Targeting the Lymphocyte-Activation Gene-3 (LAG-3) Immune Checkpoint in Patients With Cancer: Awareness and Confidence Among Oncology Healthcare Professionals

Abstract 931

Marie N. Becker, PhD[1]; Timothy A. Quill, PhD[1]; Tian Zhang, MD, MHS[2]; Evan J. Lipson, MD[3]

1. Clinical Care Options, LLC, Reston, VA. 2. UT Southwestern Medical Center, Harold C. Simmons Comprehensive Cancer Center, Dallas, TX. 3. Sidney Kimmel Comprehensive Cancer Center, Bloomberg-Kimmel Institute for Cancer Immunotherapy, Johns Hopkins University School of Medicine, Baltimore, MD.

Email: mbecker@clinicaloptions.com

Background

- Immune checkpoint inhibitors targeting CTLA-4 and PD-1/PD-L1 have revolutionized the care of patients with melanoma and many other tumor types
- Recently, the immunoregulatory pathway comprising LAG-3 and its ligands became the third immune checkpoint pathway for which blockade demonstrated a progression-free survival benefit in a phase III clinical trial (RELATIVITY-047)[1]

Aim

- To explore oncology healthcare professionals' (HCPs') familiarity with anti–LAG-3 mechanism of action, FDA-approved indications, and identification and management of associated adverse events
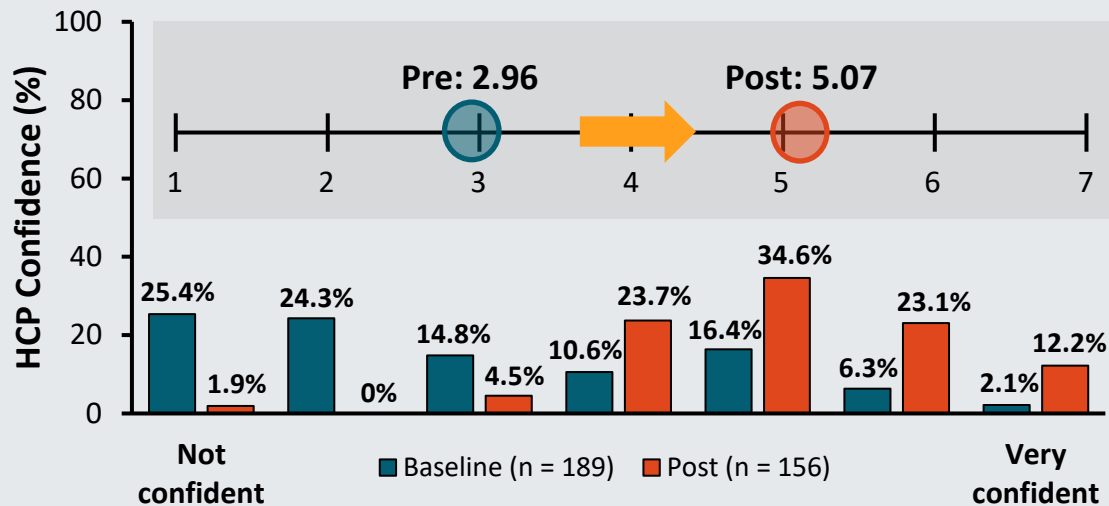
Methods

- CCO conducted a series of 10 CME/CE/CPE-certified live educational activities for HCPs and 1 ongoing, on-demand activity; data shown are for March - September 2022 (N = 356)
- Each activity included polling questions designed to assess key aspects of HCP knowledge of LAG-3 and LAG-3–directed therapies
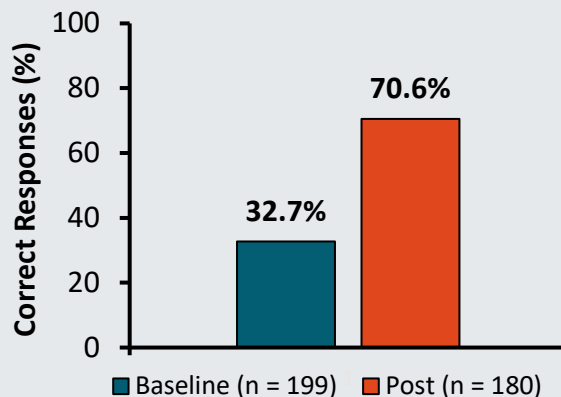
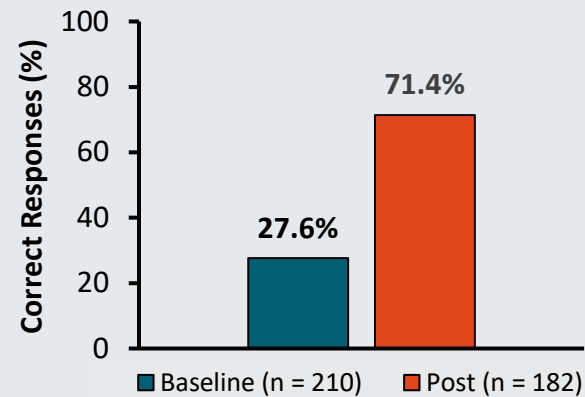## References

1. Tawbi. NEJM. 2022;386:24.

Education increased HCPs' confidence in their ability to manage and identify adverse events seen with LAG-3 immunotherapy combinations
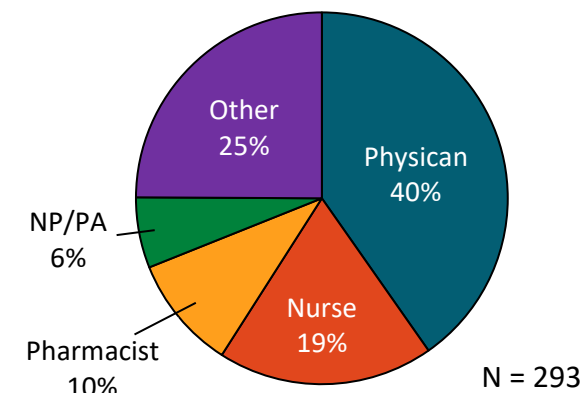

HCP understanding of LAG-3 mechanism of action improved with education

HCP familiarity with FDA-approved indications for anti–LAG-3 therapies improved with education

HCP Learner Demographics: Live/Simulcast

N = 293

Conclusions

- HCPs' knowledge of LAG-3–targeted therapy is limited
  - Pre-education, 33% correctly identified LAG-3 mechanism of action and 28% correctly identified the current FDA indication for relatlimab/nivolumab
- HCPs are not confident in identifying and managing adverse events associated with approved LAG-3 combination therapy
  - Pre-education, 25% were confident increasing to 70% after education
- More education on LAG-3 therapy would increase HCPs' knowledge and confidence to implement this new option for treating patients with advanced melanoma and other cancers

Find this poster online

Find this program on our website