## Meet The Professors: Breast Cancer Edition, 2018

## THE CORRECT ANSWER IS INDICATED WITH YELLOW HIGHLIGHTING.

- The use of neratinib as extended adjuvant therapy for patients with HER2-postive breast cancer is associated with
  - a. Greater benefit for patients with HR-positive disease
  - Approximately a 40% incidence of Grade 3 or 4 diarrhea that can be managed with prophylaxis
  - c. Both a and b
- 2. Which of the following statements is true regarding ribociclib for patients with HR-positive advanced breast cancer?
  - a. It significantly improves progression-free survival in combination with letrozole
  - b. It causes more neutropenia and less cardiac toxicity in comparison to palbociclib
  - c. It can be easily dose adjusted because it is available as 200-mg tablets
  - d. All of the above
  - e. Both a and c
- 3. The EBCTCG meta-analysis on the use of adjuvant bisphosphonate treatment in early breast cancer demonstrated
  - a. An overall survival benefit for postmenopausal women
  - No difference in benefit between oral and intravenous bisphosphonates
  - c. Both a and b
- 4. Eligibility criteria for patients on the Phase III OlympiAD trial, which evaluated olaparib monotherapy versus chemotherapy, included patients with
  - a. HER2-negative metastatic breast cancer
  - b. A germline BRCA mutation
  - c. No prior platinum-based chemotherapy
  - d. All of the above
  - e. Both a and b

- The ongoing HER2CLIMB study is investigating dual HER2 blockade with \_\_\_\_\_\_ in combination with capecitabine for patients with pretreated, advanced HER2-positive breast cancer.
  - a. Pertuzumab with or without tucatinib
  - b. Trastuzumab with or without tucatinib
  - c. Trastuzumab with or without lapatinib
- 6. The APHINITY trial investigating the addition of pertuzumab to adjuvant trastuzumab and chemotherapy for patients with HER2-positive early breast cancer demonstrated \_\_\_\_\_\_.
  - a. A statistically significant improvement in disease-free survival for the overall population
  - Better outcomes for patients with node-negative versus node-positive disease
  - c. Both a and b
- 7. The occurrence of ESR1 mutations in patients with ER-positive advanced breast cancer is associated with resistance to \_\_\_\_\_\_.
  - a. Aromatase inhibitors
  - b. Fulvestrant
  - c. Both a and b
- 8. The goal of the MINDACT trial was to evaluate the benefit of genomic profiling with the \_\_\_\_\_\_ in addition to standard clinical-pathological criteria for identifying patients with early breast cancer 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

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- Recent results presented at ASCO 2017 on the TRAIN-2 study investigating anthracycline- versus nonanthracycline-based regimens with dual HER2 blockade for HER2-positive breast cancer in the neoadjuvant setting demonstrated that the use of anthracyclines resulted in significantly better pathologic complete response rates.
  - a. True
  - b. False

- 10. Which of the following statements is true regarding the CDK4/6 inhibitor abemaciclib?
  - a. It does not demonstrate singleagent activity
  - b. It elicits an approximately 50% response rate in combination with fulvestrant in endocrine-refractory disease
  - c. It is administered on a continuous schedule
  - d. All of the above
  - e. Both b and c