



EPICS

GASTROINTESTINAL MALIGNANCIES IN 2020 AND BEYOND

Monday, July 6, and Friday, July 10, 2020

- > In July 2020, Aptitude Health gathered a group of clinical investigators with cross-functional expertise in gastrointestinal (GI) cancer treatment to attend a virtual expert panel meeting
- > The goal of the expert panel was to discuss the latest translational and therapeutic developments in GI cancer treatment, apply these advances to dynamic and oftentimes individualized clinical decision-making, and explore how emerging research will affect ongoing clinical trials, development of new compounds, and future treatment paradigms

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EPICS

Metastatic Colorectal Cancer

DAY 1 – MONDAY, JULY 6, 2020

MEET THE EXPERTS . . .

CO-CHAIRS

Howard Hochster, MD, FACP

Rutgers Cancer Institute of New Jersey
New Brunswick, NJ, USA

Gerald Prager, MD

Comprehensive Cancer Center Vienna
Medical University Vienna
Vienna, Austria

FACULTY

Dirk Arnold, MD, PhD

Asklepios Tumor Center
Hamburg, Germany

Axel Grothey, MD

West Cancer Center and Research Institute
Germantown, TN, USA

Chiara Cremolini, MD, PhD

University of Pisa
Pisa, Italy

Marc Peeters, MD, PhD

Antwerp University Hospital
Antwerp, Belgium

Time EDT/CEST	Topic	Speaker/Moderator
9.00 – 9.15 AM / 15.00 – 15.15	Welcome and Introductions	Howard Hochster, MD, FACP
9.15 – 9.25 AM / 15.15 – 15.25	Metastatic Colorectal Cancer – Recent Insights and Future Approaches: Chemotherapy and Targeted Therapies	Dirk Arnold, MD, PhD
9.25 – 10.00 AM / 15.25 – 16.00	Discussion	All
10.00 – 10.05 AM / 16.00 – 16.05	<i>Key Takeaways</i>	Dirk Arnold, MD, PhD
10.05 – 10.15 AM / 16.05 – 16.15	Metastatic Colorectal Cancer – Recent Insights and Future Approaches: Immunotherapy and Targeted Therapies	Axel Grothey, MD
10.15 – 10.50 AM / 16.15 – 16.50	Discussion	All
10.50 – 10.55 AM / 16.50 – 16.55	<i>Key Takeaways</i>	Axel Grothey, MD
10.55 – 11.00 AM / 16.55 – 17.00	Meeting Close	

CHEMOTHERAPY AND TARGETED THERAPIES IN METASTATIC CRC – OVERVIEW (1/2)

- > How to best select first-line chemo intensity?

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CHEMOTHERAPY AND TARGETED THERAPIES IN METASTATIC CRC – OVERVIEW (2/2)

- > Preventing metastases in rectal cancer with total neoadjuvant treatments will

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CHEMOTHERAPY AND TARGETED THERAPIES IN METASTATIC CRC – DISCUSSION (1/5)

LARC

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CHEMOTHERAPY AND TARGETED THERAPIES IN METASTATIC CRC – DISCUSSION (2/5)

- > Experts agreed the SOC is moving toward total neoadjuvant therapy (cont.)

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CHEMOTHERAPY AND TARGETED THERAPIES IN METASTATIC CRC – DISCUSSION (3/5)

mCRC

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CHEMOTHERAPY AND TARGETED THERAPIES IN METASTATIC CRC – DISCUSSION (4/5)

mCRC (cont.)

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CHEMOTHERAPY AND TARGETED THERAPIES IN METASTATIC CRC – DISCUSSION (5/5)

mCRC (cont.)

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IMMUNOTHERAPY AND TARGETED THERAPIES IN METASTATIC CRC – OVERVIEW (1/2)

- > There is a growing number of biomarkers used for treatment decisions in mCRC

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IMMUNOTHERAPY AND TARGETED THERAPIES IN METASTATIC CRC – OVERVIEW (2/2)

- > HER2-expressing tumors

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IMMUNOTHERAPY AND TARGETED THERAPIES IN METASTATIC CRC – DISCUSSION (1/5)

- > *“Colorectal cancer is a collection of rare diseases that can be targeted with different approaches in*

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IMMUNOTHERAPY AND TARGETED THERAPIES IN METASTATIC CRC – DISCUSSION (2/5)

> HER2+ mCRC

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IMMUNOTHERAPY AND TARGETED THERAPIES IN METASTATIC CRC – DISCUSSION (3/5)

- > Immunotherapy in first-line MSI-H mCRC

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IMMUNOTHERAPY AND TARGETED THERAPIES IN METASTATIC CRC – DISCUSSION (4/5)

- > Immunotherapy in first-line MSI-H mCRC

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IMMUNOTHERAPY AND TARGETED THERAPIES IN METASTATIC CRC – DISCUSSION (5/5)

- > Circulating tumor (ct)DNA

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EPICS

**Hepatocellular and Biliary Tract
Cancers, Gastroesophageal
Cancers, Pancreatic Cancer**

DAY 2 – FRIDAY, JULY 10, 2020

MEET THE EXPERTS . . .

CO-CHAIRS

Howard Hochster, MD, FACP

Rutgers Cancer Institute of New Jersey
New Brunswick, NJ, USA

Gerald Prager, MD

Comprehensive Cancer Center Vienna
Medical University Vienna
Vienna, Austria

FACULTY

Tanios S. Bekaii-Saab, MD

Mayo Clinic
Phoenix, AZ, USA

Jordi Bruix, MD, PhD

University of Barcelona
Barcelona, Spain

Philip A. Philip, MD, PhD

Barbara Ann Karmanos Cancer Institute
Detroit, MI, USA

Elizabeth C. Smyth, MD

Addenbrooke's Hospital
Cambridge, UK

Julien Taieb, MD, PhD

Université Paris Descartes
Paris, France

Juan Valle, MB ChB, MSc, FRCP

University of Manchester
Manchester, UK

Time	Topic	Speaker/Moderator
10.00 – 10.10 AM EDT/ 16.00 – 16.10 CEST	Welcome	Gerald Prager, MD
10.10 – 10.20 AM EDT/ 16.10 – 16.20 CEST	Hepatocellular and Biliary Tract Cancers – What’s New?	Tanios S. Bekaii-Saab, MD
10.20 – 11.00 AM EDT/ 16.20 – 17.00 CEST	Discussion	All
11.00 – 11.05 AM EDT/ 17.00 – 17.05 CEST	<i>Key Takeaways</i>	Tanios S. Bekaii-Saab, MD
11.05 – 11.15 AM EDT/ 17.05 – 17.15 CEST	Gastroesophageal Cancers	Julien Taieb, MD, PhD
11.15 – 11.55 AM EDT/ 17.15 – 17.55 CEST	Discussion	All
11.55 AM – 12.00 PM EDT/ 17.55 – 18.00 CEST	<i>Key Takeaways</i>	Julien Taieb, MD, PhD
12.00 – 12.15 PM EDT/ 18.00 – 18.15 CEST	Break	
12.15 – 12.25 PM EDT/ 18.15 – 18.25 CEST	Biology-Guided Treatment of Locally Advanced/Metastatic Pancreatic Cancer	Philip A. Philip, MD, PhD
12.25 – 1.05 PM EDT/ 18.25 – 19.05 CEST	Discussion	All
1.05 – 1.10 PM EDT/ 19.05 – 19.10 CEST	<i>Key Takeaways</i>	Philip A. Philip, MD, PhD
1.10 – 1.15 PM EDT/ 19.10 – 19.15 CEST	Summary and Closing Remarks	

HEPATOCELLULAR AND BILIARY TRACT CANCERS – OVERVIEW (1/2)

- > The gold standard for liver cancer staging is the Barcelona Clinic Liver Cancer (BCLC) method

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HEPATOCELLULAR AND BILIARY TRACT CANCERS – OVERVIEW (2/2)

- > The recent FDA approval of atezolizumab + bevacizumab in first line will replace sorafenib and lenvatinib, the

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HEPATOCELLULAR AND BILIARY TRACT CANCERS – DISCUSSION (1/5)

> Sequencing

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HEPATOCELLULAR AND BILIARY TRACT CANCERS – DISCUSSION (2/5)

> Sequencing

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HEPATOCELLULAR AND BILIARY TRACT CANCERS – DISCUSSION (3/5)

- > General considerations

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HEPATOCELLULAR AND BILIARY TRACT CANCERS – DISCUSSION (4/5)

- > BCLC stage C patients: local therapy (to prime the tumor to respond better to

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HEPATOCELLULAR AND BILIARY TRACT CANCERS – DISCUSSION (5/5)

> Biliary tract cancer

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- > Globally, in gastroesophageal cancers, 5-year survival is achieved in approximately

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- > Second-line treatment in mGC

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- > Treatment beyond second line in mGC is a real unmet need (cont.)

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- > Biopsies and biomarkers in GC

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- > Biomarkers beyond HER2 and MSI

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> Immunotherapy

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> HER2+ GC

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> Other considerations

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LOCALLY ADVANCED/METASTATIC PANCREATIC CANCER – OVERVIEW (1/3)

- > Median survival for this disease has not gone above 1 year, and chemotherapy is the mainstay of systemic

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LOCALLY ADVANCED/METASTATIC PANCREATIC CANCER – OVERVIEW (2/3)

- > Exploring novel pathways

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LOCALLY ADVANCED/METASTATIC PANCREATIC CANCER – OVERVIEW (3/3)

- > Immunotherapy combination

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LOCALLY ADVANCED/METASTATIC PANCREATIC CANCER – DISCUSSION (1/4)

- > Conventional cytotoxic therapy remains the mainstay of systemic therapy

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LOCALLY ADVANCED/METASTATIC PANCREATIC CANCER – DISCUSSION (2/4)

> PARP inhibitors

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LOCALLY ADVANCED/METASTATIC PANCREATIC CANCER – DISCUSSION (3/4)

- > Immunotherapy in pancreatic cancer

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LOCALLY ADVANCED/METASTATIC PANCREATIC CANCER – DISCUSSION (4/4)

- > Resectable or borderline resectable disease

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