

THE CORRECT ANSWER IS INDICATED WITH YELLOW HIGHLIGHTING.

- The Phase III PHEREXA trial evaluating trastuzumab/capecitabine with or without pertuzumab after disease progression on trastuzumab-based therapy for HER2-positive metastatic breast cancer did not demonstrate a statistically significant improvement in the primary endpoint of \_\_\_\_\_ with the addition of pertuzumab.
  - Median progression-free survival
  - Median overall survival
  - Overall response rate
  - Neither a nor b
- Results from the Phase II SWISH trial reported by Rugo and colleagues at ASCO 2016 demonstrated that prophylactic use of an oral dexamethasone solution markedly decreased the incidence and severity of stomatitis in patients receiving everolimus/exemestane for ER-positive metastatic breast cancer.
  - True
  - False
- Early Phase I trials have demonstrated that the anti-PD-1 agent pembrolizumab and the anti-PD-L1 agent atezolizumab produce response rates of \_\_\_\_\_ for patients with metastatic triple-negative breast cancer.
  - 18% to 20%
  - 35% to 40%
  - 60% to 70%
- The Phase II monarchHER trial is investigating abemaciclib and \_\_\_\_\_ with or without fulvestrant for patients with ER-positive, HER2-positive locally advanced or metastatic breast cancer.
  - Pertuzumab
  - T-DM1
  - Trastuzumab
  - All of the above
- A randomized Phase II/III trial of immunotherapy using the OPT-822/OPT-821 vaccine for patients with metastatic breast cancer reported \_\_\_\_\_.
  - Significant improvement in PFS in the intent-to-treat population
  - Significant improvement in PFS for the patients who developed an immune response to the vaccine
  - Both a and b
- The Phase III Impassion130 trial is evaluating \_\_\_\_\_ in combination with *nab* paclitaxel for patients with previously untreated metastatic triple-negative breast cancer.
  - Pembrolizumab
  - Nivolumab
  - Atezolizumab
- Which of the following statements is true regarding the CDK4/6 inhibitor abemaciclib in the treatment of breast cancer?
  - It has single-agent activity
  - It is associated with predominantly gastrointestinal toxicities
  - It can cross the blood-brain barrier
  - All of the above
- The CREATE-X trial investigating adjuvant capecitabine for women with HER2-negative breast cancer who have residual invasive disease after neoadjuvant chemotherapy demonstrated \_\_\_\_\_ with capecitabine.
  - A significant improvement in disease-free survival
  - No benefit in overall survival
  - Both a and b
- The Phase III MA17 trial evaluating the extension of adjuvant letrozole for 5 years after an initial 5 years of aromatase inhibitor therapy alone or preceded by tamoxifen for patients with early-stage breast cancer demonstrated no improvement in outcomes with the extension of aromatase inhibitor therapy.
  - True
  - False
- The Phase III PALOMA-2 trial comparing palbociclib and letrozole to letrozole and placebo for patients with ER-positive, HER2-negative advanced breast cancer who had not received systemic therapy for their advanced disease \_\_\_\_\_ the significant clinical benefit and safety of this combination previously reported by the Phase II PALOMA-1 trial.
  - Confirmed
  - Refuted