



## 2017 Program Schedule

August 3-5, 2017 | Charlotte, NC

*Collaborating to Move Research Forward*

### Thursday, August 3

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- 10:00 – 1:00 Patient Advocacy Session (for patient advocates only)
- 2:00 – 4:00 Registration
- 1:30 – 3:30 Survivorship Working Group Meeting
- 4:00 – 5:00 Opening Remarks and Introductions
- 5:00 – 6:00 **Keynote Address and Q&A:** “Using Communication Skills to Transform Healthcare, Our Organizations and Ourselves” | *Timothy Gilligan, MD, Cleveland Clinic*
- 6:00 – 9:00 Reception and Dinner

### Friday, August 4

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- 7:00 – 8:00 Breakfast
- 8:00 – 9:45 **Patient-Centered Approaches to Research** | *Angela B. Smith, MD, MS, University of North Carolina and John L. Gore, MD, MS, University of Washington, Co-Chairs*
- Engaging Patients in Research | *Angela Smith, MD, MS, University of North Carolina and Renata Louwers, patient advocate*
  - Patient-Reported Outcomes - Sharing Data across Healthcare Systems | *Danielle Lavalley, PharmD, PhD, University of Washington Medical Center*
  - Implementing PROs into Clinical Practice | *Benjamin Brooke, MD, PhD, University of Utah Health Care*
- 9:45 – 10:15 **2015 James Family Foundation and Partner Fund Management Bladder Cancer Research Innovation Award**
- “Epigenetic regulation of bladder cancer progression.” | *Cory Abate-Shen, PhD, Columbia University Medical Center*
- 10:15 – 10:30 Break
- 10:30 - 12:30 **Breakout Sessions | Please see Appendix A.**
- 12:30 – 1:30 Lunch

- 1:30– 3:30 **Sequencing and Tissue Based Biomarker Development: Increased Understanding and Related Application** | *Piyush Agarwal, MD, National Cancer Institute, and Hikmat Al-Ahmadie, MD, Memorial Sloan-Kettering Cancer Center, Co-Chairs*
- Challenges and Opportunities Associated with Biomarkers | *Elise Kohn, MD, National Cancer Institute*
  - Genomics Based Biomarker Development: Increased Understanding and Related Application | *Lars Dyrskjøt, PhD, Aarhus University Hospital*
  - Updated Analysis of TCGA | *Seth Lerner, MD, FACS, Baylor College of Medicine*
  - Genomics of Histologic Variants | *Hikmat Al Ahmadie, MD, Memorial Sloan-Kettering Cancer Center*
  - Tissue Infiltrates and Tissue Microenvironment to Predict Immune Therapy Response | *Randy F. Sweis, MD, University of Chicago*
- 3:30– 4:30 **BCAN Research Presentations**
- **2015 BCAN Young Investigator Award** – “The Role of TP63 and ATDC in Invasive Bladder Cancers.” | *Philip Palmbo, MD, PhD, University of Michigan*
  - **2017 John Quale Travel Fellow Presentations**
- 5:30-7:00 Happy Hour

## Saturday, August 5

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- 7:00 – 8:00 Breakfast
- 8:00 – 8:50 **BCAN 2016 Young Investigator Presentations**
- **The Stephen Hale Gushée Young Investigator Award** – “Identifying Genomic Determinants of Chemoradiotherapy Response in Muscle-Invasive Bladder Cancer.” | *Kent Mouw, MD, PhD, Dana-Farber Cancer Institute*
  - **The JPB Foundation Young Investigator Award** – “Role of antigen-specific immunity in BCG therapy for bladder cancer.” | *Niannian Ji, PhD, University of Texas Health San Antonio*
- 8:50 – 9:20 **2017 John Quale Travel Fellow Presentations**
- 9:20 - 9:30 Break
- 9:30– 11:30 **Breakout Sessions and Working Groups | Please see Appendix B**
- 11:30 – 1:15 Lunch
- 1:15 – 3:15 **Future Targets and Therapeutic Approaches – Beyond Immunotherapy** | *Matt Galsky, MD, Mount Sinai Hospital, Jonathan Rosenberg, MD, Memorial Sloan-Kettering Cancer Center, Jean Hoffman-Censits, MD, Thomas Jefferson University, Co-Chairs*
- Antibody drug conjugates | *Jonathan Rosenberg, MD, Memorial Sloan-Kettering Cancer Center*
  - Targeting recurrent somatic alterations | *Peter H. O’Donnell, MD, University of Chicago Medicine*
  - Targeting angiogenesis | *Arjun Balar, MD, New York University Langone Cancer Center*
  - Targeting tumor metabolism | *Ubaldo Martinez-Outschoorn, MD, Thomas Jefferson University*
- 3:15 – 3:30 **Closing Remarks**

### **Communication skills for collaborative decision-making - Workshop (limited registration)**

*Timothy Gilligan, MD, Cleveland Clinic and Elizabeth Plimack, MD, Fox Chase Cancer Center, Co-Chairs*

There is a strong trend in medicine toward recognizing the patient as a key member of the healthcare team. By helping patients play an active role in healthcare decision-making, we can help mitigate the sense of disempowerment that accompanies illness. This workshop will present and offer an opportunity to practice communication skills for engaging patients and colleagues in collaborative decision-making. The highly interactive workshop will focus on experiential learning and skills practice.

### **Bladder Preservation - Future Perspectives.** *James McKiernan, MD, Columbia University, and Jason Efstathiou, MD, PhD, Massachusetts General Hospital, Co-Chairs*

Addressing areas of progress and controversy including topics such as cystectomy vs bladder-sparing therapy, the role of neoadjuvant vs adjuvant chemotherapy, surgical considerations such as TURBT alone, and feasibility of constructing a neobladder at the time of salvage cystectomy, response of CIS to chemoradiation, outcomes in the elderly, outcomes in variant histologies, role of chemotherapy alone in genetically favorable subgroups, and institutional project updates.

### **Remote Monitoring and Bladder Cancer Patients: "Wearables, Apps, and the Web, oh my!"** *Eugene K. Lee, MD, University of Kansas and Jeffrey S. Montgomery, MD, University of Michigan, Co-Chairs*

Our interactive session will focus on enhancing the delivery of bladder cancer care using technology to improve patient outcomes. Specifically, we will discuss common wearable devices, healthcare applications, and web-based tools that can be applied to the bladder cancer care paradigm. Additionally, we will address the challenges for implementation of technology in the bladder cancer population, including data safety and lack of patient familiarity with technology. This is an exciting, burgeoning area of research that has the potential to dramatically improve patient safety and outcomes.

### **Survivorship Working Group.** *Tracy Downs, MD, University of Wisconsin and Heather Goltz, PhD, LMSW, MEd, University of Houston-Downtown, Co-Chairs*

Develop patient-centered programs that improve quality of life and disease self-management for bladder cancer survivors, caregivers, and family through education, research, and advocacy. First SWG session on Thursday, August 3

### **Basic Science I - Maximizing the Mouse Model to Promote Translational Immunotherapy.** *Tom Griffith, PhD, University of Minnesota and David Degraff, PhD, Penn State Hershey Medical Center, Co-Chairs*

This breakout session will explore the available animal models for preclinical bladder cancer studies, with a focus on evaluating models suitable for investigation of the role of the immune system in therapeutic intervention. The goal of this session is to bring awareness of the various strengths and weaknesses of different animal models of bladder cancer, especially within the context of the specific question(s) being asked by the investigator.

### **Upper Tract Disease: Working Group.** *Surena Matin, MD, MD Anderson Cancer Center and Vitaly Margulis, MD, University of Texas Southwestern Medical Center, Co-Chairs*

Upper tract urothelial carcinoma (UTUC) is an uncommon disease with little evidence-based data to guide clinical decision making. This ongoing working group aims to foster clinical trial and multi-institutional projects that aim to improve clinical care and research for UTUC.

### **Tough Cases I (Surgical) | Does radical cystectomy have a role in advanced or M1 disease?**

*Sia Daneshmand, MD, Keck Medicine of University of Southern California and Seth Lerner, MD, FACS, Baylor College of Medicine, Panel Co-Chairs*

In this session, we will discuss difficult clinical and surgical cases highlighting the role of palliative cystectomy, radical surgery in patients with nodal only disease, and those who have complete response to chemotherapy with an intact bladder. There will be three case presentations with active discussion and participation by the co-chairs and participants with emphasis on emerging data as well as trial opportunities. We will specifically highlight locally advanced cases and when patient should be considered 'inoperable' in addition to the role of radical cystectomy and pelvic/retroperitoneal lymph node dissection following response to systemic chemotherapy for metastatic disease.

### **Tough Cases II (Med Onc) | Toxicity Management for Immunotherapy.** *Sumanta (Monty) Pal, MD, City of Hope and Peter H. O'Donnell, MD, University of Chicago Medicine, Co-Chairs*

In this session, we will discuss the adverse event profile of novel immunotherapeutic agents. We will critically evaluate standard management paradigms for more common immune related adverse events, such as colitis and hepatitis. We will also discuss emerging serious adverse events that may be associated with checkpoint inhibition, such as myocarditis. We will attempt to differentiate the toxicity profile of novel immunotherapeutic strategies (e.g., monotherapy with checkpoint inhibitor, dual checkpoint blockade or other approaches, such as vaccine therapy or chimeric antigen receptor (CAR)-T cell therapy). We will also discuss the observed association of toxicity with response, and review emerging biomarkers that may predict toxicity.



## APPENDIX B | SATURDAY MORNING BREAKOUT SESSION DESCRIPTIONS

**Bladder Cancer & Sexuality.** *Trinity Bivalacqua, MD, PhD, Johns Hopkins University and Don S. Dizon, MD, Massachusetts General Hospital, Co-Chairs*

Discussing the state of the art surgical innovations to preserve sexual function following cystectomy; medical and psychologic management options to preserve sexual function and identity in both male and female patients; and the impact of bladder cancer treatment on physical body image and psychosocial domains of patients and their partner's sexual health.

**Working Group: Patient Centered Outcomes.** *John L. Gore, MD, MS, University of Washington and Seth Strobe, MD, Baptist Health, Co-Chairs*

Discuss research prioritization important to patients and patient advocates. Presenting the results of the PCORI funded patient centered research prioritization effort performed through BCAN. Further engagement from patients, advocates, and clinicians will be enlisted to help drive this research prioritization effort forward.

**Novel Immuno-Combinations.** *Noah M. Hahn, MD, Johns Hopkins University and, Samuel Funt, MD, Memorial Sloan-Kettering Cancer Center, Co-Chairs*

Antibodies targeting the programmed cell death protein 1/programmed death-ligand 1 (PD-1/PD-L1) axis have known therapeutic activity in patients with metastatic bladder cancer. However, only a 15-25% of patients will derive clinical benefit when treated with single agent therapy. Therefore, there is an urgent need to design optimal combinations to improve patient outcomes. Discussion highlights combination approaches to improve outcomes to front-line immunotherapy regimens as well as overcome acquired mechanisms of resistance to immune checkpoint blockade. We will provide an overview of emerging preclinical data and contextualize the current clinical trial landscape of immunocombinations in urothelial cancer.

**Bringing Precision Medicine to Bladder Cancer.** *Gopa Iyer, MD, Memorial Sloan-Kettering Cancer Center and Arjun Balar, MD, NY University Medical Center, Co-Chairs*

Discussion of the current status of predictive biomarkers for immunotherapy and chemotherapy. We will focus on the current understanding of disease biology that supports these biomarkers as well as the strengths and limitations of the technologies being utilized to define these biomarkers (in terms of tissue availability and the changes that occur pre-, during, and post-treatment within dynamic biomarkers).

**Unmet Educational and Psychosocial Needs across the Bladder Cancer Continuum.** *Heather Goltz, PhD, LMSW, MEd, University of Houston-Downtown and Tracy Downs, MD, University of Wisconsin, Co-Chairs*

Identifying and designing practical approaches to addressing unmet prevention, diagnosis, treatment, surveillance, and survivorship needs across the bladder cancer continuum. This session will highlight "big picture" issues such as diversifying recruitment for bladder cancer studies; development of translational research teams and research studies; and unmet education and psychosocial needs of survivors.

**NMIBC Novel Therapies.** *Robert Svatek, MD, UT Health San Antonio, and Joshua Meeks, MD, PhD, Northwestern Medicine, Co-Chairs*

This discussion addresses novel therapeutics/approaches for non-muscle invasive bladder cancer. Topics include novel chemotherapy regimens, immunotherapy, and techniques such as hyperthermia and intravesical drug delivery devices. Brief talks will be followed by group discussion. The goals of this session are to disseminate information about novel approaches and to identify approaches with potential for high impact.

**Basic Science II - Translational Opportunities and Future Directions for UTUC Research.** *Surena Matin, MD, MD Anderson Cancer Center and David Degraff, PhD, Penn State Hershey Medical Center, Co-Chairs*

This breakout session will focus on a review of available models of UTUC, as well as major contributors to UTUC, including microsatellite instability. In addition, an overview of recent transcriptional discoveries will be presented. The goal is to understand where we are today, and determine where we need to go in the future to advance our understanding of the biologic underpinnings of this disease and improve clinical management.

**From Pre-hab to Rehab: Optimizing Radical Cystectomy Outcomes.** *Jay Shah, MD, Stanford University Medical Center and Sima Porten, MD, MPH, University of California San Francisco, Co-Chairs*

Data support a continuum of pre-habilitation, ERAS, and rehabilitation to improve outcomes in patients undergoing cystectomy. Yet there are barriers to implementing these principles as routine patient care. This breakout discussion will identify a cohesive set of materials that can be used by providers interested in adopting a comprehensive enhanced recovery plan at their institutions. Discussion will identify ways to overcome barriers and systematically study these programs to better risk assess, assign, and deliver a personalized perioperative care plan for each patient.