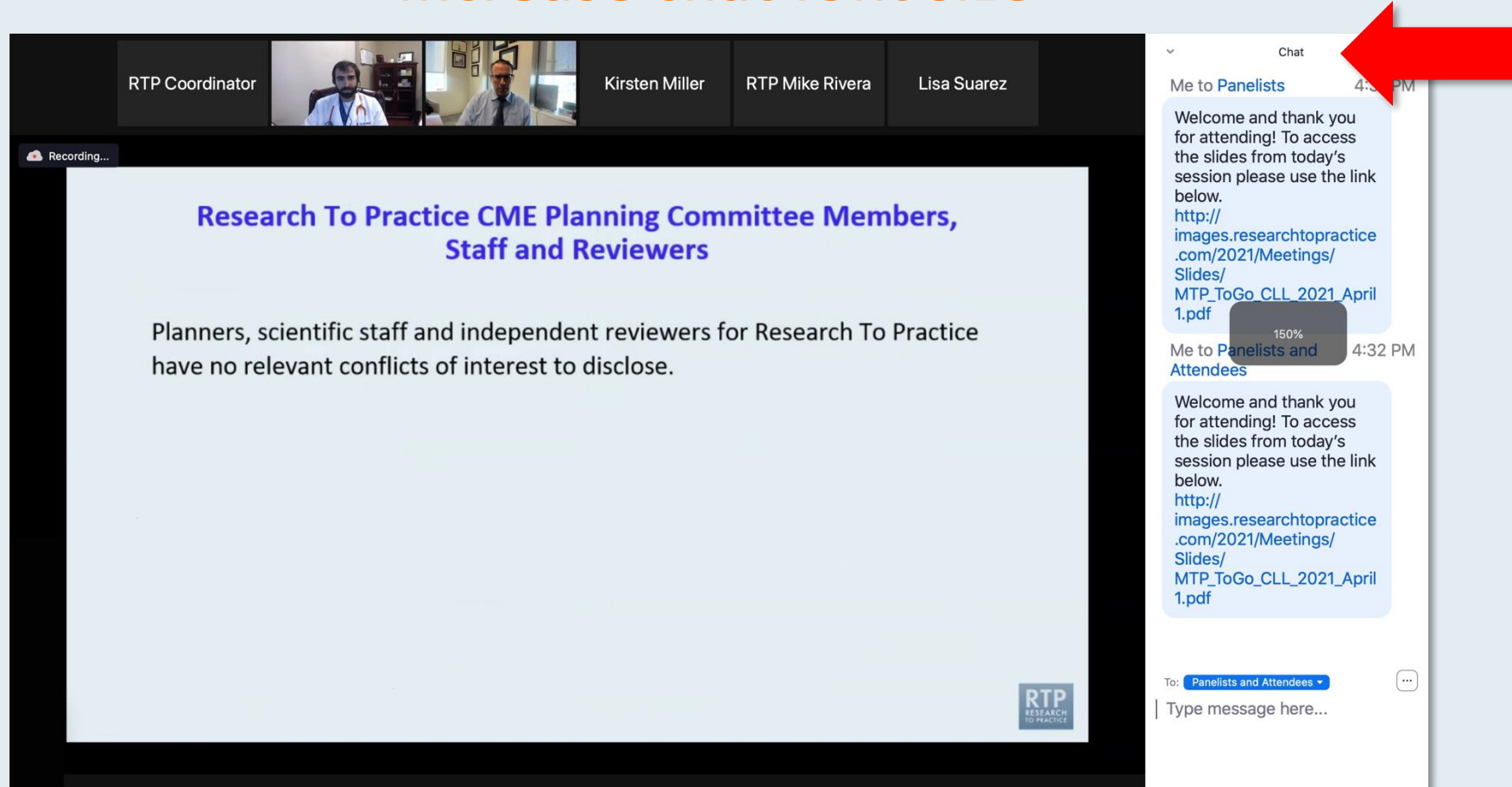
- Nancy L Bartlett, MD**  
Professor of Medicine  
Koman Chair in Medical Oncology  
Washington University School of Medicine  
St Louis, Missouri
- Jonathan W Friedberg, MD, MMSc**  
Samuel E Durand Professor of Medicine  
Director, James P Wilmot Cancer Institute  
University of Rochester  
Rochester, New York
- Carla Casulo, MD**  
Associate Professor of Medicine  
Division of Hematology/Oncology  
Director, Hematology/Oncology Fellowship Program  
University of Rochester  
Wilmot Cancer Institute  
Rochester, New York
- Brian T Hill, MD, PhD**  
Director, Lymphoid Malignancy Program  
Cleveland Clinic Taussig Cancer Institute  
Cleveland, Ohio
- Christopher R Flowers, MD, MS**  
Chair, Professor  
Department of Lymphoma/Myeloma  
The University of Texas MD Anderson Cancer Center  
Houston, Texas
- Brad S Kahl, MD**  
Professor of Medicine  
Washington University School of Medicine  
Director, Lymphoma Program  
Siteman Cancer Center  
St Louis, Missouri

The chat window on the right shows two messages from 'Me to Panelists' and 'Me to Panelists and Attendees' at 4:31 PM and 4:32 PM respectively. Each message contains a welcome message and a link to a PDF: [http://images.researchtopractice.com/2021/Meetings/Slides/MTP\\_ToGo\\_CLL\\_2021\\_April1.pdf](http://images.researchtopractice.com/2021/Meetings/Slides/MTP_ToGo_CLL_2021_April1.pdf). A red arrow points to the white line above the chat submission box, indicating where to drag to expand the box.

Drag the white line above the submission box up to create more space for your message.

# Familiarizing Yourself with the Zoom Interface

## Increase chat font size



The screenshot displays a Zoom meeting interface. At the top, there are video thumbnails for participants: RTP Coordinator, Kirsten Miller, RTP Mike Rivera, and Lisa Suarez. Below the thumbnails is a slide titled "Research To Practice CME Planning Committee Members, Staff and Reviewers". The slide content reads: "Planners, scientific staff and independent reviewers for Research To Practice have no relevant conflicts of interest to disclose." A "Recording..." indicator is visible in the top left corner of the slide area. On the right side, the chat window is open, showing two messages from "Me to Panelists" and "Me to Panelists and Attendees". A red arrow points to the chat font size adjustment icon (a small square with a plus sign) located in the top right corner of the chat window. The chat messages include a welcome message and a link to a PDF document: [http://images.researchtopractice.com/2021/Meetings/Slides/MTP\\_ToGo\\_CLL\\_2021\\_April\\_1.pdf](http://images.researchtopractice.com/2021/Meetings/Slides/MTP_ToGo_CLL_2021_April_1.pdf). The chat window also shows a "150%" font size indicator and a "To: Panelists and Attendees" dropdown menu.

**Press Command (for Mac) or Control (for PC) and the + symbol.  
You may do this as many times as you need for readability.**



# Patients in the Audience, Please Complete the Pre- and Postmeeting Surveys

The screenshot shows a Zoom meeting with a gallery view of participants at the top. The main content area displays a slide titled "Meet The Prof..." with the subtitle "Optimizing the Selection and Management of Therapy for Patients with Gastrointestinal Cancer". The date and time are "Wednesday, August 25, 5:00 PM – 6:00 PM". The speaker is identified as "Faculty Wells A Messersmith, MD" and the moderator as "Neil Love, MD". A "Quick Survey" overlay is active, listing several treatment combinations with radio button options: Carfuzomb +/- dexamethasone, Pomalidomide +/- dexamethasone, Carfuzomb + pomalidomide +/- dexamethasone, Elotuzumab + lenalidomide +/- dexamethasone, Elotuzumab + pomalidomide +/- dexamethasone, Daratumumab + lenalidomide +/- dexamethasone, Daratumumab + pomalidomide +/- dexamethasone, Daratumumab + bortezomib +/- dexamethasone, and Ixazomb + Rd. A "Submit" button is at the bottom of the survey. A "Participants (10)" list is visible on the right, and the Zoom control bar is at the bottom.

The screenshot shows a Zoom meeting with a gallery view of participants at the top. The main content area displays a slide titled "Regulatory and reimbursement issues aside, which would you recommend for a 65-year-old patient with clear cell renal cell carcinoma (ccRCC) if follow-up 3 years later is found to have asymptomatic (PS 0)?" A "Quick Poll" overlay is active, listing eight options with radio button options: Nivolumab/ipilimumab, Avelumab/axitinib, Pembrolizumab/axitinib, Pembrolizumab/lenvatinib, Nivolumab/cabozantinib, Tyrosine kinase inhibitor (TKI) monotherapy, Anti-PD-1/PD-L1 monotherapy, and Other. A "Submit" button is at the bottom of the poll. A "Participants (10)" list is visible on the right, and the Zoom control bar is at the bottom.

# Oncology Q&A: Addressing Common Questions Posed by Patients with Metastatic Triple-Negative Breast Cancer

*A Live Webinar for Patients, Developed in Partnership with the Triple Negative Breast Cancer Foundation*

**Wednesday, November 13, 2024**

**6:00 PM – 7:00 PM ET**

## **Faculty**

**Lisa A Carey, MD, ScM, FASCO**

**Rita Nanda, MD**

## **Moderator**

**Neil Love, MD**

# We're here for you

What is triple negative breast cancer?

[Learn the basics about TNBC →](#)



## Thursdays with TNBC Friends

Thursday, November 21st - 7pm ET / 4pm PT

Join TNBC Foundation and fellow triple negative breast cancer thrivers for a virtual meet and greet on Zoom the last Thursday of every month.

[Register →](#)

# Faculty



**Lisa A Carey, MD, ScM, FASCO**  
L Richardson and Marilyn Jacobs Preyer  
Distinguished Professor for  
Breast Cancer Research  
Deputy Director for Clinical Sciences  
Lineberger Comprehensive Cancer Center  
University of North Carolina  
Chapel Hill, North Carolina



**MODERATOR**  
**Neil Love, MD**  
Research To Practice  
Miami, Florida



**Rita Nanda, MD**  
Director, Breast Oncology  
Associate Professor of Medicine  
Section of Hematology/Oncology  
The University of Chicago  
Chicago, Illinois



# Survey Participants



**Adam M Brufsky, MD, PhD**  
Professor of Medicine  
UPMC Hillman Cancer Center  
Department of Medicine  
University of Pittsburgh  
Pittsburgh, Pennsylvania



**Priyanka Sharma, MD**  
Frank B Tyler Professor in Cancer Research  
Division of Medical Oncology, Department of  
Internal Medicine  
Co-Program Leader  
Drug Discovery, Delivery and Experimental  
Therapeutics Program  
The University of Kansas Cancer Center  
Westwood, Kansas

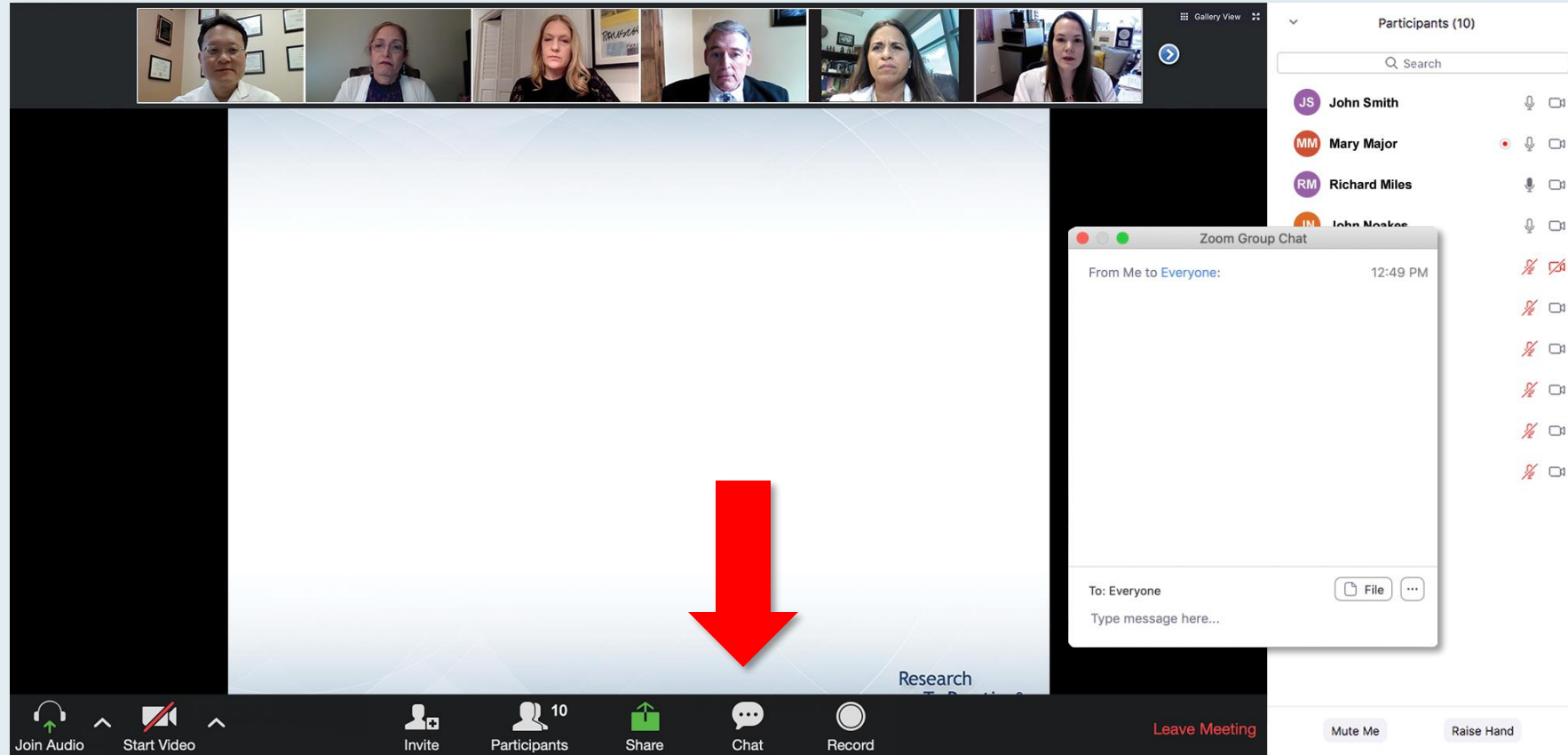


**Joyce O'Shaughnessy, MD**  
Celebrating Women Chair in Breast  
Cancer Research  
Baylor University Medical Center  
Chair, Breast Disease Committee  
Sarah Cannon Research Institute  
Dallas, Texas



**Seth Wander, MD, PhD**  
Assistant Professor of Medicine  
Harvard Medical School  
Attending Physician  
Massachusetts General Hospital  
Boston, Massachusetts

# We Encourage Patients to Submit Questions



Feel free to submit questions now before the program begins and throughout the program.

# Patients in the Audience, Please Complete the Pre- and Postmeeting Surveys

The screenshot shows a Zoom meeting with a gallery view of participants at the top. The main content area displays a slide titled "Meet The Prof..." with the subtitle "Optimizing the Selection and Management of Therapy for Patients with Gastrointestinal Cancer". The date and time are "Wednesday, August 25, 5:00 PM – 6:00 PM". The speaker is identified as "Faculty Wells A Messersmith, MD" and the moderator as "Neil Love, MD". A "Quick Survey" overlay is active, listing several treatment combinations with radio button options: Carfuzomb +/- dexamethasone, Pomalidomide +/- dexamethasone, Carfuzomb + pomalidomide +/- dexamethasone, Elotuzumab + lenalidomide +/- dexamethasone, Elotuzumab + pomalidomide +/- dexamethasone, Daratumumab + lenalidomide +/- dexamethasone, Daratumumab + pomalidomide +/- dexamethasone, Daratumumab + bortezomib +/- dexamethasone, and Ixazomb + Rd. A "Submit" button is at the bottom of the survey. On the right, a "Participants (10)" list shows names and icons for John Smith, Mary Major, Richard Miles, John Noakes, Alice Suarez, Jane Perez, Robert Stiles, Juan Fernandez, Ashok Kumar, and Jeremy Smith. The bottom toolbar includes "Join Audio", "Start Video", "Invite", "Participants", "Share", "Chat", "Record", "Leave Meeting", "Mute Me", and "Raise Hand".

The screenshot shows a Zoom meeting with a gallery view of participants at the top. The main content area displays a slide titled "Regulatory and reimbursement issues aside, which would you recommend for a 65-year-old patient with clear cell renal cell carcinoma (ccRCC) if follow-up 3 years later is found to have asymptomatic (PS 0)?" A "Quick Poll" overlay is active, listing eight options with radio button options: Nivolumab/ipilimumab, Avelumab/axitinib, Pembrolizumab/axitinib, Pembrolizumab/lenvatinib, Nivolumab/cabozantinib, Tyrosine kinase inhibitor (TKI) monotherapy, Anti-PD-1/PD-L1 monotherapy, and Other. A "Submit" button is at the bottom of the poll. On the right, a "Participants (10)" list shows names and icons for John Smith, Mary Major, Richard Miles, John Noakes, Alice Suarez, Jane Perez, Robert Stiles, Juan Fernandez, Ashok Kumar, and Jeremy Smith. The bottom toolbar includes "Join Audio", "Start Video", "Invite", "Participants", "Share", "Chat", "Record", "Leave Meeting", "Mute Me", and "Raise Hand".

# Oncology Q&A: Addressing Common Questions Posed by Patients with Metastatic Triple-Negative Breast Cancer

*A Live Webinar for Patients, Developed in Partnership with the Triple Negative Breast Cancer Foundation*

**Wednesday, November 13, 2024**

**6:00 PM – 7:00 PM ET**

## **Faculty**

**Lisa A Carey, MD, ScM, FASCO**

**Rita Nanda, MD**

## **Moderator**

**Neil Love, MD**



# Dr Carey — Disclosures

No relevant conflicts of interest to disclose.

# Dr Nanda — Disclosures

<b>Advisory Committees</b>	AstraZeneca Pharmaceuticals LP, Daiichi Sankyo Inc, Exact Sciences Corporation, GE Healthcare, Gilead Sciences Inc, Guardant Health, Merck, Moderna, Novartis, OBI Pharma Inc, Pfizer Inc, Sanofi, Seagen Inc, Stemline Therapeutics Inc, Summit Therapeutics
<b>Contracted Research</b>	Arvinas, AstraZeneca Pharmaceuticals LP, Bristol Myers Squibb, Corcept Therapeutics, Genentech, a member of the Roche Group, Gilead Sciences Inc, GSK, Merck, Novartis, OBI Pharma Inc, Pfizer Inc, Relay Therapeutics, Seagen Inc, Sun Pharmaceutical Industries Ltd, Taiho Oncology Inc

## Dr Love — Disclosures

**Dr Love** is president and CEO of Research To Practice. Research To Practice receives funds in the form of educational grants to develop CME activities from the following companies: AbbVie Inc, Adaptive Biotechnologies Corporation, ADC Therapeutics, Agios Pharmaceuticals Inc, Alexion Pharmaceuticals, Amgen Inc, Array BioPharma Inc, a subsidiary of Pfizer Inc, Arvinas, Astellas, AstraZeneca Pharmaceuticals LP, Aveo Pharmaceuticals, Bayer HealthCare Pharmaceuticals, BeiGene Ltd, BeyondSpring Pharmaceuticals Inc, Black Diamond Therapeutics Inc, Blueprint Medicines, Boehringer Ingelheim Pharmaceuticals Inc, Bristol Myers Squibb, Celgene Corporation, Clovis Oncology, Coherus BioSciences, CTI BioPharma, a Sobi Company, Daiichi Sankyo Inc, Eisai Inc, Elevation Oncology Inc, EMD Serono Inc, Epizyme Inc, Exact Sciences Corporation, Exelixis Inc, Five Prime Therapeutics Inc, Foundation Medicine, G1 Therapeutics Inc, Genentech, a member of the Roche Group, Genmab US Inc, Geron Corporation, Gilead Sciences Inc, Grail Inc, GSK, Halozyme Inc, Helsinn Healthcare SA, Hologic Inc, ImmunoGen Inc, Incyte Corporation, Ipsen Biopharmaceuticals Inc, Janssen Biotech Inc, administered by Janssen Scientific Affairs LLC, Jazz Pharmaceuticals Inc, Karyopharm Therapeutics, Kite, A Gilead Company, Kronos Bio Inc, Legend Biotech, Lilly, Loxo Oncology Inc, a wholly owned subsidiary of Eli Lilly & Company, MEI Pharma Inc, Merck, Mersana Therapeutics Inc, Mirati Therapeutics Inc, Mural Oncology Inc, Natera Inc, Novartis, Novartis Pharmaceuticals Corporation on behalf of Advanced Accelerator Applications, Novocure Inc, Nuvalent, Oncopeptides, Pfizer Inc, Pharmacyclics LLC, an AbbVie Company, Puma Biotechnology Inc, Regeneron Pharmaceuticals Inc, R-Pharm US, Sanofi, Seagen Inc, Servier Pharmaceuticals LLC, SpringWorks Therapeutics Inc, Stemline Therapeutics Inc, Sumitomo Dainippon Pharma Oncology Inc, Syndax Pharmaceuticals, Taiho Oncology Inc, Takeda Pharmaceuticals USA Inc, TerSera Therapeutics LLC, Tesaro, A GSK Company, TG Therapeutics Inc, Turning Point Therapeutics Inc, Verastem Inc, and Zymeworks Inc.

## **Commercial Support**

This activity is supported by an educational grant from Gilead Sciences Inc.

## **Research To Practice CME Planning Committee Members, Staff and Reviewers**

Planners, scientific staff and independent reviewers for Research To Practice have no relevant conflicts of interest to disclose.

**This educational activity contains discussion of non-FDA-approved uses of agents and regimens. Please refer to official prescribing information for each product for approved indications.**

# Agenda: Oncology Q&A

## Metastatic Triple-Negative Breast Cancer (TNBC)

- ▶ **PLAY** **Stages of TNBC; Recurrence After Adjuvant Treatment**
- ▶ **PLAY** **Long-Term Outcomes with Metastatic TNBC**
- ▶ **PLAY** **Side Effects and Complications of Treatment**
- ▶ **PLAY** **Dose Reduction**
- ▶ **PLAY** **Working While Receiving Treatment**
- ▶ **PLAY** **Support for Minor Children and Grandchildren**
- ▶ **PLAY** **Second Opinions and Self Advocacy**
- ▶ **PLAY** **Recording Clinic Visits; Complementary Therapies; Nutrition**
- ▶ **PLAY** **Living Wills and Advanced Directives**



# Agenda: Oncology Q&A

## Metastatic Triple-Negative Breast Cancer (TNBC)

- ▶ PLAY Stages of TNBC; Recurrence After Adjuvant Treatment**
- ▶ PLAY Long-Term Outcomes with Metastatic TNBC**
- ▶ PLAY Side Effects and Complications of Treatment**
- ▶ PLAY Dose Reduction**
- ▶ PLAY Working While Receiving Treatment**
- ▶ PLAY Support for Minor Children and Grandchildren**
- ▶ PLAY Second Opinions and Self Advocacy**
- ▶ PLAY Recording Clinic Visits; Complementary Therapies; Nutrition**
- ▶ PLAY Living Wills and Advanced Directives**



# Stages of TNBC; Recurrence After Adjuvant Treatment



# Agenda: Oncology Q & A

## Metastatic Triple-Negative Breast Cancer (TNBC)

▶ **PLAY** Stages of TNBC; Recurrence After Adjuvant Treatment

▶ **PLAY** Long-Term Outcomes with Metastatic TNBC

▶ **PLAY** Side Effects and Complications of Treatment

▶ **PLAY** Dose Reduction

▶ **PLAY** Working While Receiving Treatment

▶ **PLAY** Support for Minor Children and Grandchildren

▶ **PLAY** Second Opinions and Self Advocacy

▶ **PLAY** Recording Clinic Visits; Complementary Therapies; Nutrition

▶ **PLAY** Living Wills and Advanced Directives

# Long-Term Outcomes with Metastatic TNBC



# Common Systemic Treatments for Metastatic TNBC

## Chemotherapy

- Anthracyclines
- Taxanes

## Immunotherapy

- Pembrolizumab (Keytruda<sup>®</sup>)
- Atezolizumab (Tecentriq<sup>®</sup>)







## Antibody-drug conjugates

- Sacituzumab govitecan (Trodelvy<sup>®</sup>)
- Trastuzumab deruxtecan (Enhertu<sup>®</sup>) (HER2 low)

## PARP inhibitors (for TNBC with BRCA mutations)







- Olaparib (Lynparza<sup>®</sup>)
- Talazoparib (Talzenna<sup>®</sup>)

A 65-year-old woman in good health (PS 0) with no other major medical conditions is about to begin treatment for metastatic triple-negative breast cancer (TNBC). The patient is asymptomatic. How would you respond if the patient asked, *What are the 3 most common side effects or clinical complications with this treatment?*







	Sacituzumab govitecan	Trastuzumab deruxtecan (T-DXd)	PARP inhibitor
 Dr Carey	Neutropenia, diarrhea, fatigue	Nausea, fatigue, alopecia	Nausea, fatigue, anemia
 Dr Nanda	Neutropenia, diarrhea, nausea	Nausea/vomiting, fatigue, neutropenia	Nausea, fatigue, anemia
 Dr Brufsky	Diarrhea, neutropenia, fatigue	Nausea, ILD, thrombocytopenia	Anemia, nausea, fatigue
 Dr O'Shaughnessy	Diarrhea, neutropenia, fatigue	Fatigue, alopecia, ILD	Nausea, fatigue, anemia
 Dr Sharma	Low white blood cell count, diarrhea, fatigue	Nausea/vomiting, fatigue, pneumonitis	Nausea, low hemoglobin, fatigue
 Dr Wander	Fatigue, nausea/diarrhea, blood count changes	Fatigue, nausea/loose stool, pneumonitis (rare)	Fatigue, blood count changes, nausea

ILD = interstitial lung disease







A 65-year-old woman in good health (PS 0) with no other major medical conditions is about to begin treatment for metastatic TNBC. The patient is asymptomatic. How would you respond if the patient asked, *What is the percent chance that side effects/toxicity will lead to the treatment being stopped temporarily?*

	Sacituzumab govitecan	T-DXd	PARP inhibitor
 Dr Carey	40%	30%	20%
 Dr Nanda	50%	25%	25%
 Dr Brufsky	20%	20%	20%
 Dr O'Shaughnessy	33%	33%	25%
 Dr Sharma	25%	20%	10%
 Dr Wander	20%	20%	10%

A 65-year-old woman in good health (PS 0) with no other major medical conditions is about to begin treatment for metastatic TNBC. The patient is asymptomatic. How would you respond if the patient asked, *If the dose of the treatment is reduced, will it be less effective?*







	Sacituzumab govitecan	T-DXd	PARP inhibitor
 Dr Carey	No	No	No
 Dr Nanda	No	No	No
 Dr Brufsky	No	No	No
 Dr O'Shaughnessy	No	Likely not	Likely not
 Dr Sharma	No	No	No
 Dr Wander	No	No	No

A 65-year-old woman in good health (PS 0) with no other major medical conditions is about to begin treatment for metastatic TNBC. The patient is asymptomatic. How would you respond if the patient asked, *What is the percent chance that side effects/toxicity will lead to the treatment being permanently discontinued?*







	Sacituzumab govitecan	T-DXd	PARP inhibitor
 Dr Carey	10%	15%	5%
 Dr Nanda	<5%	15%	<5%
 Dr Brufsky	5%	15%	5%
 Dr O'Shaughnessy	10%	15%	10%
 Dr Sharma	5%-6%	13%-15%	5%-6%
 Dr Wander	5%-10%	5%-10%	<5%



A 65-year-old woman in good health (PS 0) with no other major medical conditions is about to begin treatment for metastatic TNBC. The patient is asymptomatic. How would you respond if the patient asked, *What is the percent chance that the treatment will be stopped at some point because the cancer is getting worse and another treatment will be needed?*

	Sacituzumab govitecan	T-DXd	PARP inhibitor
 Dr Carey	90%	85%	95%
 Dr Nanda	100%	100%	100%
 Dr Brufsky	90%	90%	90%
 Dr O'Shaughnessy	100%	90%	85%
 Dr Sharma	100%	100%	100%
 Dr Wander	100%	100%	100%

A 65-year-old woman in good health (PS 0) with no other major medical conditions is about to begin treatment for metastatic TNBC. The patient is asymptomatic. How would you respond if the patient asked, *In general, for approximately how long do patients with metastatic TNBC receive this treatment?*

	Sacituzumab govitecan	T-DXd	PARP inhibitor
 Dr Carey	4-5 months	4-5 months	6-7 months
 Dr Nanda	6 months	10 months	8 months
 Dr Brufsky	10 months	10 months	10 months
 Dr O'Shaughnessy	6 months	8 months	6 months
 Dr Sharma	5-6 months	6 months	6-7 months
 Dr Wander	~4-8+ months	6-12+ months	~4-8+ months

# Do you use preemptive growth factors for patients with TNBC receiving sacituzumab govitecan?



**Dr Carey**

**No, but have a low threshold**



**Dr Nanda**

**No**



**Dr Brufsky**

**Yes, pegfilgrastim (or biosimilar) on day 9**



**Dr O'Shaughnessy**

**No (I start at a reduced dose of sacituzumab govitecan unless patient is young and very healthy)**



**Dr Sharma**

**Yes, pegfilgrastim on day 9**



**Dr Wander**

**No**

# Approximately what proportion of patients with metastatic TNBC are eligible to receive trastuzumab deruxtecan (T-DXd) for HER2-low disease?



**Dr Carey**

**50%**



**Dr Nanda**

**35%**



**Dr Brufsky**

**30%**



**Dr O'Shaughnessy**

**30%**



**Dr Sharma**

**30%**



**Dr Wander**

**60%**

# Do you use preemptive growth factors for patients with TNBC receiving T-DXd?



**Dr Carey**

**No**



**Dr Nanda**

**No**



**Dr Brufsky**

**No**



**Dr O'Shaughnessy**

**No**



**Dr Sharma**

**No**



**Dr Wander**

**No**

For patients with metastatic TNBC who are eligible to receive both sacituzumab govitecan and T-DXd, which agent do you generally use first?



**Dr Carey**

**Sacituzumab govitecan**



**Dr Nanda**

**Sacituzumab govitecan**



**Dr Brufsky**

**Sacituzumab govitecan**



**Dr O'Shaughnessy**

**Sacituzumab govitecan**



**Dr Sharma**

**Sacituzumab govitecan**



**Dr Wander**

**Sacituzumab govitecan**

# Agenda: Oncology Q & A

## Metastatic Triple-Negative Breast Cancer (TNBC)

▶ **PLAY** Stages of TNBC; Recurrence After Adjuvant Treatment

▶ **PLAY** Long-Term Outcomes with Metastatic TNBC

▶ **PLAY** Side Effects and Complications of Treatment

▶ **PLAY** Dose Reduction

▶ **PLAY** Working While Receiving Treatment

▶ **PLAY** Support for Minor Children and Grandchildren

▶ **PLAY** Second Opinions and Self Advocacy

▶ **PLAY** Recording Clinic Visits; Complementary Therapies; Nutrition

▶ **PLAY** Living Wills and Advanced Directives

# Side Effects and Complications of Treatment





# Agenda: Oncology Q & A

## Metastatic Triple-Negative Breast Cancer (TNBC)

▶ **PLAY** Stages of TNBC; Recurrence After Adjuvant Treatment

▶ **PLAY** Long-Term Outcomes with Metastatic TNBC

▶ **PLAY** Side Effects and Complications of Treatment

▶ **PLAY** **Dose Reduction**

▶ **PLAY** Working While Receiving Treatment

▶ **PLAY** Support for Minor Children and Grandchildren

▶ **PLAY** Second Opinions and Self Advocacy

▶ **PLAY** Recording Clinic Visits; Complementary Therapies; Nutrition

▶ **PLAY** Living Wills and Advanced Directives

# Dose Reduction



# Agenda: Oncology Q & A

## Metastatic Triple-Negative Breast Cancer (TNBC)

▶ **PLAY** Stages of TNBC; Recurrence After Adjuvant Treatment

▶ **PLAY** Long-Term Outcomes with Metastatic TNBC

▶ **PLAY** Side Effects and Complications of Treatment

▶ **PLAY** Dose Reduction

▶ **PLAY** **Working While Receiving Treatment**

▶ **PLAY** Support for Minor Children and Grandchildren

▶ **PLAY** Second Opinions and Self Advocacy

▶ **PLAY** Recording Clinic Visits; Complementary Therapies; Nutrition

▶ **PLAY** Living Wills and Advanced Directives

# Working While Receiving Treatment



# Agenda: Oncology Q & A

## Metastatic Triple-Negative Breast Cancer (TNBC)

▶ **PLAY** Stages of TNBC; Recurrence After Adjuvant Treatment

▶ **PLAY** Long-Term Outcomes with Metastatic TNBC

▶ **PLAY** Side Effects and Complications of Treatment

▶ **PLAY** Dose Reduction

▶ **PLAY** Working While Receiving Treatment

▶ **PLAY** **Support for Minor Children and Grandchildren**

▶ **PLAY** Second Opinions and Self Advocacy

▶ **PLAY** Recording Clinic Visits; Complementary Therapies; Nutrition

▶ **PLAY** Living Wills and Advanced Directives

# Support for Minor Children and Grandchildren



# Agenda: Oncology Q & A

## Metastatic Triple-Negative Breast Cancer (TNBC)

▶ **PLAY** Stages of TNBC; Recurrence After Adjuvant Treatment

▶ **PLAY** Long-Term Outcomes with Metastatic TNBC

▶ **PLAY** Side Effects and Complications of Treatment

▶ **PLAY** Dose Reduction

▶ **PLAY** Working While Receiving Treatment

▶ **PLAY** Support for Minor Children and Grandchildren

▶ **PLAY** **Second Opinions and Self Advocacy**

▶ **PLAY** Recording Clinic Visits; Complementary Therapies; Nutrition

▶ **PLAY** Living Wills and Advanced Directives

# Second Opinions and Self Advocacy





# Agenda: Oncology Q & A

## Metastatic Triple-Negative Breast Cancer (TNBC)

▶ **PLAY** Stages of TNBC; Recurrence After Adjuvant Treatment

▶ **PLAY** Long-Term Outcomes with Metastatic TNBC

▶ **PLAY** Side Effects and Complications of Treatment

▶ **PLAY** Dose Reduction

▶ **PLAY** Working While Receiving Treatment

▶ **PLAY** Support for Minor Children and Grandchildren

▶ **PLAY** Second Opinions and Self Advocacy

▶ **PLAY** Recording Clinic Visits; Complementary Therapies; Nutrition

▶ **PLAY** Living Wills and Advanced Directives

# Recording Clinic Visits; Complementary Therapies; Nutrition



# Agenda: Oncology Q & A

## Metastatic Triple-Negative Breast Cancer (TNBC)

- ▶ **PLAY** **Stages of TNBC; Recurrence After Adjuvant Treatment**
- ▶ **PLAY** **Long-Term Outcomes with Metastatic TNBC**
- ▶ **PLAY** **Side Effects and Complications of Treatment**
- ▶ **PLAY** **Dose Reduction**
- ▶ **PLAY** **Working While Receiving Treatment**
- ▶ **PLAY** **Support for Minor Children and Grandchildren**
- ▶ **PLAY** **Second Opinions and Self Advocacy**
- ▶ **PLAY** **Recording Clinic Visits; Complementary Therapies; Nutrition**
- ▶ **PLAY** **Living Wills and Advanced Directives**

# Living Wills and Advanced Directives





Thank you



***Thank you for joining us!***

***Please take a moment to complete the survey currently up on Zoom. Your feedback is very important to us. The survey will remain open for 5 minutes after the meeting ends.***