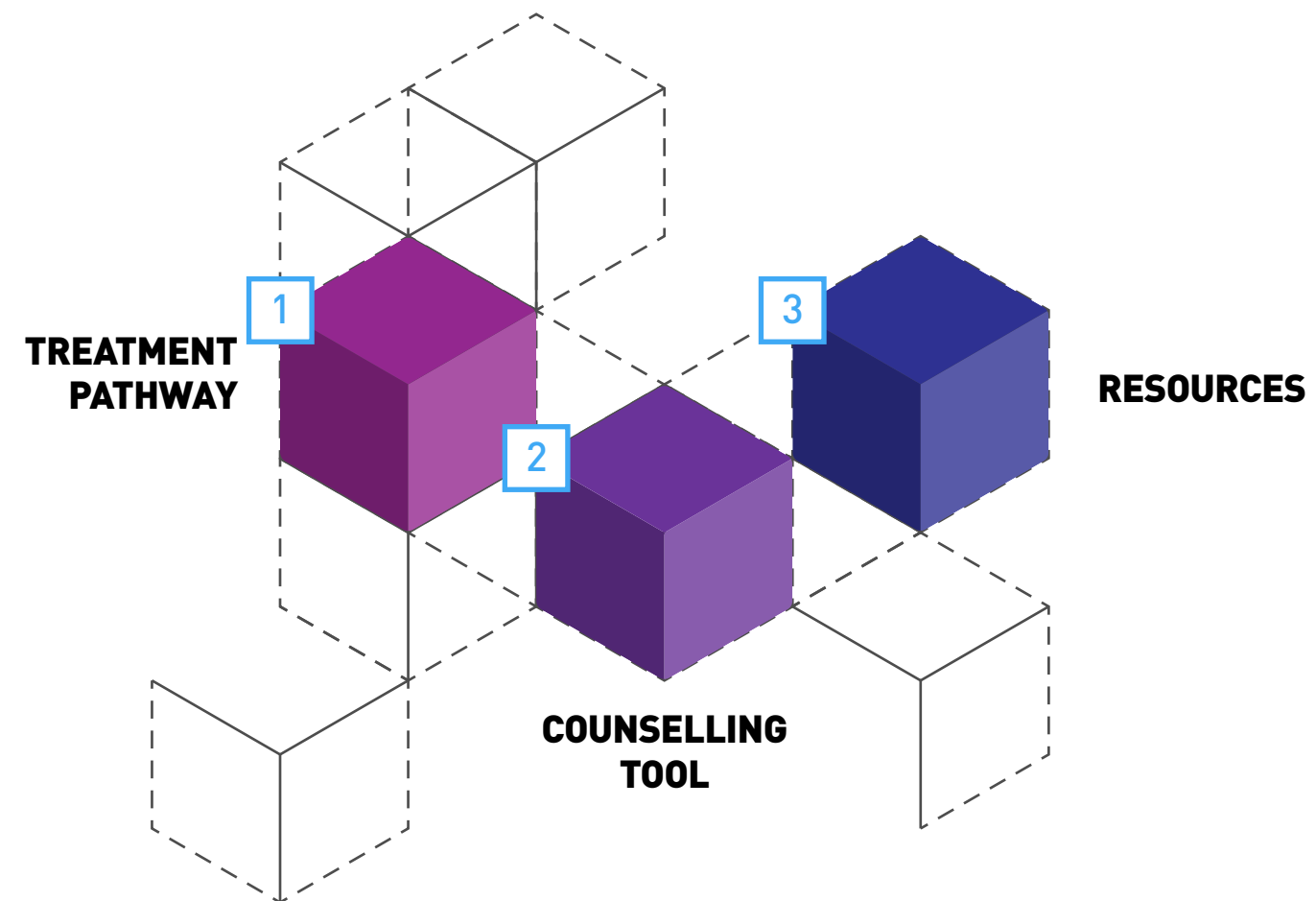


IMPROVING PATIENT CONVERSATIONS AND TREATMENT DECISIONS

In Patients with **Stage III** Non-Small Cell Lung Cancer



NOTES

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[2] Click/Tap links to Counselling Tool page within the same window

[3] Click/Tap links to Resources page within the same window

[1] Click/Tap links landing page within the same window

[2] Click/Tap links to Treatment Pathway page within the same window

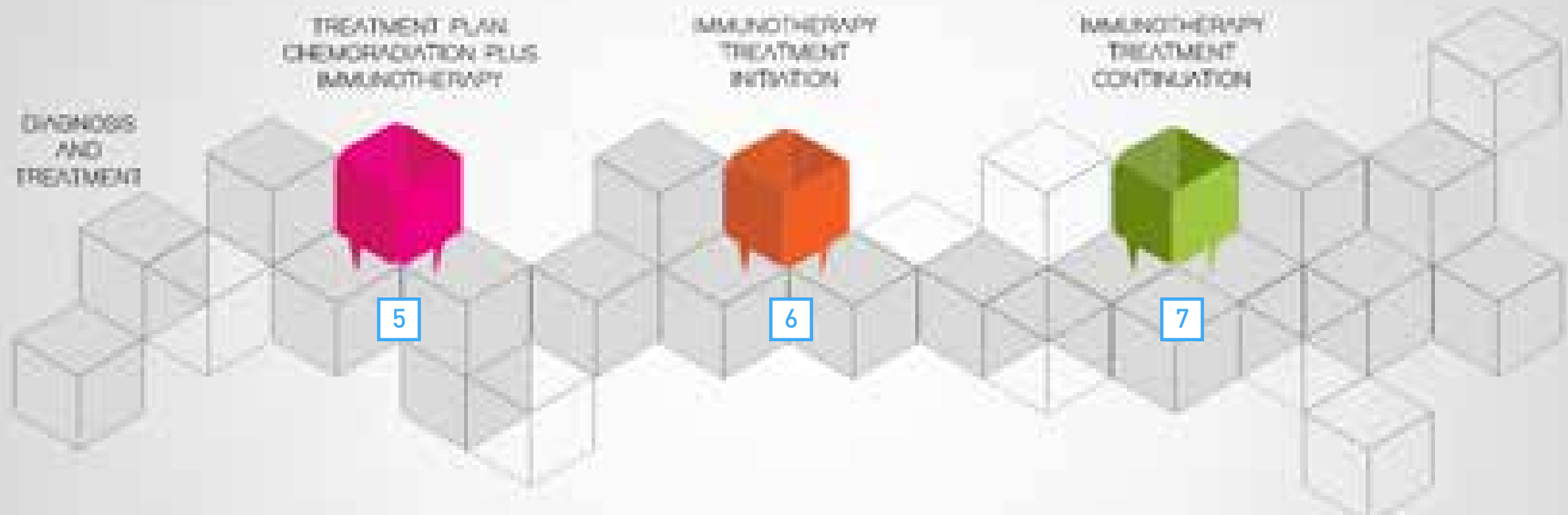
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[7] Click/Tap links to Immunotherapy Treatment Continuation page within the same window



Treatment Pathway

This visual depicts the treatment pathway for patients with stage III, unresectable non-small cell lung cancer. There are three points for counselling intervention along the pathway.

Outline the full treatment program with chemoradiation + immunotherapy to patients as you have that initial treatment discussion with them.

There is a second opportunity to counsel patients on immunotherapy prior to the initiation of immunotherapy.

As patients move forward with treatment on immunotherapy, please take the opportunity during follow-up to reinforce the benefit of treatment to ensure patients stay the treatment course.

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This website was developed by a scientific planning committee of Canadian lung cancer experts including medical oncologists, radiation oncologists, an oncology pharmacist and an oncology nurse, for educational purposes and should be used with patients to help them make the most informed treatment decision.

Accreditation statement here...

IMPACT³

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Visual of Patient and HCP interaction; “Counselling” moment
[visual 3]

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An introduction to your lung cancer treatment journey

You have a diagnosis of **stage III non-small cell lung cancer (NSCLC)**. This means that the cancer has grown within your lung and spread into the nearby lymph nodes, or adjacent structures.

However, the cancer is limited to the chest and there is no evidence that it has metastasized or spread to distant areas of your body.

What is my cancer staging?

Lung cancer staging **is way** of describing where the lung cancer is located and if it has spread to other parts of the body. Knowing the stage of the cancer helps the healthcare team assess the outlook or prognosis and helps them plan your treatment.

Stage III lung cancer is divided into three stages: stage IIIA, stage IIIB, and stage IIIC.

9Stage IIIA

10Stage IIIB

11Stage IIIC

Tumors

Non- metastatic lymph nodes

Metastatic lymph nodes

12

How is Stage III Lung cancer treated?¹

Treatment selection depends on characteristics of the lung cancer including the tumour size, location and whether it has spread. Treatment selection can also be influenced by patient factors such as your health status and medical history, age, past treatments and other health conditions that you may have.

13Surgery

14Radiation

Drug Therapy

Drug therapy for stage III lung cancer include chemotherapy and immunotherapy.

15Chemotherapy

16Immunotherapy

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[7] Click/Tap links to Immunotherapy Treatment Continuation page within the same window

[8] Click/Tap toggles open/close collapsing content

[9] Click/Tap Reveals Text:
Tumor of any size has spread to nearby lymph nodes, and may have invaded nearby tissues or organs

[10] Click/Tap Reveals Text:
Tumor of any size has spread to the chest wall, near the heart, diaphragm or other nearby organs, and has spread to nearby lymph nodes OR Tumor smaller than 5 cm has spread to distant lymph nodes AND

• is in the main air passage OR Invades the lung’s surface

[11] Click/Tap Reveals Text:
Tumor has spread to distant lymph nodes AND

• 5 – 7 cm OR
• Larger than 7 cm or spreads to the diaphragm or other nearby organs OR
• Has spread to the chest wall or near the heart

[12] Click/Tap Reveals Text underneath:
Reference 1:
Rami-Porta R, Asamura H, Travis WD, Rusch VW. Lung Cancer — Major Changes in the American Joint Committee on Cancer Eighth Edition Cancer Staging Manual. CA Cancer J Clin. 2017.

[13] Click/Tap Reveals Text:
Surgery involves the removal of a tumour and some healthy tissue around the tumour. Surgery is only an option if the cancer is found early, if the tumour has not spread within the chest or to other organs and if the tumour can be removed completely.

[14] Click/Tap Reveals Text:
Radiation works by directing a high energy x-ray beam at the tumour and nearby lymph nodes to interfere with dividing tumour cells by either killing them or stopping the cells from growing and reproducing.

[15] Click/Tap Reveals Text:
Chemotherapy uses drugs to destroy cancer cells or slow their growth. This treatment is given through an infusion into the bloodstream in order to reach cancer cells all over the body.

[16] Click/Tap Reveals Text:
Immunotherapy is a new type of treatment that works by helping your immune system fight the cancer. Immunotherapy can help slow or prevent the cancer from growing and can also shrink the tumour. Immunotherapy works differently from chemotherapy and radiation therapy. Instead of killing cancer cells directly, immunotherapy helps the body’s own natural defense system (the immune system) become better at detecting and destroying cancer cells.

[17] Click/Tap toggles open/close collapsing content

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[19] Click/Tap toggles open/close collapsing content

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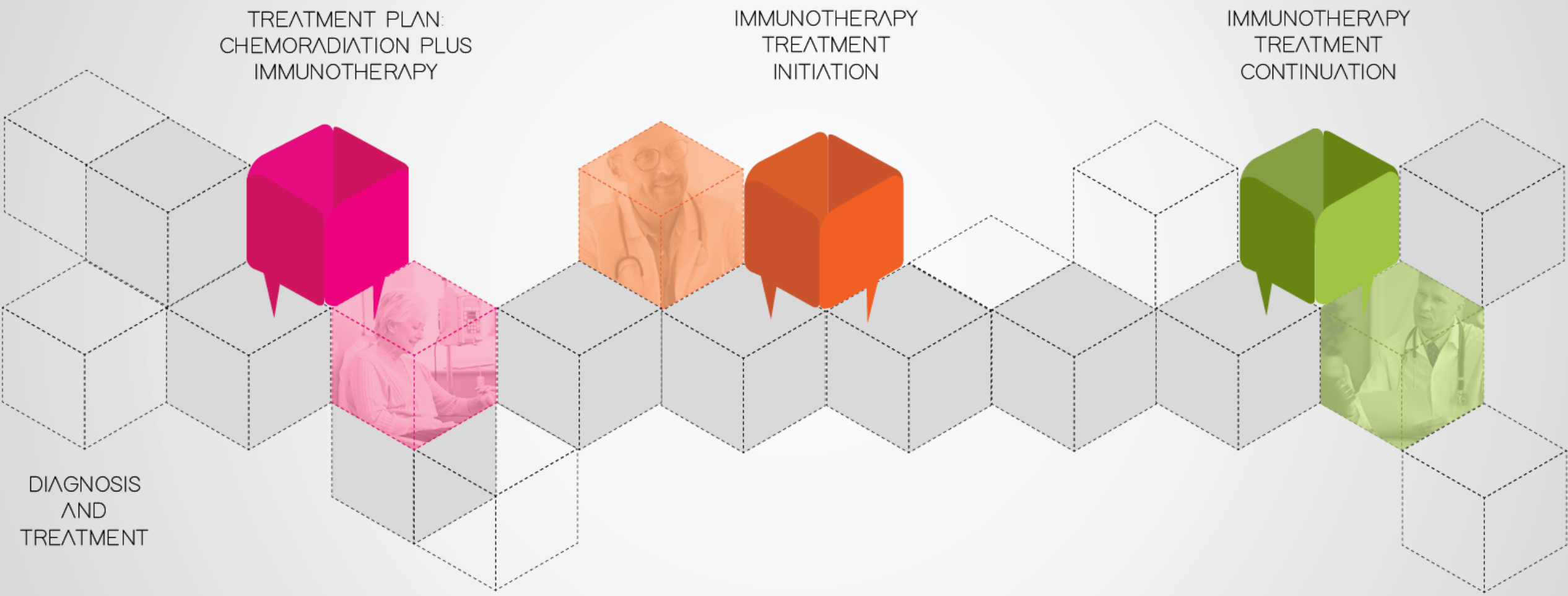
Visual of Patient and HCP interaction; “Counselling” moment
[visual 3]

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Can I have surgery to remove the tumour?

Your healthcare team has determined that due to the location of the **tumor** or lymph nodes involved, surgery is not a good option for treating your cancer.

What does my treatment journey look like?

The most effective treatment option for stage III lung cancer is chemotherapy + radiation which is given together (chemoradiation) followed by immunotherapy. This treatment is given in two parts:



PART 1: CHEMOTHERAPY

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PART 2: IMMUNOTHERAPY

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Visual of Patient and HCP interaction; “Counselling” moment
[visual 3]

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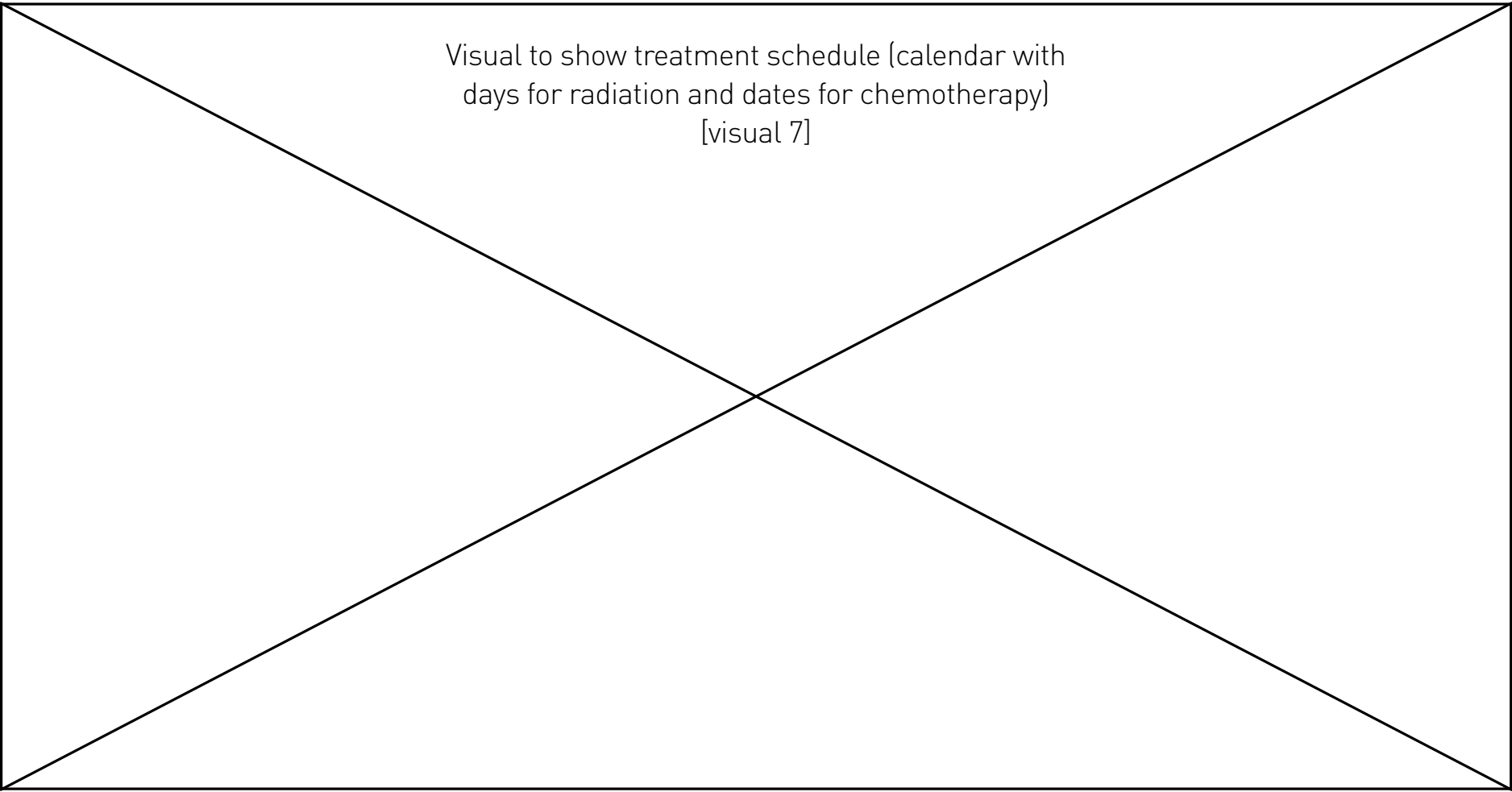
9

PART 1: CHEMOTHERAPY

10

Part 1: Chemoradiation

Chemoradiation is given over 6-7 weeks. This involves radiation given daily, Monday to Friday. Chemotherapy will be given at the same time with the schedule to be determined by your oncologist.



Launch Calendar

11

PART 2: IMMUNOTHERAPY

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[11] CClick/Tap Launches Calendar in another window:
<https://fullcalendar.io/#demos>

[11] Click/Tap toggles open/close collapsing content

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Visual of Patient and HCP interaction; “Counselling” moment
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Part 2: Immunotherapy with Durvalumab

Most patients who complete chemoradiation will receive immunotherapy. You will have a CT scan or be assessed by your healthcare team to make the final decision. The chemoradiation that you received in Part 1 of treatment makes the tumour cells even more susceptible to the immunotherapy. Durvalumab is an immunotherapy that is approved for stage III lung cancer and is given every 2 weeks for 1 year.

What are the goals of treatment?

The goal of treatment is to cure the cancer. For some patients treatment with chemoradiation and immunotherapy will lead to a cure. For others, this is the best way to control the cancer and prevent it from affecting them for as long as possible. Your doctor or healthcare team will provide information specific to you.

What are the side effects of chemoradiation?

Please refer to the information provided by your healthcare team on the side effects of chemotherapy plus radiation.

Commitment to the lung cancer treatment journey

Treatment with chemoradiation and immunotherapy with durvalumab offers the best chance for a cure, and committing to the full two-part treatment program will increase the chance of achieving that goal.

Visual of healthcare team or physician shaking hands with a patient
[visual 8]

MOVING FORWARD12▶

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- [11] Click/Tap toggles open/close collapsing content
- [12] Type personal statement box

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Visual of Patient and HCP interaction; “Counselling” moment
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Chemoradiation: considering the benefits and risks

Consider the statements below about the benefits of chemoradiation and indicate how important each is to you.

I may live longer

13

Extremely Important

Not Important

My symptoms of cancer may improve

I feel like I am actively fighting the cancer

Other (list here):

14

Consider the following statements and indicate how concerned you are about treatment with chemoradiation.

There is a potential for side effects

Very Concerned

Not Concerned

I will have to make regular trips to the hospital/cancer centre

There is no guarantee the treatment will work

Other (list here):

15

icon

Colour Indicator

NOTES

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[12] Click/Tap toggles open/close collapsing content

[13] Move range slider with mouse

[14] Type personal statement box

[15] Indicator bar automatically reveals a colour depending on slider range. Red for bad, Yellow for neutral, Green for good

[16] PDF will pop up in new window

Final Questions

1. Do you understand the benefits of the chemoradiation?
2. Do you have any questions for your healthcare team about risks and side-effects of chemoradiation?
3. Is there anything else that you would like to know?
4. Have all your questions been answered, and all your concerns addressed?
5. Can I introduce you to the rest of the team to help you schedule your treatment?

Clinical Practicalities of Chemoradiation

Download

16

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IMPACT³

IMproving PAtient COnversations and TReatment Decision Making in Stage III NSCLC

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Banner graphic of Immunotherapy Treatment Initiation

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Immunotherapy (IO)

Animation to communicate mechanism of actions for chemotherapy and immunotherapy, and how they're different [animation 1]

10

Completing Part 2

PART 2

IMMUNOTHERAPY
12 months

CHEMORADIATION
6-7 weeks

PART 1

BEST CHANCE
FOR
LONG-TERM
SURVIVAL

11

IO VERSUS NO TREATMENT

12

POSSIBLE BENEFITS OF IO

13

POSSIBLE SIDE-EFFECTS OF IO

14

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[8] Click/Tap toggles open/close collapsing content

[9] Click/Tap Reveals Text:
Immunotherapy (IO) is a very different type of treatment from chemotherapy. While chemoradiation kills cancer cells directly, immunotherapy helps the body's own natural defense system (the immune system) become better at detecting and destroying cancer cells. Treatment with immunotherapy will be longer, but less intensive than part 1, which means that you will only have a treatment once every two weeks. Treatment is administered as an infusion for 1 year. This is a very different therapy, and you will feel better than you did during chemoradiation.

[5] Click/Tap Reveals Text:
Completing part 2 of your treatment program with immunotherapy will improve the chances that your body will launch a strong response to the cancer and may help you live longer than with chemoradiation alone.

² Antonia SJ, Villegas A, Daniel D, et al. Overall Survival with Durvalumab after Chemoradiotherapy in Stage III NSCLC. N Engl J Med. 2018 Dec 13;379(24):2342-2350. doi: 10.1056/NEJMoa1809697.
³ Antonia SJ, Villegas A, Daniel D, et al. Durvalumab after Chemoradiotherapy in Stage III Non-Small-Cell Lung Cancer. N Engl J Med. 2017 Nov 16;377(20):1919-1929. doi: 10.1056/NEJMoa1709937.
⁴ pan-Canadian Oncology Drug Review Final Clinical Guidance Report: Durvalumab (Imfinzi) for Non-Small Cell Lung Cancer (Report date 3 May 2019). Page 4. https://cadth.ca/sites/default/files/pcodr/Reviews2019/10131DurvalumabNSCLC_fnCGR_NOREDACT_Post_03May2019_final.pdf [Last Accessed, 26 August 2019]

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Banner graphic of Immunotherapy Treatment Initiation

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Benefits of immunotherapy treatment vs. no additional treatment

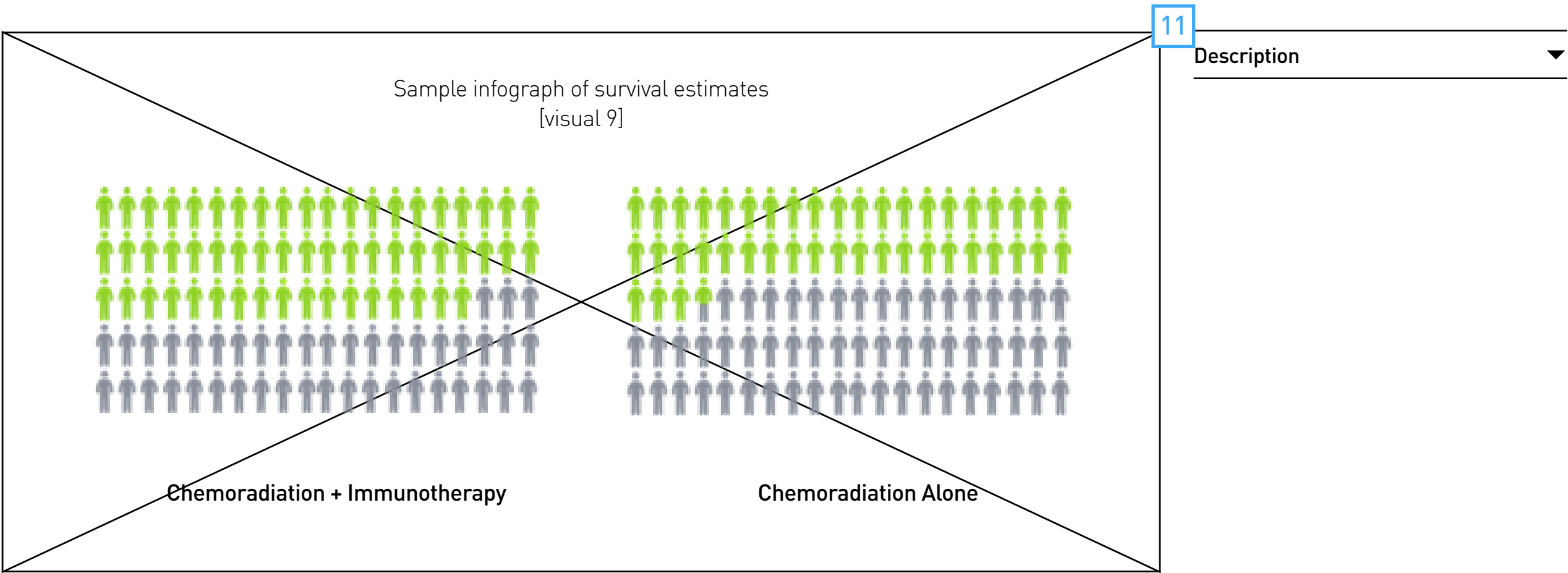
A large clinical trial looked at survival for patients who continued treatment with durvalumab versus those who did not. This clinical trial involved 709 patients with stage III, unresectable lung cancer whose disease did not progress on chemoradiation.^{2,3} [10](#)

Survival

Patients who were treated with chemoradiation + immunotherapy survived longer than the patients who stopped treatment after chemoradiation.

Three-year survival estimates

Of patients who were treated with chemoradiation + immunotherapy, 57.0% were alive at 3 years, as compared to 43.5% who were alive from the group that was treated with chemoradiation alone.



POSSIBLE BENEFITS OF IO12

POSSIBLE SIDE-EFFECTS OF IO13

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⁴pan-Canadian Oncology Drug Review. Final Clinical Guidance Report: Durvalumab (Imfinzi) for Non-Small Cell Lung Cancer [Report date 3 May 2019]. Page 4. https://cadth.ca/sites/default/files/pcodr/Reviews2019/10131DurvalumabNSCLC_fnCGR_NOREDACT_Post_03May2019_final.pdf (Last Accessed, 26 August 2019)

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[9] Click/Tap toggles open/close collapsing content

[10] Click/Tap Reveals Text on right column:
Reference 2:
Antonia SJ, Villegas A, Daniel D, et al. Overall Survival with Durvalumab after Chemoradiotherapy in Stage III NSCLC. N Engl J Med. 2018 Dec 13;379(24):2342-2350. doi: 10.1056/NEJMoa1809697.
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[11] Click/Tap Reveals Text:
If 100 people are treated with chemoradiation + immunotherapy, 14 more people will be alive at 3 years after diagnosis of stage III lung cancer vs treatment with chemoradiation alone.

[12] Click/Tap toggles open/close collapsing content

[13] Click/Tap toggles open/close collapsing content

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Banner graphic of Immunotherapy Treatment Initiation

TREATMENT INITIATION

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IO VERSUS NO TREATMENT

9

POSSIBLE BENEFITS OF IO

10

What to expect: Possible benefits of immunotherapy

Treatment with chemoradiation + immunotherapy is an effective treatment program that delays disease progression and helps patients live longer.

Immunotherapy improves the chances that you your body will launch a strong response to the cancer and may help you live longer than with chemoradiation alone.

11

Additional Benefit 1

12

Additional Benefit 2

13

Additional Benefit 3

Visual of daily activities of living; activities the patients don't want to miss due to their disease
[visual 10]

POSSIBLE SIDE-EFFECTS OF IO

14

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IMPACT³

IMproving PAtient COnversations and Treatment Decision Making in Stage III NSCLC

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[11] Click/Tap Reveals Text:
Quality of life generally improves as patients move to part 2 of treatment with immunotherapy.

[12] Click/Tap Reveals Text:
Patients who have already received immunotherapy treatment with durvalumab reported that they had a better sense of well-being, were more independent and had less stress and were able to engage more with their loved ones.⁴

[13] Click/Tap Reveals Text:
Choosing to forego further treatment may affect your long-term outcomes.

[14] Click/Tap toggles open/close collapsing content

[15] Click/Tap toggles open/close collapsing content

Banner graphic of Immunotherapy Treatment Initiation

TREATMENT INITIATION

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IO VERSUS NO TREATMENT

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POSSIBLE BENEFITS OF IO

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POSSIBLE SIDE-EFFECTS OF IO

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What to expect: Possible side-effects of immunotherapy

Immunotherapy may cause side-effects which may be of concern to you or may impact your health and quality of life.

- Side-effects can occur at any time during or after your treatment however, not all patients will experience all side effects, and some patients may only experience minimal effects.
- Let your healthcare team know immediately if you start to feel unwell during or after your treatment. If symptoms are caught early your team can prevent them from getting worse. Your healthcare team can help you manage side effects so that they do not interfere with your treatment schedule.
- Common side effects include cough, upper respiratory tract infection, rash, diarrhea and fever.
- In rare cases if the immune system becomes "over-active" it can cause more serious side effects, which can include lung infection and lung inflammation.

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5Treatment Plan:
Chemoradiation + Immunotherapy

6Immunotherapy
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Treatment Continuation

Banner graphic of Immunotherapy Treatment Initiation

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POSSIBLE BENEFITS OF IO10▶

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MOVING FORWARD12▼

What are your goals of treatment?

List the milestones or other events that you are most looking forward to.

- A graduation?
- A wedding?
- A birth?
- More time with loved ones?
- Travel, sports, hobbies or other activities that you enjoy?

On the other hand, think about what it would mean if you choose not to continue with Part 2 of your treatment such as avoiding potential side effects and additional trips to the hospital or cancer centre. **What matters most to you?**

Adding Immunotherapy: considering the benefits and risks

Consider the statements below about the benefits of immunotherapy and indicate how important each is to you.

Extremely Important

Not Important

13

I may live longer

My symptoms of cancer may improve

I feel like I am actively fighting the cancer

14

Other (list here):

Consider the following statements and indicate how concerned you are about additional treatment with immunotherapy.

Very Concerned

Not Concerned

There is a potential for side effects

I will have to make regular trips to the hospital/cancer centre

There is no guarantee the treatment will work

Other (list here):

15

icon

Colour Indicator

Final Questions

1. Do you understand the benefits of additional treatment with immunotherapy?
2. Do you have any questions for your healthcare team about the side effects of immunotherapy?
3. Is there anything else that you would like to know? What other information do you need?
4. Can I introduce you to the rest of the team to help you schedule your treatment?

Clinical Practicalities of Immunotherapy

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This website was developed by a scientific planning committee of Canadian lung cancer experts including medical oncologists, radiation oncologists, an oncology pharmacist and an oncology nurse, for educational purposes and should be used with patients to help them make the most informed treatment decision.

² Antonia SJ, Villegas A, Daniel D, et al. Overall Survival with Durvalumab after Chemoradiotherapy in Stage III NSCLC. N Engl J Med. 2018 Dec 13;379(24):2342-2350. doi: 10.1056/NEJMoa1809697.

³ Antonia SJ, Villegas A, Daniel D, et al. Durvalumab after Chemoradiotherapy in Stage III Non-Small-Cell Lung Cancer. N Engl J Med. 2017 Nov 16;377(20):1919-1929. doi: 10.1056/NEJMoa1709937.

⁴ pan-Canadian Oncology Drug Review Final Clinical Guidance Report: Durvalumab (Imfinzi) for Non-Small Cell Lung Cancer (Report date 3 May 2019). Page 4. https://cadth.ca/sites/default/files/pcodr/Re-views2019/10131DurvalumabNSCLC_fnCGR_NOREDACT_Post_03May2019_final.pdf [Last Accessed, 26 August 2019]

NOTES

[1] Click/Tap links landing page within the same window

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[11] Click/Tap toggles open/close collapsing content

[12] Click/Tap toggles open/close collapsing content

[13] Move range slider with mouse

[14] Type personal statement box

[15] Indicator bar automatically reveals a colour depending on slider range. Red for bad, Yellow for neutral, Green for good

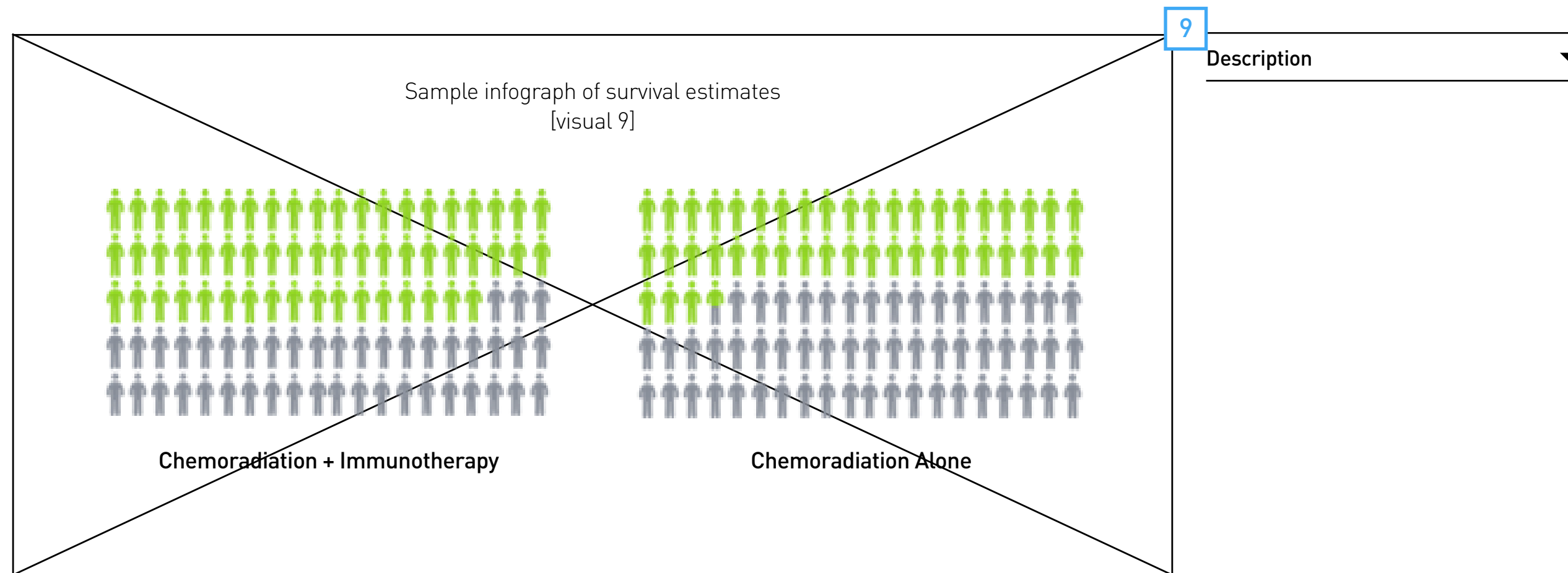
[16] PDF will pop up in new window

Visual of patient HCP counselling moment; emphasize the “conversing” part
[visual 11]

TREATMENT PATHWAY

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The goal of the two-part lung cancer treatment program is cure



CONTINUING TREATMENT

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COMPLETING TREATMENT

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[8] Click/Tap toggles open/close collapsing content

[9] Click/Tap Reveals Text:

- It is important to remember that treatment with immunotherapy after chemoradiation is effective in helping more people live longer and is the best option to help control the cancer prevent it from affecting your life.

- Immunotherapy improves the chances that you your body will launch a strong response to the cancer and may even lead to a cure in some patients.

- Patients who have already received immuno-therapy treatment with durvalumab reported that they had a better sense of well-being, were more independent and had less stress and were able to engage more with their families and loved ones.

[10] Click/Tap toggles open/close collapsing content

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Continuing your treatment: Staying on track to complete the journey

Your healthcare team can help you manage side effects you may experience so that you can stay on treatment for the recommended duration to get the maximum benefit from treatment with immunotherapy.



Let your healthcare team know if you have any questions or concerns about your treatment, they are here to help see you through your full treatment journey.

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IMPACT³

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TREATMENT PATHWAY

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CONTINUING TREATMENT

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Looking forward

Completing the full 2-part of your lung cancer treatment program with chemoradiation + immunotherapy is your best chance for a cure.

Completing the treatment program will give you more time, and importantly, more time with your loved ones.

What other milestones, other events or activities that you are looking forward to?



What comes next?

Your medical oncologist/healthcare team will continue to follow up with you to monitor how well you are doing after treatment.

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Banner image depicting "Resources"

Intervention Point 1: Chemotherapy Initiation and Follow-Up

Preview image of resource



Clinical Practicalities of Chemoradiation

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Intervention Point 2: Immunotherapy Treatment Initiation

Preview image of resource



Clinical Practicalities of Immunotherapy

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