## POST-TEST

RTP On Demand: Current and Future Role of PARP Inhibitors in the Management of Ovarian Cancer (Video Program)

## THE CORRECT ANSWER IS INDICATED WITH YELLOW HIGHLIGHTING.

1. The Phase III SOLO1 trial is evaluating \_\_\_\_\_\_ versus placebo for patients with BRCA mutation-positive advanced ovarian cancer (OC) after first-line platinum-based chemotherapy.

- a. Olaparib monotherapy
- b. Olaparib in combination with chemotherapy
- c. Talazoparib monotherapy
- 2. In which of the following subgroups of patients with platinum-sensitive recurrent OC did niraparib maintenance therapy provide a significant progression-free survival benefit in comparison to placebo on the Phase III ENGOT-OV16/NOVA trial?
  - a. Patients with germline BRCA mutation
  - b. Patients with no germline BRCA mutation
  - c. Patients with somatic BRCA mutation and HRD positivity
  - d. All of the above
    - e. Only b and c
- 3. In general, the nausea and vomiting associated with PARP inhibitor treatment tend to with time on therapy.
  - a. Increase
  - b. Decrease
  - c. Remain the same
- 4. The current FDA-approved formulation and dosing of olaparib for patients with advanced OC who have a deleterious BRCA mutation requires a patient to swallow 16 50-mg capsules every day to reach the prescribed dose of 400 mg twice daily.
  - a. True
  - b. False
- 5. For how long did patients with platinumsensitive recurrent OC receive niraparib maintenance therapy on the Phase III ENGOT-OV16/NOVA trial?
  - a. One year
  - b. Two years
  - c. Indefinitely (until disease progression)

- The Phase III SOLO2 trial evaluating olaparib monotherapy versus placebo as maintenance therapy for patients with BRCA mutationpositive, platinum-sensitive, relapsed OC demonstrated a statistically significant improvement in progression-free survival with olaparib.
  - a. True b. False
- 7. It is recommended that \_\_\_\_\_ undergo BRCA testing.
  - a. All patients with epithelial OC
  - b. Only patients of Ashkenazi Jewish descent
  - c. Only patients with a strong family history of breast cancer or OC at a young age
- 8. Clinical response to PARP inhibitors appears to differ between patients with somatic BRCA mutations and those with germline BRCA mutations.
  - a. True b. False
- For patients with OC and disease progression on PARP inhibitor monotherapy, clinical trials are evaluating novel strategies combining PARP inhibitors with other agents, including \_\_\_\_\_.
  - a. Antiangiogenic agents
  - b. WEE1 kinase inhibitors
  - c. Immunotherapeutic agents
  - d. All of the above
  - e. Only b and c

## 10. The dose of niraparib for OC being investigated is \_\_\_\_\_.

- a. 300 mg once daily
- b. 600 mg twice daily
- c. 400 mg twice daily