

POST-TEST

Rounds with the Investigators: National Research Leaders Provide Their Perspectives on the Management of Actual Patients with Multiple Myeloma

THE CORRECT ANSWER IS INDICATED WITH YELLOW HIGHLIGHTING.

1. The results of the IFM and CALGB trials failed to demonstrate an improvement in progression-free survival among patients with myeloma receiving maintenance lenalidomide compared to placebo after transplant.
 - a. True
 - b. False
2. The oral proteasome inhibitor MLN9708 in combination with lenalidomide and dexamethasone produced a response rate approaching 100% for patients with previously untreated MM.
 - a. True
 - b. False
3. The irreversible proteasome inhibitor carfilzomib has generated high-quality responses and reduced rates of _____.
 - a. Hyperglycemia
 - b. Dyspnea
 - c. Neuropathy
4. The MRC Myeloma IX study reported a survival advantage for patients with newly diagnosed myeloma who received zoledronic acid.
 - a. True
 - b. False
5. In a recent review article by Drs Palumbo and Anderson in *The New England Journal of Medicine*, the authors contend that the novel agents bortezomib and lenalidomide should not be dose reduced at the initiation of treatment for older patients.
 - a. True
 - b. False
6. A publication by Fonseca and colleagues in *Blood* reported rapid and complete responses with CyBorD in patients with amyloidosis.
 - a. True
 - b. False
7. The Phase III IFM/DFCI 2009 study is evaluating _____ with stem cell transplant as initial therapy versus stem cell transplant at first relapse.
 - a. CyBorD
 - b. Melphalan/prednisone/thalidomide
 - c. Lenalidomide/dexamethasone
 - d. RVD
8. Results published by Hutchison and colleagues indicated that patients with dialysis-dependent acute renal failure secondary to myeloma who received chemotherapy and extended hemodialysis with a high cutoff filter sustained reductions in serum free light chain concentrations and recovered independent renal function.
 - a. True
 - b. False
9. Preliminary data suggest that patients with myeloma who have a high level of cereblon in their bone marrow respond better to IMiDs than those with little or no cereblon in their bone marrow.
 - a. True
 - b. False
10. Which of the following can be attributed to the use of subcutaneous weekly bortezomib administration compared to standard twice-weekly intravenous administration?
 - a. Less neuropathy
 - b. Equivalent efficacy
 - c. Both a and b