Colorectal Cancer[™]

U P D A T E

Conversations with Clinical Investigators Bridging the Gap between Research and Patient Care

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Colorectal Cancer Update for Surgeons

A Continuing Medical Education Audio Series

STATEMENT OF NEED/TARGET AUDIENCE

Colorectal cancer is one of the most rapidly evolving fields in oncology. Published results from a plethora of ongoing clinical trials lead to the continuous emergence of new therapeutic techniques, agents and changes in the indications for existing treatments. In order to offer optimal patient care — including the option of clinical trial participation — the practicing colorectal cancer surgeon must be well informed of these advances. To bridge the gap between research and patient care, *Colorectal Cancer Update* for Surgeons utilizes one-on-one discussions with leading colorectal cancer investigators. By providing access to the latest research developments and expert perspectives, this CME program assists colorectal surgeons in the formulation of up-to-date clinical management strategies.

GLOBAL LEARNING OBJECTIVES

- Critically evaluate the clinical implications of emerging clinical trial data in colorectal cancer treatment in
 order to incorporate these data into local and systemic management strategies in the neoadjuvant, adjuvant
 and metastatic disease settings.
- · Counsel appropriately selected patients about the availability of ongoing clinical trials.
- Evaluate the emerging research data on various adjuvant chemotherapy approaches, including the use of
 oxaliplatin-containing regimens and the use of capecitabine or intravenous 5-FU.
- Evaluate emerging research data on various neoadjuvant radiation therapy/chemotherapy approaches for rectal cancer and explain the absolute risks and benefits of these regimens to patients.
- Describe and implement an algorithm for medical and radiation oncology referral for appropriately selected
 patients with colorectal cancer for consideration of systemic therapy.
- Describe the risks and benefits of various surgical approaches to isolated metastases of colorectal cancer.
- Assess the number of resected lymph nodes required to adequately determine the risk of recurrence in patients with colon cancer.

PURPOSE OF THIS ISSUE OF COLORECTAL CANCER UPDATE FOR SURGEONS

The purpose of Issue 2 of *Colorectal Cancer Update* for Surgeons is to support these global objectives by offering the perspectives of Drs Wexner, Meropol, Roh and Hoff on the integration of emerging clinical research data into the management of colorectal cancer.

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CME INFORMATION

Colorectal Cancer Update for Surgeons — Issue 2, 2006

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QUESTIONS (PLEASE CIRCLE ANSWER):

- The Clinical Outcomes of Surgical Therapy (COST) study compared open colectomy to laparoscopic colectomy for colon cancer.
 - a. True
 - b. False
- 2. Tumor markers are routinely used in clinical practice for predicting response and assignment of patients to bevacizumab therapy.
 - a. True
 - b. False
- Which of the following regimens has been shown to be superior to 5-FU/ leucovorin in patients with Stage III colon cancer?
 - a. IFL (irinotecan/5-FU/leucovorin)
 - b. FOLFOX (oxaliplatin/5-FU/leucovorin)
 - c. Both a and b
 - d. None of the above
- 4. In patients with Stage II colon cancer, which of the following characteristics would suggest an increased risk of recurrence?
 - a. Obstruction
 - b. Perforation
 - c. Lymphovascular invasion
 - d. All of the above
 - e. None of the above
- 5. Which of the following side effects are associated with FOLFOX?
 - a. Neutropenia
 - b. Neurotoxicity
 - c. Diarrhea
 - d. All of the above
 - e. None of the above

- 6. Which of the following is an orally administered chemotherapy agent?
 - a. Oxaliplatin
 - b. Capecitabine
 - c. Irinotecan
 - d. Both a and b
 - e. None of the above
- 7. The side effects associated with capecitabine include diarrhea and hand-foot syndrome.
 - a. True
 - b. False
- NSABP-C-09 is evaluating the addition of intrahepatic FUDR to CAPOX for patients with surgically resected or ablated hepatic metastases from colon cancer.
 - a. True
 - b. False
- The MOSAIC trial and NSABP-C-07 both evaluated a 5-FU/leucovorin regimen in combination with ______ as adjuvant therapy for patients with colon cancer.
 - a. Irinotecan
 - b. Capecitabine
 - c. Oxaliplatin
 - d. All of the above
 - e. None of the above
- 10. The QUASAR trial demonstrated close to a five percent benefit in ______ for adjuvant chemotherapy in patients with Stage II colon cancer.
 - a. Disease-free survival
 - b. Progression-free survival
 - c. Overall survival
 - d. All of the above
 - e. None of the above

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