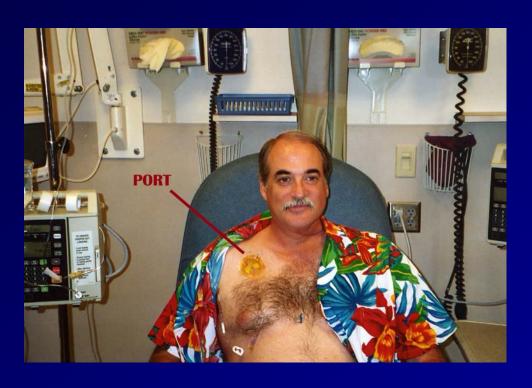
Systemic Therapy 101

What is chemotherapy?







Why do I need Chemotherapy?

- Goal is to prevent recurrence of the cancer after it has been surgically removed ('preventive')
- Chemotherapy treats microscopic cancer cells that may be left behind after surgery has completely removed all the tumor that we can see



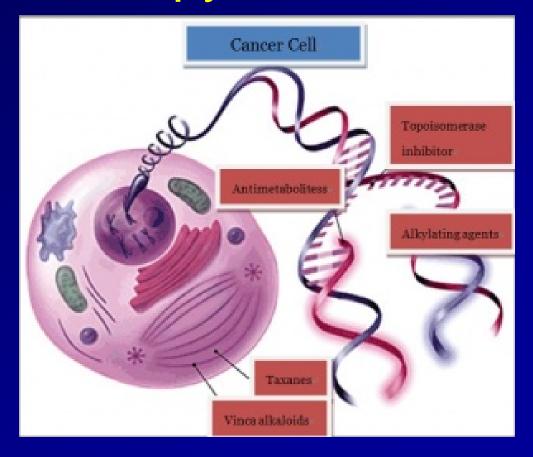
Why do I need Chemotherapy

- In patients where the disease has spread (metastatic):
- Control the growth of cancer
- Help with symptoms (improve quality of life)
- Chronic disease
- Extends life but not a cure



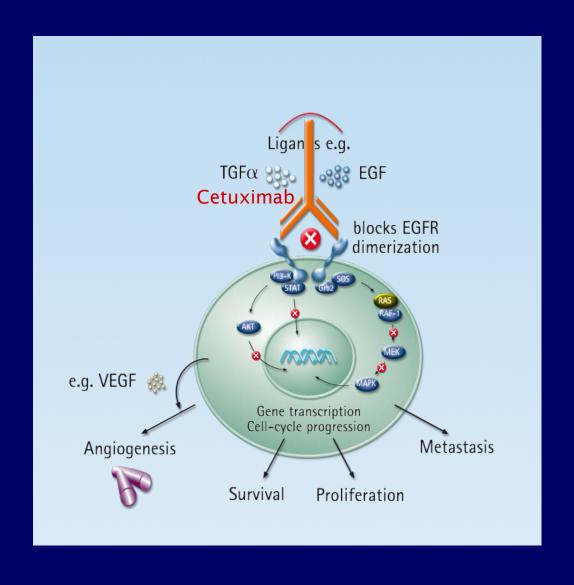
What are the different types of chemotherapy?

- Traditional chemotherapy – Drugs that act on the parts that help the cells grow
- Side effects hair loss, bowel issues, skin changes, decrease immune system

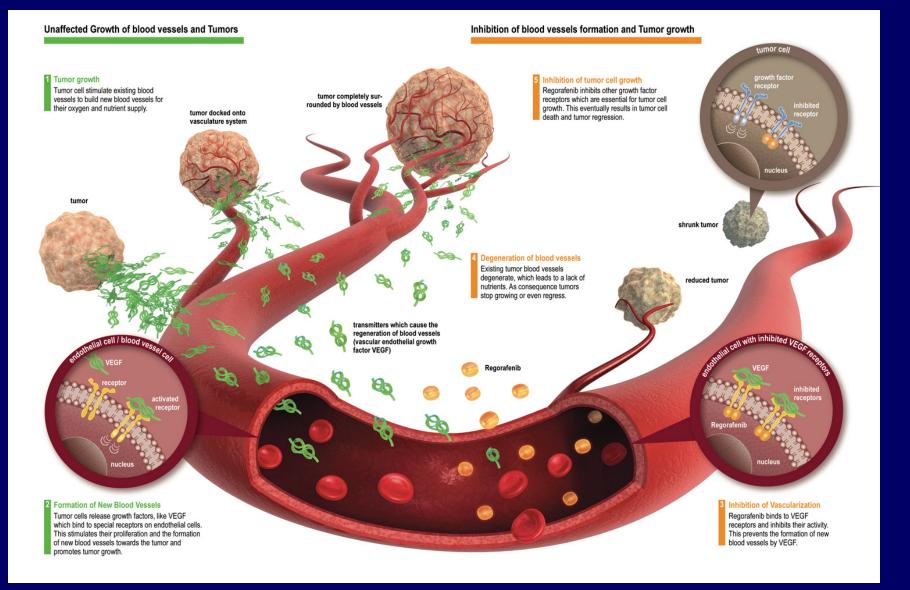




Monoclonal Antibodies



Targeted Agents

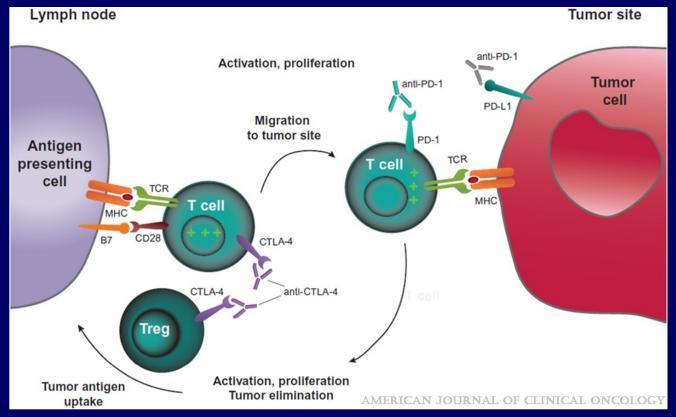


Side Effects

- Vary hair loss, mouth sores, nausea, bowel irritation, and skin changes
- Side effects and treatment response are not the same
- Can have side effects with oral or iv medications

Immunotherapy

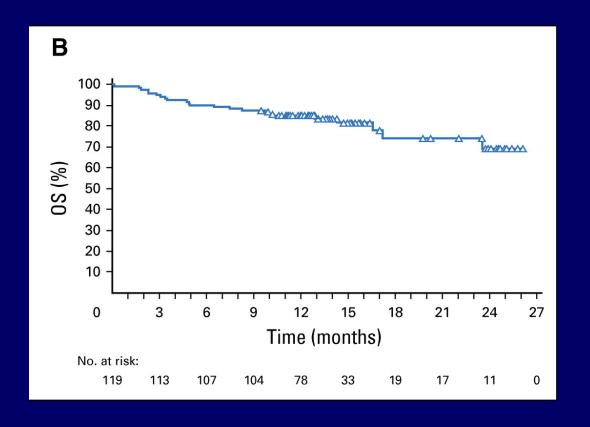
- The immune system helps eliminate abnormal cells in our body
- This is how our body fights infections but it can also attack cancers
- Many cancers develop mechanisms to "hide" from the immune system
- New medications that release the immune system to "attack" tumor cells have shown activity in <u>select</u> colorectal cancers

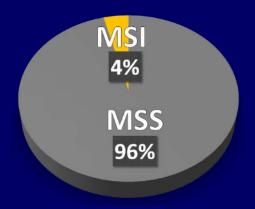


CTLA-4 and PD-1 pathway blockade. CTLA-4 blockade allows for activation and proliferation of more T-cell clones, and reduces Tregmediated immunosuppression. PD-1 pathway blockade restores the activity of antitumor T cells that have become quiescent. A dual pathway blockade could have a synergistic effect, resulting in a larger and longer lasting antitumor immune response. CTLA-4 indicates cytotoxic T-lymphocyte-associated antigen 4; MHC, major histocompatibility complex; PD-1, programmed death 1; PD-L1, programmed death ligand 1; TCR, T-cell receptor; Treg, regulatory T cell.



Why we are excited



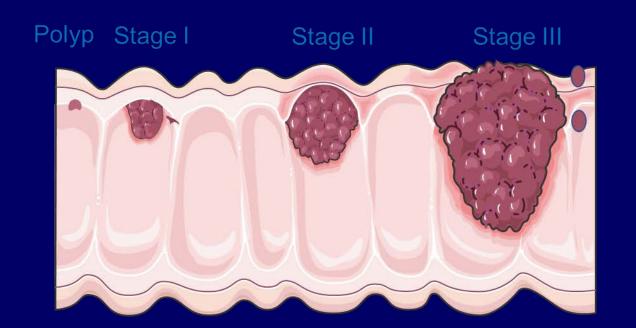


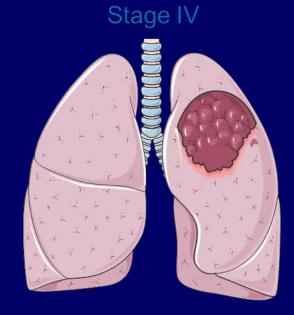
Overman et al., *JCO* (2018) Loree et al., *JGO* (2016)

Side Effects

- Vary diarrhea, tiredness, rash, autoimmune conditions
- Side effects are not necessarily related to response to therapy
- Management of side effects includes stopping the medication and suppressing the immune system

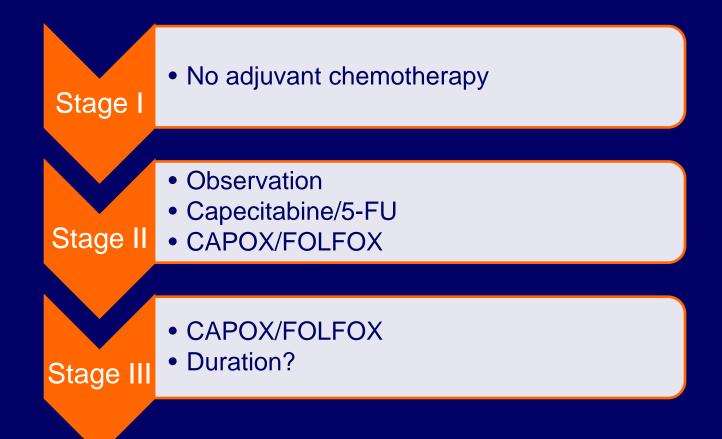
How do we decide what to use?



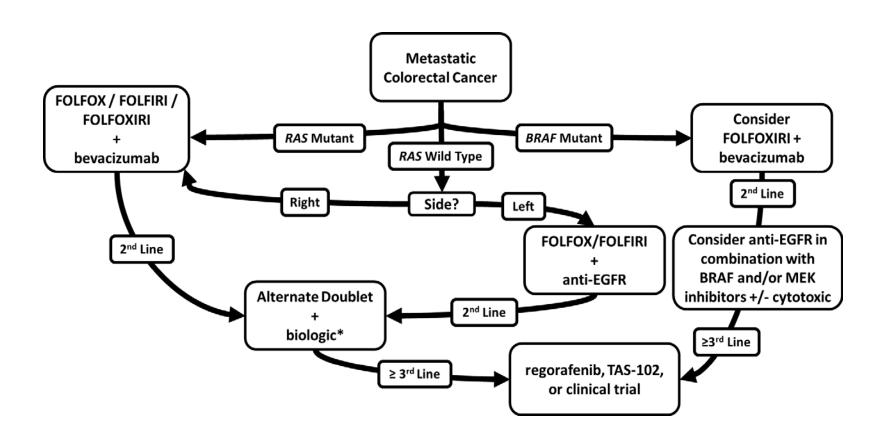


Servier Medical Art

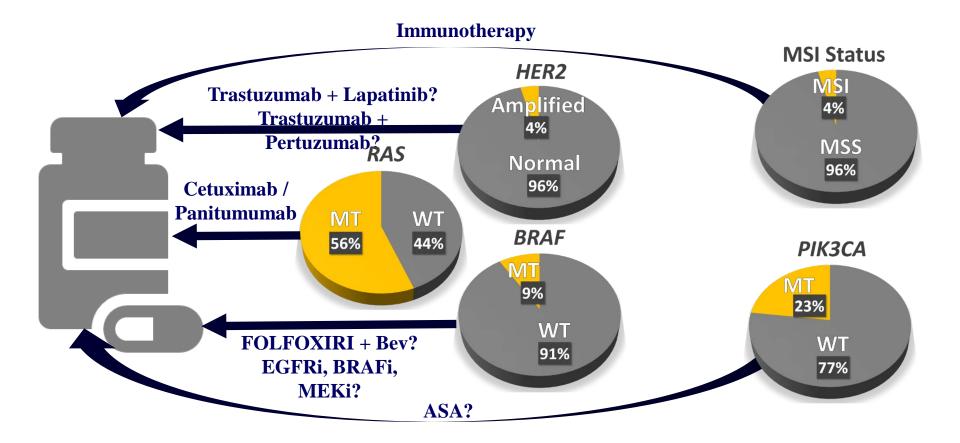
How do we decide what to use?



How do we decide what to use?



How do we decide what to use? Version 2.0



Estimated Costs of Therapy for Metastatic Colon Cancer/month

• 5FU/LV ~\$20

5FU/oxaliplatin ~\$2,000

5FU/irinotecan ~\$2,000

plus bevacizumab +\$5,000

plus cetuximab +\$6,000

Regorafinib/Tas-102 ~\$6,500



Questions

