

CLL SPOTLIGHT

 **The Leukemia & Lymphoma Society®**
Fighting Blood Cancers

News for People Living with Chronic Lymphocytic Leukemia

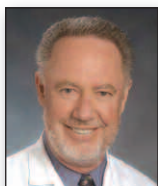
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Spotlight on the Latest Advances in CLL



Every day, researchers around the world dedicate themselves to developing new and better therapies to treat CLL. Each December, these experts come together at the American Society of Hematology (ASH) Annual Meeting to discuss their work and

share new discoveries. Dr. Michael J. Keating, a world-renowned expert in CLL from M.D. Anderson Cancer Center in Houston, Texas, attended the recent ASH meeting and relayed these new discoveries during a live telephone education program held by The Leukemia & Lymphoma Society on December 16.

GROUNDBREAKING RESEARCH

Important CLL studies at ASH this year included new front-line therapies, new therapies for relapsed disease, new single-agent drugs and new combinations of therapies, as well as advances in understanding the genetics of CLL. Dr. Keating discussed two large international studies reported at ASH—the largest clinical trials ever in CLL—which showed that adding rituximab (Rituxan®) to the standard combination of fludarabine (Fludara®) and cyclophosphamide improved response rates, both for patients who had not received prior therapy and for patients with relapsed CLL. “Both of these studies showed a very significant advantage with the addition of rituximab,” he explained. Dr. Keating expects that in the future this combination of rituximab, fludarabine and cyclophosphamide will become a new standard of care in CLL. Studies like these, which involve hundreds of patients from multiple sites in different countries, would never be possible without the dedication of researchers and the participation of patients in clinical trials.

Dr. Keating also explained that researchers are developing new therapies that work by blocking proteins and enzymes that allow CLL cells to grow. New uses for existing therapies were also discussed at ASH, including the use of bendamustine (Treanda®) in combination with rituximab for relapsed CLL and the use of lenalidomide (Revlimid®) as a front-line CLL therapy for patients over age 65. “I think that what’s apparent is that there is now a much broader range of agents becoming available [for patients with CLL],” said Dr. Keating.

GUIDING THERAPY DECISIONS

Looking to the future, Dr. Keating discussed how researchers are working to develop a better understanding of the factors, including specific chromosome abnormalities, which determine when patients are most likely to need and benefit from treatment. He expects that within the next few years, physicians will be able to give patients an estimate, at the time of diagnosis, of when they are likely to need treatment. ●

More CLL News from ASH

You can learn more about these and other exciting advances in CLL by visiting www.LLS.org/leukemiaeducation to hear a replay or read the transcript of Dr. Keating’s entire program, **CLL: Update from the American Society of Hematology (ASH) Annual Meeting.**

A written transcript and audio archive from the June 2008 teleconference, **CLL Therapy: An Update from the American Society of Clinical Oncology**, is also available.

The Leukemia & Lymphoma Society’s CLL Spotlight program includes:

CLL Spotlight News • CLL Spotlight Telephone Education Series • Chronic Lymphocytic Leukemia Booklet* • CLL: A Guide for Patients and Caregivers Easy-to-Read Booklet* • First Connection*

*Available in English and Spanish

Spotlight on Survivorship

INSPIRATIONAL VOLUNTEER WHO LOOKS, AND WALKS, FORWARD



Viktoria Bombardi-Wilson has always set goals for herself.

She was 51 years old and the mother of two teenagers when she was diagnosed with CLL in 1996, and having goals helped her to cope with the uncertainty she felt. She explains, “At the time, I thought, ‘I have to see my children graduate.’ Then it was, ‘I want to see them get married.’ Now one of them is married, and someday I would like to have grandchildren—there is always something to look forward to!”

“Everyone can make a difference, no matter what it is they’re doing.”

Having a goal and a purpose is also what motivates her as a Team in Training® volunteer. She became involved in the program seven years ago because a physician had recommended that she lose weight, and she saw this as a way to do it. When she signed up for her first event, the 2001 Dublin Marathon, she immediately thought, “What have I gotten myself into?” For that event, she walked 26.2 miles and she and her husband raised \$6,000—\$2,000 above their goal. She hasn’t looked back. Since then, she has walked in 11 marathons, completed at least as many half-marathons and raised over \$30,000 to benefit research and patient services for The Leukemia & Lymphoma Society. She has also lost 25 pounds. She explains, “I first got involved to do something healthy for

myself. Now I’m serving both myself and LLS.” She was certified as a Team in Training Coach in 2004, and now mentors others. “If I didn’t have these goals or wasn’t training other people, I probably would be too lazy or too busy to get out and walk, especially in the cold. When you know that other people are counting on you, it keeps you focused.”

Viktoria, who has not needed treatment for her CLL, is followed with blood tests every three months, an approach known as *watch and wait*. She is a volunteer for the LLS *First Connection* program, and says that some of the people she speaks with one-on-one through the program have a difficult time accepting the recommendation to watch and wait. She explains that at first, she also was uncomfortable with the idea of not immediately having treatment. She now understands that for some patients with CLL, watch and wait is the best approach and shares with others that *when* to receive therapy can be as important as *what therapy* to receive. She recommends that people seek a second opinion (as she did several years ago) if they are not comfortable with the recommendations they receive. Her primary advice to others living with CLL is to “keep occupied and live your life to the fullest.” She explains, “I still get anxious in the days leading up to my check-up with my oncologist. But when I feel down, I don’t keep it in, I share it and that helps me.”

Through her volunteer work with LLS, Viktoria shares her time, her experience, and her seemingly

unending supply of energy. She says, “I believe that everyone should be giving something back to The Leukemia & Lymphoma Society. Everyone can make a difference, no matter what it is they’re doing.” ●



Like Viktoria, you can make a difference in the lives of others living with blood cancers.

To find out about programs and volunteer opportunities at your local chapter, including *First Connection* and *Team in Training*, call the LLS Information Resource Center (IRC) at (800) 955-4572 or visit www.LLS.org.

Find CLL Clinical Trials with TrialCheck®

LLS has partnered with the Coalition of Cancer Cooperative Groups to offer TrialCheck®, a clinical trial search tool that gives immediate access to listings of CLL clinical trials. Visit www.LLS.org/clinicaltrials and follow the link to TrialCheck. By answering a few simple questions you will receive a list of available clinical trials.

Information specialists in the IRC are also available to answer your questions about clinical trials by phone at (800) 955-4572, email at infocenter@LLS.org or online at www.LLS.org (click on “Live Help”).