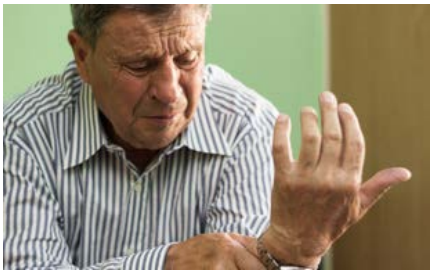

CME/CE-Certified myCME Go Mobile Webcast

Considerations for Immunotherapy in a Patient With Moderate Rheumatoid Arthritis

FACULTY PRESENTERS

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PROGRAM DESCRIPTION

Rheumatologic immune-related adverse events (irAEs) associated with anti–PD 1 therapy have been increasingly observed in clinical practice, impacting patient adherence and quality of life while presenting new challenges to treating clinicians. When treating individuals receiving immune checkpoint inhibitor (ICI) therapies, clinicians are likely to encounter a wide variety of specific rheumatic irAEs such as inflammatory arthritis, sicca syndrome, myositis, polymyalgia rheumatica, and crystal disease. Treatment considerations are often different for irAEs compared with other rheumatic conditions.

In this educational activity—the final segment of a series of 3 interrelated myCME Go activities—a rheumatologist and an oncologist explore best practices for a patient with a history of moderate rheumatoid arthritis who is newly diagnosed with metastatic renal cell carcinoma. Considerations for the use of ICI therapy for this individual will be discussed, especially concerns for potentially worsening the patient's arthritis. The faculty will review evidence-based recommendations for treating this patient and discuss appropriate, ongoing monitoring strategies.

INTENDED AUDIENCE

This activity is designed for rheumatologists, rheumatology nurses, and NPs and PAs with a specialty in rheumatology.

LEARNING OBJECTIVES

After participating in this activity, learners should be better able to:

- Describe the clinical and safety concerns for initiating immune checkpoint inhibitor (ICI) therapy in patients with a history of rheumatologic disease
- Implement evidence-based guidelines for treating patients with cancer and preexisting rheumatologic diseases

ACCREDITATION STATEMENTS

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- **Dr. Brahmer** is a consultant for Amgen, Celgene, Genentech, Inc., Lilly, Merck & Co., Inc., and Syndax Pharmaceuticals Inc. She has received research funds from Bristol-Myers Squibb, edImmune/AstraZeneca, and Merck & Co., Inc., and is on the advisory board of Bristol-Myers Squibb.
  Dr. Cappelli is a consultant for Bristol-Myers Squibb and has received royalties from Regeneron/Sanofi.

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The opinions expressed in the educational activity are those of the faculty and do not necessarily represent the views of Haymarket Medical Education, AKH Inc., Advancing Knowledge in Healthcare, or Bristol-Myers Squibb. Please refer to the official prescribing information for each product for discussion of approved indications, contraindications, and warnings.

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FACULTY BIOGRAPHIES

Julie R. Brahmer, MD, MSc, is the Director of the Thoracic Oncology Program and Professor of Oncology at the Sidney Kimmel Comprehensive Cancer Center at Johns Hopkins. She also directs the Kimmel Cancer Center on the Johns Hopkins Bayview campus and is co-principal investigator on Johns Hopkins' National Clinical Trials Network and helps direct all oncology cooperative group activities on the Johns Hopkins campuses. Dr. Brahmer is an international leader in lung cancer clinical trials research with particular expertise in drug development for thoracic malignancies and immunotherapy.

Dr. Brahmer received her undergraduate degree in Chemistry and Philosophy in 1989 from the Creighton University in Omaha, Nebraska and went on to receive her medical degree from the University of Nebraska Medical Center College of Medicine in 1993. Completing her internship and residency in Internal Medicine at the University of Utah, she later became the Chief Medical Resident until moving to Baltimore to complete her fellowship in Medical Oncology at the Kimmel Cancer Center at Johns Hopkins.

Dr. Brahmer is an active clinical leader in the treatment of lung cancer and mesothelioma. She helps lead the organization of the multidisciplinary thoracic malignancy conference whose members meet weekly to discuss thoracic malignancy cases that need a multidisciplinary review/approach. Her research and clinical practice focuses on the development of new therapies for the treatment and prevention of lung cancer and mesothelioma.

Dr. Brahmer's research interests include leading early phase immunotherapy trials of anti-PD-1 antibodies, international phase III studies of immunotherapies in lung cancer and investigator-initiated trials evaluating epigenetic therapies in combination with immunotherapies.

She is a member of the American Society of Clinical Oncology and the Eastern Cooperative Oncology Group (ECOG) Thoracic Committee and Cancer Prevention Steering Committee. She is one of the founding Board members for the National Lung Cancer Partnership, where she serves as a member and the Chairman of the Scientific Executive Committee. She is also on the medical advisory board of the Lung Cancer Research Fund and LUNGevity.

Laura C. Cappelli, MD, MHS received her undergraduate degree from the University of Pennsylvania and her M.D. from Johns Hopkins University School of Medicine. She completed her residency in internal medicine and performed a fellowship in rheumatology at Johns Hopkins. She also obtained an MHS in Clinical Investigation from the Johns Hopkins Bloomberg School of Public Health. She joined the faculty in 2016 after completing her fellowship.

Her research focuses on inflammatory arthritis and on the effects of cancer immunotherapy. Dr. Cappelli started a research program to evaluate the rheumatologic adverse effects of cancer immunotherapy. New agents, called immune checkpoint inhibitors, work to boost patients' own immune systems to fight their cancer, leading to great advances in treatment. However, they can also lead to adverse events as a result of their mechanism of action. Rheumatologists are seeing patients with inflammatory arthritis, immune-mediated dry mouth and eyes, myositis, vasculitis and other adverse events due to cancer immunotherapy. Dr. Cappelli is investigating several different aspects of these adverse events including the clinical characteristics, epidemiology, impact on patients, and the biologic mechanisms. Her work involves collaborations with oncologists and laboratory investigators in rheumatology and oncology.

Additionally, Dr. Cappelli studies rheumatoid arthritis. She has focused on defining unique clinical features of patients with seronegative disease, that is, those patients lacking the traditional markers in the blood seen in rheumatoid arthritis. She also collaborates with laboratory investigators to study the use of specific autoantibodies as biomarkers in rheumatoid arthritis.