# POST-TEST

# Novel and Emerging Strategies in the Management of Gastrointestinal Cancers

## THE CORRECT ANSWER IS INDICATED WITH YELLOW HIGHLIGHTING.

1. The results from the Phase III ESPAC-4 trial of adjuvant gemcitabine and capecitabine versus gemcitabine monotherapy for patients who had undergone complete macroscopic resection for ductal adenocarcinoma of the pancreas (RO/R1 resection) demonstrated a significant improvement in \_\_\_\_\_\_ with the gemcitabine and capecitabine combination.

## a. Overall survival

- b. The rate of occurrence of hand-foot syndrome
- c. The rate of occurrence of neutropenia
- d. All of the above
- e. Both a and b
- f. Both a and c
- 2. The results of the Phase III NAPOLI-1 trial of nanoliposomal irinotecan (NAL-IRI) with or without 5-fluorouracil (5-FU) and leucovorin (LV) for patients with metastatic pancreatic cancer demonstrated a statistically significant improvement in \_\_\_\_\_\_ with nal-IRI in combination with 5-FU/LV versus 5-FU/LV alone.
  - a. Overall survival
  - b. Progression-free survival

#### c. Both a and b

- 3. Which of the following statements is true about the results of the Phase III CALGB/ SWOG 80405 trial of cetuximab and/or bevacizumab in combination with FOLFOX or FOLFIRI chemotherapy for patients with metastatic colorectal cancer?
  - Patients with left-sided primary tumors experienced improved overall survival compared to those with right-sided primary tumors.
  - b. Primary tumor location is an independent prognostic factor when adjusted for age, gender, synchronous/metachronous, consensus molecular subtype, microsatellite instability and BRAF status.
  - c. Both a and b

- 4. The results from the Phase III RESORCE trial of regorafenib versus placebo for patients with hepatocellular cancer (HCC) after the failure of sorafenib demonstrated a significant improvement in in favor of regorafenib.
  - a. Overall survival
  - b. Progression-free survival
  - c. Hand-foot skin reaction
  - d. Hypertension
  - e. All of the above

### f. Both a and b

- g. Both b and c
- h. Both a and d
- 5. The results of the Phase III Study 304 trial of lenvatinib versus sorafenib as first-line therapy for patients with advanced unresectable HCC demonstrated \_\_\_\_\_\_.
  - a. That sorafenib is inferior to lenvatinib in terms of overall survival
  - b. A statistically significant improvement in progression-free survival in favor of lenvatinib
  - c. Both a and b
  - d. Neither a nor b
- 6. The ongoing Phase III CELESTIAL trial is evaluating \_\_\_\_\_\_ versus placebo for patients with advanced HCC following disease progression on one or more prior systemic therapies including prior treatment with sorafenib, and an independent data monitoring committee has recommended that the trial be stopped due to the efficacy of the experimental agent in terms of overall survival.
  - a. Ramucirumab
  - b. Cabozantinib
    - c. Nivolumab
    - d. Pembrolizumab

d. Neither a nor b

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- 7. The ongoing Phase III RAINFALL trial is evaluating \_\_\_\_\_\_ versus placebo in combination with cisplatin and capecitabine for patients with gastric or gastroesophageal junction adenocarcinoma.
  - a. Nivolumab
  - b. Pembrolizumab
  - c. Ramucirumab
    - d. Napabucasin (BBI-608)
    - e. Regorafenib
- 8. The results from the Phase III ATTRACTION-02 trial of nivolumab versus placebo for patients with unresectable advanced or recurrent gastric cancer or gastroesophageal junction cancer failed to demonstrate a statistically significant improvement in overall survival in favor of nivolumab.
  - a. True

b. False

- 9. The results of the Phase III NETTER-1 trial of 177-Lutetium Dotatate (<sup>177</sup>Lu-Dotatate) versus octreotide long-acting repeatable demonstrated a statistically significant improvement in in favor of <sup>177</sup>Lu-Dotatate.
  - a. Overall survival
  - b. Progression-free survival
  - c. Rate of occurrence of Grade 3 or higher anemia
  - d. All of the above
  - e. Both a and b
  - f. Both b and c
- 10. The Phase III TELESTAR trial of 250 mg or 500mg three times daily of telotristat ethyl versus placebo for patients with carcinoid syndrome not adequately controlled by somatostatin analog therapy and experiencing four or more bowel movements per day demonstrated that telotristat ethyl resulted in significant reductions in bowel movement frequency and urinary 5-hydroxyindole acetic acid.

a. True b. False