

Metastatic Colon Cancer: The Continuum of Care

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CE Test Questions

1. The National Comprehensive Cancer Network (NCCN) guidelines are evidence-based. Unless otherwise noted, all recommendations are based on the same category of evidence. This level of evidence is:
 - a. Category 1: Uniform NCCN consensus, based on high-level evidence
 - b. Category 2A: Uniform NCCN consensus based on lower-level evidence including clinical experience
 - c. Category 2B: Nonuniform NCCN consensus (but no major disagreement), based on lower-level evidence including clinical experience
 - d. Category 3: Major NCCN disagreement
2. Concerning capecitabine, which of the following is correct?
 - a. Because capecitabine is administered orally, side effects are minimal.
 - b. Capecitabine is an appropriate choice for patients who would prefer to avoid chemotherapy.
 - c. Monotherapy with capecitabine is an option for adjuvant therapy in patients with T3, N0, M0 tumors.
 - d. Capecitabine is converted to irinotecan in the body.
3. Which of the following is correct regarding the choice of initial chemotherapy in patients with metastatic colon cancer?
 - a. The NCCN guidelines recommend FOLFOX over FOLFIRI for most patients.
 - b. Consideration of side effects is an appropriate part of the decision-making process.
 - c. Patients with low performance status should never be given intensive chemotherapy.
 - d. Patients who may have resectable liver metastases require different chemotherapy medications than patients who have unresectable metastases.

4. With appropriate chemotherapy, some unresectable liver metastases will become resectable, creating the potential for cure in selected patients. In these patients,
 - a. Chemotherapy should be continued for at least six months prior to surgery.
 - b. The goal of neoadjuvant therapy is to cause metastases to become undetectable.
 - c. PET scan prior to treatment can help inform ongoing care.
 - d. Early involvement of the surgical team is not appropriate, because it is unclear when the patient will be eligible for surgery.

5. Bevacizumab is a biologic agent used in the treatment of colon cancer. Which of the following statements about bevacizumab is correct?
 - a. If bevacizumab is used as part of initial therapy in a given patient, NCCN guidelines recommend continuing it if disease progresses.
 - b. Bevacizumab inhibits vascular endothelial growth factor.
 - c. Bevacizumab should not be used until other options have been exhausted.
 - d. Bevacizumab inhibits angiogenesis by targeting the epidermal growth factor receptor.

6. Which statement regarding clinical trials of treatments for colon cancer is correct?
 - a. Enrollment of a patient with colon cancer in a clinical trial is an option for patients with nonmetastatic disease only.
 - b. For a patient with metastatic colon cancer who has progressed through all established therapies, enrollment in a clinical trial is appropriate only when performance status begins to decline.
 - c. There are currently no clinical trials investigating the underlying biology of the disease.
 - d. Clinical trial results are being evaluated to further define which patients with metastatic colon cancer may benefit from conversion therapy.

7. With advances in therapy for metastatic colon cancer over the past decade:
 - a. Cure can now be achieved in the majority of patients.
 - b. Survival has increased to ten years in most patients.
 - c. The median survival time has approximately doubled.
 - d. The average survival time has approximately tripled.

8. When colon cancer progresses, the next step in the continuum of care should include consideration of:
 - a. Side effects of prior agents used, because the best choice is an agent with similar side effects
 - b. Performance status, because options are available for patients who cannot tolerate intensive therapy
 - c. Location of metastases, because surgery is not an option if liver metastases are present
 - d. Specific components of prior regimens, because FOLFIRI should not be used immediately after FOLOX

9. Which of the following statements about adjuvant therapy for patients with stage II or III colon cancer is correct?
 - a. Current staging and grading allows for precise predictions about which tumors will recur.
 - b. Adjuvant therapy is intended primarily to treat residual cancer cells at the original tumor site.
 - c. Combination chemotherapy with FOLFOX is widely accepted as adjuvant treatment for patients with stage III colon cancer.
 - d. NCCN recommendations for adjuvant therapy are the same for all patients with stage II colon cancer.

10. The continuum of care, as addressed in the NCCN guidelines, involves:
 - a. Multiple choices for chemotherapy based in part on prior agents used
 - b. The use of multiple chemotherapy agents in a set, specific order
 - c. The use of as many chemotherapy agents as possible before disease progresses
 - d. A schedule establishing when chemotherapy agents will be re-used, even if disease has progressed on those agents

CE Evaluation

Metastatic Colon Cancer: The Continuum of Care

1) The program content helped me to achieve the following objectives:

Discuss recent updates made to the NCCN Clinical Practice Guidelines in Oncology™ Colon Cancer

Strongly Agree Agree Undecided Disagree Strongly Disagree

List current options for metastatic disease

Strongly Agree Agree Undecided Disagree Strongly Disagree

Describe the use of adjuvant therapy

Strongly Agree Agree Undecided Disagree Strongly Disagree

Provide the rationale for sequencing of systemic therapy

Strongly Agree Agree Undecided Disagree Strongly Disagree

Differentiate between management strategies for patients with good versus poor performance status

Strongly Agree Agree Undecided Disagree Strongly Disagree

2) Time spent completing this activity?

< 30 min 30 min 45 min 1 hr 1.5 hrs >1.5 hrs

Rate the extent to which you agree or disagree:

3) You were satisfied with the overall quality of this activity.

Strongly Agree Agree Undecided Disagree Strongly Disagree

4) Participation in this activity changed your knowledge/attitudes.

Strongly Agree Agree Undecided Disagree Strongly Disagree

5) You will make a change in your practice as a result of participation in this activity.

Strongly Agree Agree Undecided Disagree Strongly Disagree

6) The activity presented scientifically rigorous, unbiased, and balanced information.

Strongly Agree Agree Undecided Disagree Strongly Disagree

7) Individual presentations were free of commercial bias.

Strongly Agree Agree Undecided Disagree Strongly Disagree

8) The program was up-to-date in terms of current practices and issues.

Strongly Agree Agree Undecided Disagree Strongly Disagree

9) Which ONE of the following best describes the impact of this activity on you:

- a) I plan to incorporate these updates in cancer management into my practice.
- b) I do not plan to incorporate these updates in cancer management into my practice.

10) For Question #8, if you selected "B" please list any factors that may be acting as barriers to implementing change.

11) If commercial bias was noted, please explain.

12) On what topic(s) would you like to receive future education?

13) Are you interested in participating in future Discovery Health CME programs?

Not at all Somewhat Very Extremely

14) Additional Feedback.

15) Please tell us how you found out about Discovery Health CME.

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