

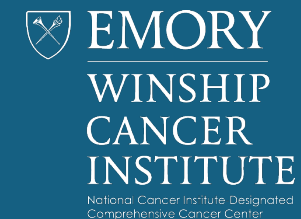


Patient-Based Panel Discussion Genitourinary Malignancies

All Speakers: Drs. Cuiro, Nazha, Atkins, Carthon,
Joshi, & Bilen

Case presented by Emory University Heme-Onc
fellow: Pranav Santapuram, MD

July 26th, 2024

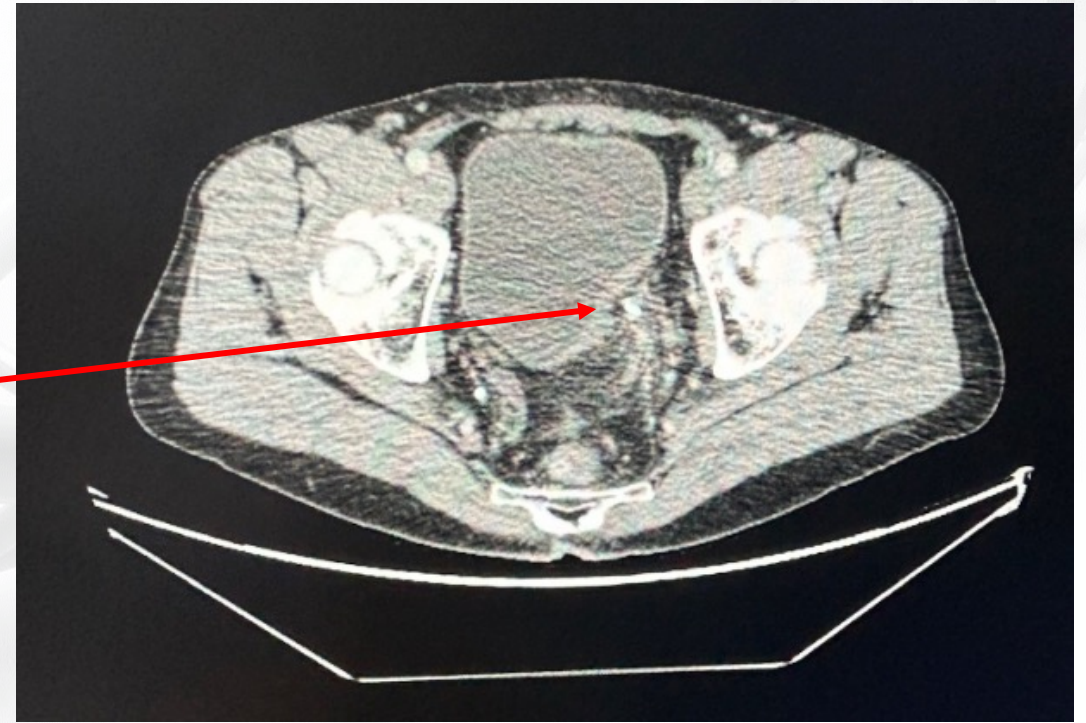


Case Summary

- 61YO male with pmhx of HTN, ECOG 0
 - Two months of mild hematuria in early 2022
 - CT AP with 4.9cm mass in base of bladder-->high grade urothelial cancer
 - No metastatic or nodal disease
- Presented to WCI for initial treatment
- Began ddMVAC March 2022 and completed four cycles
- Followed by radical cystectomy and creation of neobladder

Case Summary

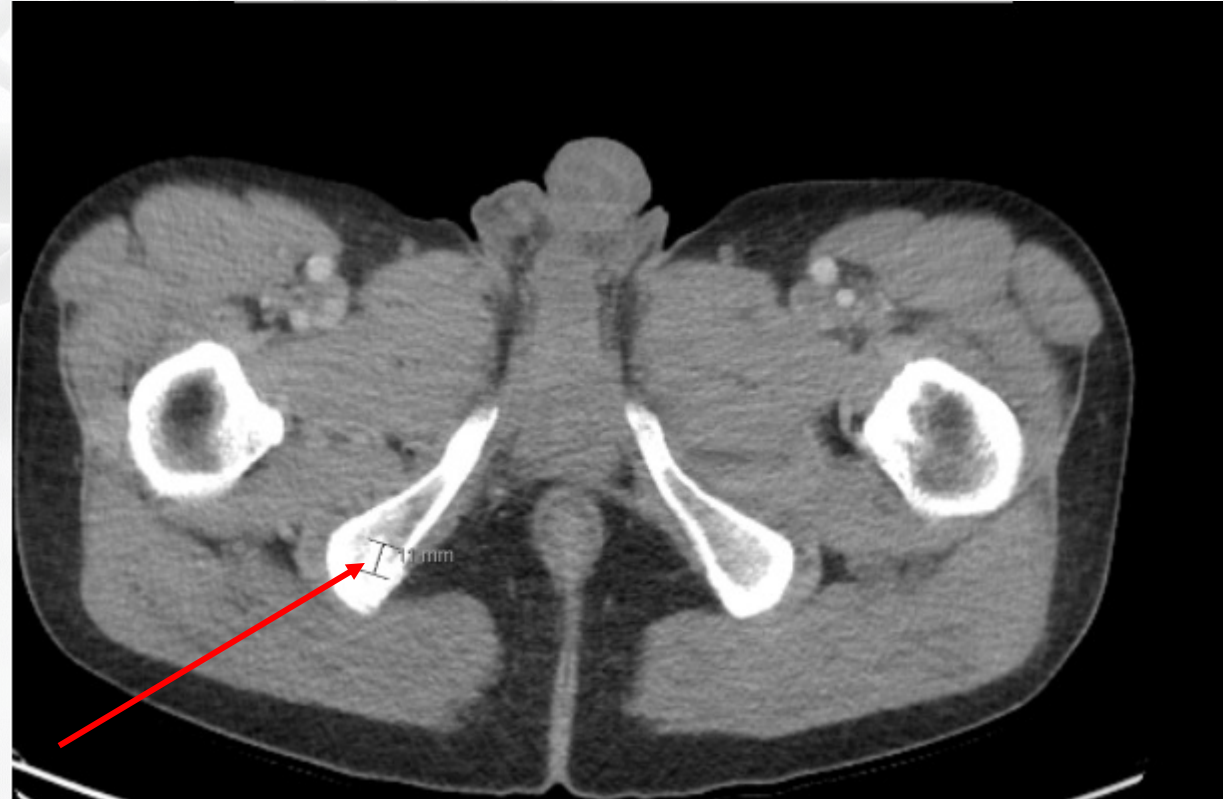
- Post ddMVAC chemo imaging showed residual tumor
 - ypT1N2



Panel Discussion

- At this juncture, what therapy would you offer patient?

After surgery, our patient went onto receive adjuvant nivolumab



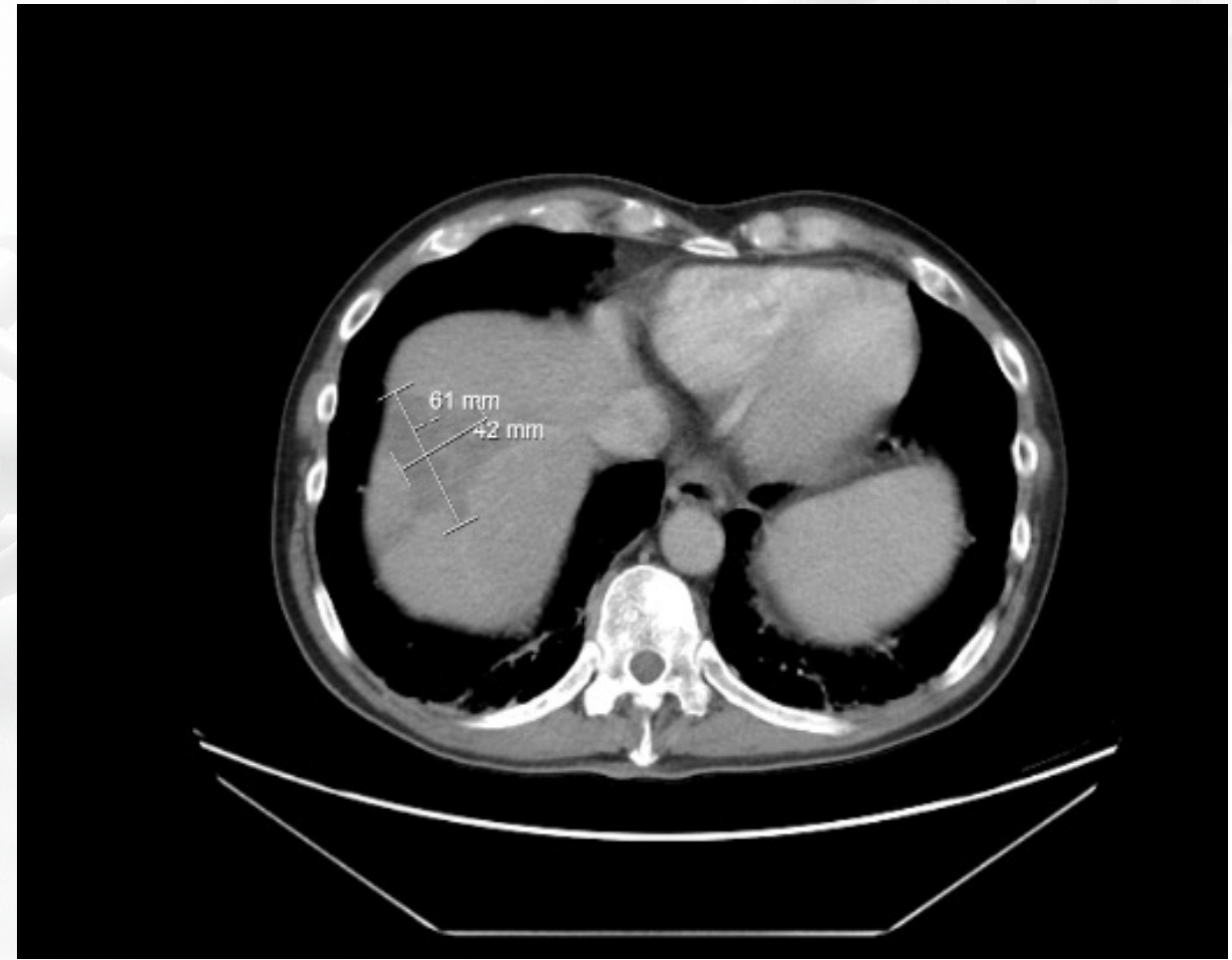
Five months into therapy: Bilobar liver lesions, enlarging RP and abd LN, peritoneal nodularity, mets in axial and appendicular skeleton

Panel Discussion

- Armed with the data we have today, what would be the optimal frontline therapy for someone who progressed ~five months into adjuvant nivolumab?

Case Summary

- Switched to EV+Pembro with resolution of liver lesions and adenopathy
 - Stable bony lesions
 - Tolerating therapy well



Panel Discussion

At the last scan, patient had PD. NGS revealed FGFR2/3 rearrangement. What would be the optimal second line therapy?