## POST-TEST

Beyond the Guidelines: Investigator Perspectives on Current Cases, Clinical Issues and Ongoing Research in the Management of Multiple Myeloma

## THE CORRECT ANSWER IS INDICATED WITH YELLOW HIGHLIGHTING.

- 1. Data from Korde and colleagues published in *JAMA Oncology* indicated that minimal residual disease (MRD) negativity by multicolor flow cytometry or next-generation sequencing are both associated with significantly better
  - a. Overall response rate
  - b. Progression-free survival (PFS)
  - c. Overall survival (OS)
- 2. The Phase II SIRIUS trial demonstrated that \_\_\_\_\_\_, an anti-CD38 monoclonal antibody, has clinically meaningful single-agent activity in patients with multiple myeloma (MM) who have received at least 3 prior lines of therapy or have disease that is refractory to both a proteasome inhibitor and an immunomodulatory agent.
  - a. Daratumumab
  - b. Pembrolizumab
  - c. Elotuzumab
  - d. Nivolumab
- 3. The results of the Phase III POLLUX trial evaluating lenalidomide and dexamethasone with or without daratumumab for patients with relapsed/ refractory MM demonstrated a statistically significant improvement in PFS with the addition of daratumumab.
  - a. True
  - b. False
- 4. Results of the Phase III IFM 2009 trial evaluating early autologous stem cell transplant (ASCT) versus additional cycles of lenalidomide/bortezomib/ dexamethasone (RVd) after RVd induction therapy for newly diagnosed MM demonstrated a PFS advantage with

- b. Early ASCT
  - c. Neither a nor b

- 5. Results from the Phase III ASPIRE trial of lenalidomide and dexamethasone with or without carfilzomib for patients with relapsed MM demonstrated a statistically significant improvement in \_\_\_\_\_\_ with the addition of carfilzomib.
  - a. Median PFS
  - b. OS
  - c. Both a and b
- 6. The results of the Phase III TOURMALINE-MM1 trial of lenalidomide and dexamethasone with or without ixazomib for patients with relapsed or refractory MM failed to demonstrate a statistically significant improvement in PFS with the addition of ixazomib.
  - a. True b. False
- - a. Waldenström macroglobulinemia
  - b. Smoldering myeloma
  - c. Neither a nor b
- 8. The NCCN Guidelines for the first-line treatment of symptomatic AL amyloidosis include \_\_\_\_\_\_.
  - a. CyBorD (cyclophosphamide/ bortezomib/dexamethasone)
  - b. High-dose melphalan with stem cell transplant
  - c. An anti-SAP antibody
  - d. Both a and b
  - e. All of the above

a. Additional cycles of RVd

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- 9. A recent meta-analysis of the use of lenalidomide maintenance therapy for patients with MM indicated superior \_\_\_\_\_\_ on the lenalidomide arms versus the placebo arms across all studies.
  - a. PFS
  - b. Median OS
  - c. Both a and b
    - d. None of the above

- 10. According to the International Myeloma Working Group 2016 criteria, disease that is to be considered MRD negative requires a \_\_\_\_\_\_ in addition to the absence of aberrant clonal plasma in a bone marrow aspirate ruled out by an assay with a minimum sensitivity of 1 in 10<sup>5</sup> nucleated cells or higher.
  - a. Partial response
  - b. Very good partial response
  - c. Complete response