1. Recent results from the single-arm, Phase II, multicenter ACTIII trial indicated an improvement in both median progression-free survival (PFS) and overall survival (OS) with __________ compared to historical control among patients with newly diagnosed glioblastoma multiforme (GBM) with gross total resection.
   a. Rindopepimut
   b. Temozolomide
   c. Bevacizumab

2. The response rate in the intent-to-treat population for patients who received rindopepimut combined with bevacizumab for relapsed GBM on the randomized Phase II ReACT study was 30% compared to 18% with bevacizumab alone.
   a. True
   b. False

3. Both the NORDIC and NOA-08 randomized trials indicated that patients with MGMT-methylated GBM experienced __________ with temozolomide therapy compared to radiation therapy alone.
   a. Increased benefit
   b. Decreased benefit
   c. Neither, owing to the lack of discriminative power of the MGMT assay

4. Recent data from a retrospective analysis of the AVAglio trial by Sandmann and colleagues demonstrated that patients with proneural IDH wild-type GBM experienced an increased benefit from the addition of __________ to first-line radiation therapy/temozolomide, indicating a potential marker to help select patients for future treatment.
   a. Bevacizumab
   b. Rindopepimut

5. The most frequent Grade 3 or worse toxicities associated with bevacizumab and lomustine in the randomized, controlled Phase II BELOB trial in recurrent GBM included __________.
   a. Hypertension
   b. Fatigue
   c. Infections
   d. All of the above

6. Results from the CABARET study, a prospective, randomized Phase II trial for patients with recurrent GBM, indicated that continuing bevacizumab beyond disease progression did not improve PFS or OS.
   a. True
   b. False

7. Data from an interim analysis of the EF-14 study presented at the 2014 Society for Neuro-Oncology meeting indicated a significant advantage in PFS among patients undergoing treatment with __________ compared to adjuvant temozolomide.
   a. Bevacizumab
   b. Tumor treating fields
   c. Neither a nor b

8. A subset analysis from the EF-14 study indicated that patients with __________ experienced a greater survival benefit from the use of tumor treating fields than did the intent-to-treat population.
   a. Codeletion 1p/19q
   b. EGFR-mutated disease
   c. MGMT-methylated disease
   d. None of the above
THE CORRECT ANSWER IS INDICATED WITH YELLOW HIGHLIGHTING.

9. Data from a Phase I study of the recombinant oncolytic poliovirus PVS-RIPO against recurrent GBM demonstrated a 6-month OS rate of approximately ________ with PVS-RIPO therapy.
   a. 40%
   b. 60%
   c. 80%

10. Results from a Phase II multicenter study of gene-mediated cytotoxic immunotherapy as adjuvant therapy for newly diagnosed malignant gliomas indicated an almost 8-month survival advantage in a subset of patients who underwent gross total resection.
    a. True
    b. False