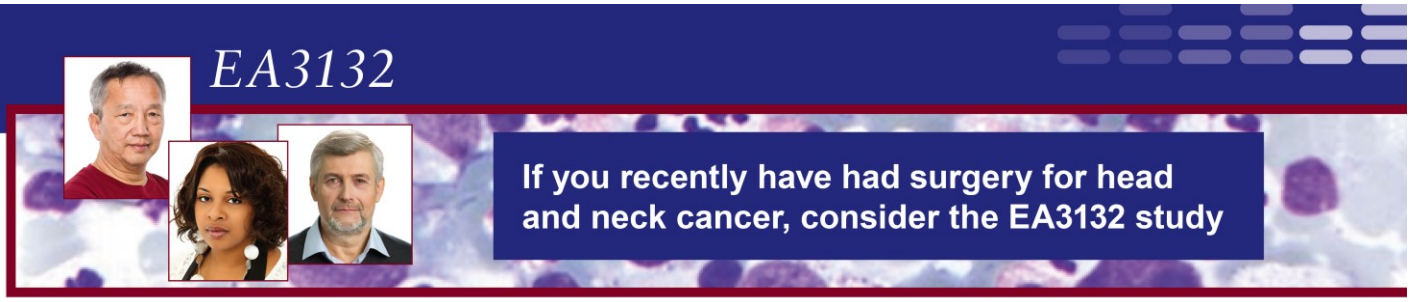

Frequently Asked Questions

What is the EA3132 study?

This is a phase 2 clinical trial for patients who have had surgery for head and neck cancer, specifically for patients at risk of cancer recurrence after surgery. The purpose of the EA3132 study is to see whether patients not previously thought to be at high risk of recurrence, but whose tumors have a mutation in a gene known as p53, would also benefit from chemoradiation after surgery.

If my tumor has the p53 mutation, why is that important?

The EA3132 trial is based on data from another study involving more than 400 patients with squamous cell carcinoma of the head and neck (SCCHN). In that trial, the 25% to 30% of patients whose tumors showed the p53 mutation had a higher risk of recurrence. The EA3132 study is examining whether adding chemotherapy to postoperative radiotherapy for these patients will lower this risk.

What will happen if I choose to participate in this study?

If you are receiving this information, it means your doctor thinks you may be eligible for the EA3132 trial. If you agree to participate, your tumor and blood samples will be sent to an outside laboratory for genomic testing. You will then be selected by a computer to be in one of two treatment groups:

- Group A: Postoperative radiotherapy (6 weeks)
- Group B: Chemoradiation—postoperative radiotherapy **plus** IV cisplatin chemotherapy (6 weeks). The chemotherapy will be administered once per week during the weeks you are receiving radiation.

Are there risks to being in the trial?

Yes, even if you are not on a study there are risks associated with cancer treatment. All of the possible risks of this study are clearly stated in the trial consent form. If you are selected, your oncologist and nurse will carefully monitor for any side effects that you may experience during this trial and they'll provide supportive therapy to help manage them. If you are selected for the chemoradiation arm of the trial and experience adverse events from the chemotherapy, your cisplatin dose may be adjusted or discontinued.

Why is this study important to me and patients like me?

Doctors are finding that for many patients with locally advanced head and neck cancer, adding chemotherapy improves on the results they would have experienced with radiation alone. Specifically, the EA3132 study will help doctors find out whether the presence of p53 mutation, as well as other characteristics that may be found in SCCHN tumors, may be “biomarkers” or signals that these patients will achieve better results with chemoradiation.

What should I do if I’m interested?

For more information about the EA3132 study, talk with your doctor, or go to:

- Clinical Trials.gov; search **NCT02734537**
- NCI Cancer Information Service: 1-800-4-Cancer (1-800-422-6237)

NCI National Clinical Trials Network

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