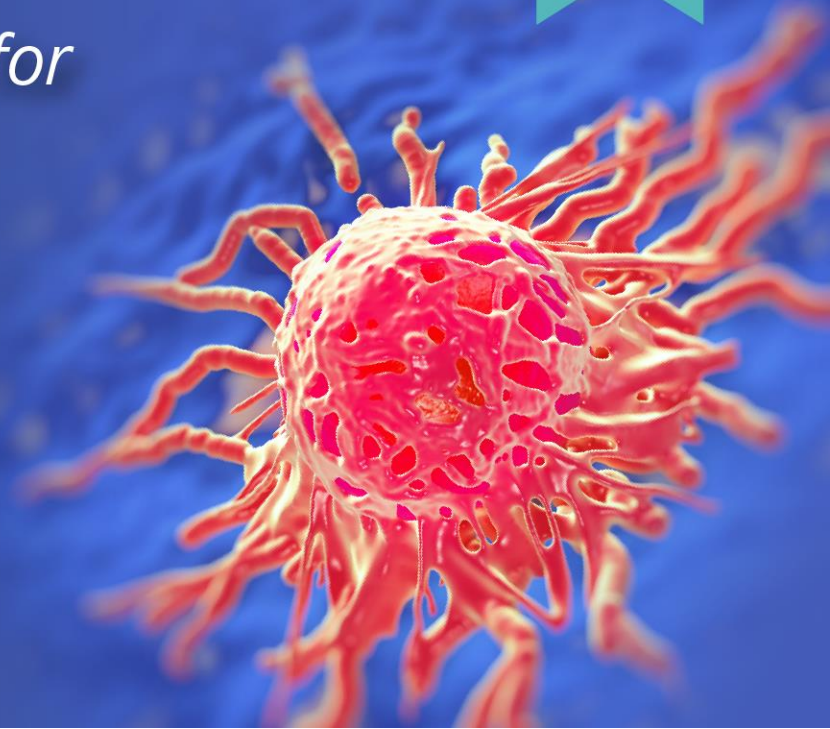


Cancer Insight Summary Slides for
**Patients Who Have
Been Diagnosed
With **METASTATIC
CERVICAL CANCER****



Goals

- The goal of this slide presentation is to provide you and your caregivers with an educational resource to make the overwhelming journey of an ovarian cancer diagnosis and treatment a bit easier.
- The information provided here is designed to support and supplement the information your oncology team.
- Website links are included to resources that may be helpful to you and your loved ones.

Share Decision-Making

- A process in which you, your caregiver, and your health care team discuss options and agree on a treatment plan
- This conversation focuses on your goals, preferences, and expectations
 - Know your understanding of disease and treatment. Keep a list of questions to ask your team prior to each follow up appointment
 - Ask about treatment options, including clinical trials, and the benefits and risks of each treatment
 - Review treatment side effects, and management; Know whom to call with questions and side effect concerns
 - Proactive management of adverse events and a positive patient-provider relationship can improve patient satisfaction and outcomes.

Cervical Cancer Terminology

- Cancer care is full of complex terminology.
- The National Cancer Institute has a complete dictionary which includes the pronunciation of terms.
- These dictionaries will help you and your loved ones understand the terms and drugs that are part of your care and treatment.
- NCI Dictionary of Cancer Terms:
<https://www.cancer.gov/publications/dictionaries/cancer-terms>
- NCI Drug Dictionary:
<https://www.cancer.gov/publications/dictionaries/cancer-drug>

Cervical Cancer Statistics

- American Cancer Society estimates 14,100 new cases will occur in the United States in 2022.
- The average age at diagnosis is 50 years.
- The incidence of cervical cancer is expected to continue to decline among women who receive the HPV vaccine.

Diagnosing Cervical Cancer

- Diagnosis is only done by cytology (fluid sample) or tissue biopsy
- Pap Test is a screening and diagnostic test
- Biopsy Procedures
 - Colposcopy is a large magnifier that can visualize if cervix looks abnormal
~ a biopsy may be obtained to confirm if there are precancer or cancer cells
 - Abnormal biopsy results may require more extensive procedure
 - Cone Biopsy or LEEP procedures involve larger margins
 - Surgery may include lymph node sampling or removing cervix and uterus
- Imaging Tests are not diagnostic but can identify abnormal findings
 - Computed tomography (CT) scan
 - Magnetic resonance imaging (MRI)
 - Positron emission tomography (PET/CT) scan

Treatments for Cervical Cancer

- Surgery
 - Individualized options include trachelectomy, modified or radical hysterectomy, bilateral salpingectomy and oophorectomy
 - Pelvic exenteration
 - Genomic Testing and Molecular Profiling : Can be obtained after surgery for PD-L1 MSI, MMR, and NTRK gene fusion to assist in personalized treatment decision for targeted therapy
- Radiation therapy
 - External Beam Radiation Therapy (EBRT)
 - Internal Radiation (Brachytherapy)
 - Chemotherapy
- Chemotherapy*
- Targeted Therapy*
- Immunotherapy*

Chemotherapy for Cervical Cancer

- Drugs to stop the growth of cancer cells, either by killing the cells or by stopping them from dividing
- May be given by mouth, injection, or infusion, or on the skin, depending on the type and stage of the cancer being treated
- May be given alone or with other treatments, such as surgery, radiation therapy, or biologic therapy

Common Chemotherapy for Cervical Cancer

Agent	Symptom Management
<u>Cisplatin</u> : nausea, vomiting, peripheral neuropathy, nephrotoxicity, ototoxicity	<ul style="list-style-type: none">• Proactive nausea medication
<u>Carboplatin</u> : myelosuppression, nausea	<ul style="list-style-type: none">• Encourage self hydration or added intravenous (IV) hydration as needed
<u>Paclitaxel</u> : nausea, rash, peripheral neuropathy, constipation	<ul style="list-style-type: none">• Laxatives/stool softeners as needed• Ice hands and feet during infusion to decrease potential neuropathy



Targeted Therapy for Cervical Cancer

- Vascular endothelial growth factor (VEGF) inhibition
- Blocks the formation of new blood vessels, starving the tumor of blood and nutrients
- Bevacizumab is an antibody that blocks VEGF, preventing the growth and maintenance of tumor blood vessels



Targeted Therapy for Cervical Cancer

Agent	Symptom Management
<u>Bevacizumab</u> : hypertension, proteinuria, decreased wound healing	Monitor blood pressure; antihypertensive medication if needed

Antibody Drug Conjugates (ADCs) for Cervical Cancer

- Molecules with a specific antibody linked to an anticancer drug
- The antibody part of the drug binds to specific proteins or receptors found on certain types of cells, including cancer cells
- The linked drug enters these cells and kills them without harming other cells

ADCs for Cervical Cancer

Agent	Symptom Management
<p><u>Tisotumab Vedotin:</u> Peripheral Neuropathy; Bleeding; Pneumonitis</p> <p>Ocular toxicity can occur including changes in the corneal epithelium and conjunctiva resulting in changes in vision, including severe vision loss, and corneal ulceration</p>	<p>Monitor and adjust dosing or discontinue as needed</p> <p>Specific management of ocular toxicity:</p> <ul style="list-style-type: none">• Patients need referral to eye specialist prior to starting therapy: exam, visual acuity, and slit lamp exam• Topical eye drops: vaso-constrictor, corticosteroid, and lubricating eye drops

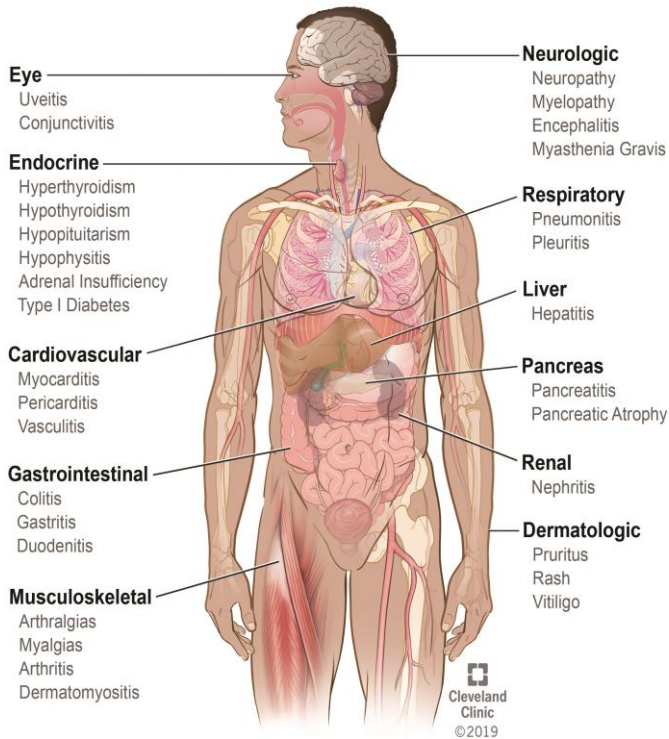
Immunotherapy for Cervical Cancer

- Tumor testing can detect biomarkers which can help make treatment decisions
- Key biomarkers that may influence therapy decisions
 - programmed cell death-1 protein ligands (PD-L1)
 - Tumor mutation burden (TMB)
- Pembrolizumab
 - Immune checkpoint inhibitor
 - Effective in patients with tumors that have high PD-L1 levels
 - Also indicated in patients with tumors that have high TMB detected and have progressed on previous treatments

Immunotherapy for Cervical Cancer

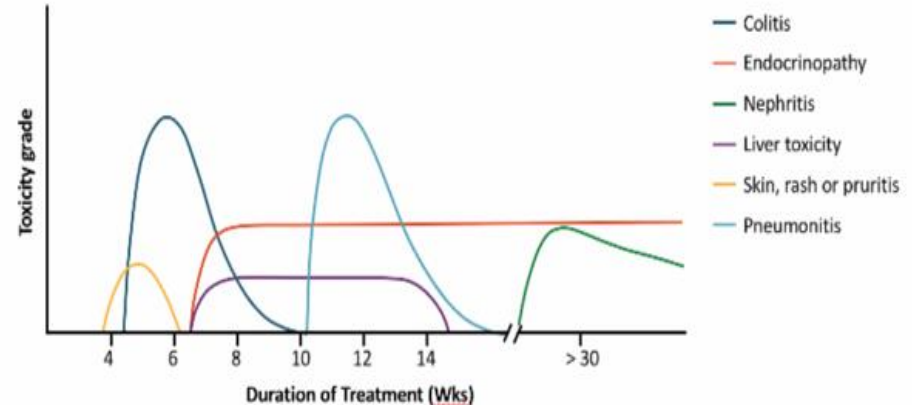
Agent	Symptom Management
<p><u>Pembrolizumab</u>: fatigue, pain, nausea, vomiting, constipation, decreased appetite, hemorrhage, UTI, rash</p>	<ul style="list-style-type: none">• Grade 1-2: Treat the symptoms• Grade 3: Steroids, immunosuppressive therapy, dose modification or discontinuation of therapy, organ-specific management, consultation to subspecialties, and best supportive care

Systemic Adverse Events Associated With Immune Checkpoint Inhibitors



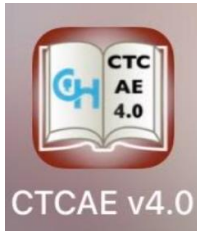
ONSET

- Immediately after 1st dose
- Weeks to months after treatment initiation
- Months to years after last dose



Common Terminology Criteria for Adverse Events Version 5: Grading of Severity

Grade	Signs & Symptoms
1	Mild; asymptomatic or mild symptoms; clinical or diagnostic observations only; intervention not indicated
2	Moderate; minimal, local or noninvasive intervention indicated; limiting age-appropriate instrumental activities of daily living
3	Severe or medically significant but not immediately life-threatening; hospitalization or prolongation of hospitalization indicated; disabling; limiting self-care activities of daily living
4	Life-threatening consequences; urgent intervention indicated
5	Death related to adverse event



Clinical Trials

- Your health care team may recommend a clinical trial as a treatment option.
- Clinical trials are research studies to determine if a new procedure, drug, or drug combination is safe and effective
- There are many types of clinical trials. All patients should be offered a clinical trial if eligible. It is important to be aware of disparities in care and assist patients to overcome obstacles to accessing treatment
- Information to consider when deciding if a clinical trial is appropriate for you is available at:

<https://www.cancer.org/content/dam/cancer-org/cancercontrol/en/booklets-flyers/clinical-trials.pdf>

Report to Your Health Care Team

- It is important to report any side effects from treatment including both physical and emotional effects
- Symptoms you experience could be related to your cancer, treatment, or other medication you are taking.
 - Has fatigue affected your regular activities of daily living. Have you had any shortness of breath? Are you sleeping more or less than usual?
 - Have you had any change in appetite: weight gain or weight loss?
 - Have you had nausea, vomiting, abdominal discomfort, change in bladder or bowel function?
 - Have you had fever, chills, night sweats?
 - You may be asked to keep a calendar of symptoms including monitoring your blood pressure at home

Summary

- We hope that this information is helpful to you and your loved ones as you navigate your cancer journey.
- It is meant to provide information to supplement discussions with your oncology team.
- We have included links to many reputable websites that provide detailed information.
- Thank you for the opportunity to share this information.

Resources

- There are many additional resources available about your cancer and treatment
 - American Cancer Society <https://www.cancer.org/>
 - Cancer.net <https://www.cancer.net>
 - NCCN Guidelines for Patients: Cervical Cancer <https://www.nccn.orgcervical-patient-guideline>
 - Chemocare <https://chemocare.com>
 - National Cervical Cancer Coalition <https://www.cancercare.org>