

THE CORRECT ANSWER IS INDICATED WITH YELLOW HIGHLIGHTING.

- \_\_\_\_\_ is an investigational agent that inhibits isocitrate dehydrogenase (IDH) with promising activity in the treatment of IDH-1/2 mutation-positive acute myeloid leukemia (AML).
  - AG-120
  - AG-221
  - Venetoclax
  - Both a and b
  - All of the above
- In the AZA-AML-001 international Phase III randomized study evaluating azacitidine versus conventional care for older patients with newly diagnosed AML with >30% bone marrow blasts, azacitidine was administered for \_\_\_\_\_ per cycle.
  - 5 days
  - 7 days
  - 10 days
  - None of the above
- Minimal residual disease assessment is a standard test of response to treatment for AML.
  - True
  - False
- The most common mutations in AML, with mutation rates of approximately 30%, include \_\_\_\_\_.
  - FLT3
  - NPM1
  - CEBPA
  - Both a and b
  - None of the above
- The CALGB-10603 (RATIFY) randomized Phase III trial of daunorubicin/cytarabine induction therapy followed by consolidation chemotherapy with high-dose cytarabine and either midostaurin or placebo for patients with treatment-naïve, FLT3-mutated AML reported a statistically significant 23% improvement in overall survival on the \_\_\_\_\_ arm.
  - Placebo
  - Midostaurin
  - Neither a nor b
- The RATIFY trial demonstrated that the Grade  $\geq 3$  rate of the following serious adverse event was statistically higher with midostaurin than with placebo.
  - Nausea
  - Vomiting
  - Hypotension
  - None of the above
  - All of the above
- The SAL-SORAML Phase II study evaluating sorafenib versus placebo in addition to standard therapy for younger patients with newly diagnosed AML reported significant prolongation in \_\_\_\_\_ with sorafenib at 3 years median follow-up.
  - Relapse-free survival
  - Event-free survival
  - Overall survival
  - All of the above
  - Both a and b
- A common adverse event associated with the FLT3 inhibitor quizartinib is \_\_\_\_\_.
  - Cardiac death
  - QTc prolongation
  - Severe arrhythmia

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9. Gilteritinib (ASP2215) is a selective FLT3 inhibitor with activity against the D835 mutation that confers resistance to the treatment of AML with sorafenib and quizartinib.
- a. True
  - b. False
10. Preliminary results of the addition of decitabine or azacitidine to venetoclax, a selective Bcl-2 inhibitor, for older patients ( $\geq 65$  years) with treatment-naïve AML demonstrated \_\_\_\_\_.
- a. An overall response rate of  $\leq 50\%$
  - b. An overall response rate of  $\geq 70\%$
  - c. Bone marrow toxicity
  - d. Both a and c
  - e. Both b and c