POST-TEST

Breast Cancer Update for Surgeons — Issue 1, 2017 (Video Program)

THE CORRECT ANSWER IS INDICATED WITH YELLOW HIGHLIGHTING.

- 1. The goal of the MINDACT trial, for which initial results were recently published, was to evaluate the benefit of genomic profiling with the in addition to standard clinical-pathological criteria for patients with early breast cancer (BC) and 0 to 3 positive lymph nodes who might safely forgo chemotherapy without compromising outcome.
 - a. PAM50 assay
 - b. 70-gene signature
 - c. 21-gene signature
- 2. A recent meta-analysis evaluating the use of adjuvant bisphosphonates for women with early BC pointed toward a reduction in the odds of disease recurrence in women who were when they began treatment.

a. Premenopausal

b. Postmenopausal

3. The SSO-ASTRO-ASCO Consensus Guideline on Margins for Breast-Conserving Surgery with Whole-Breast Irradiation in Ductal Carcinoma in Situ (DCIS) states that the use of a 2-mm margin in DCIS treated with whole-breast irradiation is associated with low rates of ipsilateral breast tumor recurrence.

a.	True
b.	False

- 4. The Breast DCIS Score for patients with DCIS who have undergone local excision is predictive of
 - a. The risk of DCIS recurrence
 - b. The risk of invasive BC
 - c. Both a and b
- 5. Results of the low-risk registry of the TAILORx trial, which is evaluating adjuvant endocrine therapy with or without chemotherapy based on the 21-gene Recurrence Score (RS) for patients with ER-positive, HER2-negative BC, reported an approximate risk of distant recurrence at 5 years for patients with a low RS of less than 11 who received endocrine therapy

without chemotherapy.



- 6. The Phase III study randomly assigns patients with hormone receptorpositive, HER2-negative invasive BC with 1 to 3 positive nodes and a 21-gene RS of 25 or lower to adjuvant endocrine therapy with or without chemotherapy.
 - a. ECOG-E2108
 - b. POSITIVE
 - c. RxPONDER
- 7. Results of the Phase III West German Study Group PlanB trial demonstrated an excellent 5-year disease-free survival rate of 94% among patients with ER-positive, HER2-negative. BC who received endocrine therapy alone based on an RS of 11 or lower.
 - a. High risk node-negative
 - b. Node-positive
 - c. Both a and b
- 8. The Phase III CREATE-X trial is evaluating standard treatment with or without for patients with HER2-negative pathologic residual invasive BC after neoadjuvant chemotherapy.
 - a. Capecitabine b. Enzalutamide
- 9. The Phase III CALOR trial evaluating adjuvant chemotherapy for isolated local or regional recurrence of BC demonstrated a statistically significant improvement in the rate of disease-free survival at 5 years for patients with ER-negative disease who received chemotherapy.
 - a. True b. False
- 10. The open-label randomized trial conducted at the Tata Memorial Centre in Mumbai, India that evaluated locoregional treatment (LRT) of the primary tumor versus no LRT for patients with metastatic BC at presentation who responded to front-line chemotherapy demonstrated a statistically significant improvement in overall survival with LRT.
 - a. True b. False