### POST-TEST

What Urologists Want to Know: Addressing Current Questions and Controversies in the Management of Early and Advanced Prostate Cancer

## THE CORRECT ANSWER IS INDICATED WITH YELLOW HIGHLIGHTING.

1. Among patients with low-risk, localized prostate cancer, tissue-based genomic biomarkers have not demonstrated a clear role in the selection of candidates for active surveillance.

a. True

b. False

- 2. The randomized Phase III LATITUDE trial is evaluating androgen deprivation therapy (ADT) with or without \_\_\_\_\_\_ and prednisone for patients with newly diagnosed high-risk, metastatic hormone-naïve prostate cancer.
  - a. Enzalutamide

b. Abiraterone acetate

- c. Radium-223 dichloride
- 3. A systematic review and meta-analysis of aggregate data from the large randomized CHAARTED, GETUG-15 and STAMPEDE trials of standard therapy with or without docetaxel for men with metastatic (M1) hormone-sensitive prostate cancer demonstrated that
  - a. The addition of docetaxel improved overall survival
  - b. The addition of docetaxel improved progression-free survival
  - c. Both a and b
    - d. Neither a nor b

# 4. \_\_\_\_\_ is the ideal candidate for treatment with docetaxel in combination with ADT.

- a. A patient with newly diagnosed metastatic prostate cancer
- b. A patient with high-volume metastatic prostate cancer

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c. Both a and b
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d. Neither a nor b

- 5. Which of the following statements is true about the role of the androgen receptor splice variant 7 (AR-V7) as a biomarker in the management of prostate cancer?
  - a. Patients with a detectable level of AR-V7 in circulating tumor cells (CTCs) by polymerase chain reaction or immunohistochemistry are less responsive to abiraterone acetate or enzalutamide
  - b. No significant association has been observed between AR-V7 expression and response to taxanebased chemotherapy
  - c. The presence of AR-V7 in the nucleus is associated with worse radiographic disease progression and worse overall survival with abiraterone acetate or enzalutamide
  - d. Both a and b
  - e. Both a and c
  - f. All of the above
- 6. A prospective study that examined the full-length androgen receptor (AR-FL) in CTCs from 202 men with metastatic castration-resistant prostate cancer starting therapy with abiraterone acetate or enzalutamide demonstrated that
  - a. CTC-derived AR-FL copy number was prognostic for clinical outcomes
  - b. Higher AR-FL levels correlated with AR-V7 positivity
  - c. Both a and b
  - d. Neither a nor b

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- 7. The ongoing randomized Phase III EMBARK trial is evaluating \_\_\_\_\_\_, an androgen receptor antagonist, with or without leuprolide versus placebo with leuprolide for patients with high-risk nonmetastatic prostate cancer and rapidly rising PSA after initial local therapy.
  - a. Sipuleucel-T
  - b. Enzalutamide
  - c. Abiraterone acetate
  - d. Nilutamide
- 8. The ongoing randomized Phase III ARASENS trial is investigating the addition of \_\_\_\_\_\_, an androgen receptor antagonist, to standard ADT and docetaxel for patients with metastatic hormone-sensitive prostate cancer.
  - a. Apalutamide (ARN-509)
  - b. Bicalutamide
  - c. Darolutamide (ODM-201)
    - d. Enzalutamide

- 9. Results from the Phase II STRIVE trial comparing enzalutamide to bicalutamide for men with prostate cancer after the failure of primary ADT demonstrated a significant improvement in \_\_\_\_\_ with enzalutamide.
  - a. Progression-free survival
  - b. Median time to PSA progression among patients with MO disease
  - c. Median time to PSA progression among patients with M1 disease
  - d. Overall survival
  - e. All except d
  - f. All of the above
- 10. An exploratory analysis of alkaline phosphatase (ALP) dynamics in the Phase III ALSYMPCA trial of radium-223 dichloride for patients with castrationresistant prostate cancer and symptomatic bone metastases demonstrated that
  - a. Significant reductions in total ALP occurred as early as 4 weeks after the initiation of radium-223 dichloride therapy
  - b. Significant reductions in total ALP were observed only after 24 weeks or more of radium-223 dichloride therapy
  - c. No significant differences were reported in total ALP reduction with radium-223 dichloride