POST-TEST

Oncology Today with Dr Neil Love: Use of Genomic Classifiers to Inform Clinical Decision-Making for Patients with Early Breast Cancer

THE CORRECT ANSWER IS INDICATED WITH YELLOW HIGHLIGHTING.

1. **The Phase III TAILORx study evaluating chemo-endocrine therapy versus endocrine therapy alone for patients with hormone receptor-positive, HER2-negative, node-negative breast cancer and an intermediate 21-gene assay Recurrence Score (RS) of 11 to 25 demonstrated that adjuvant endocrine therapy alone was _____ in terms of invasive disease-free survival.**
   a. Inferior
   b. Noninferior

2. **The SOFT trial evaluating adjuvant therapy for premenopausal women with ER-positive breast cancer reported that outcomes with either tamoxifen or an aromatase inhibitor were _____ with the addition of ovarian suppression among patients who had a high risk of recurrence.**
   a. Better
   b. Similar
   c. Inferior

3. **Results from the NSABP-B-28 trial demonstrated the 21-gene RS in combination with high ESR1 expression to be highly prognostic in predicting risk of late distant recurrence for women with ER-positive, node-positive breast cancer after 5 years of chemotherapy and tamoxifen.**
   a. True
   b. False

4. **Which of the following statements is true regarding the Phase III PlanB trial evaluating the prognostic utility of the 21-gene RS for patients with ER-positive, HER2-negative early breast cancer?**
   a. It was a retrospective study
   b. It included patients who were at high risk and had 1 to 3 positive lymph nodes
   c. It demonstrated a 5-year disease-free survival rate of approximately 94% for patients with a RS of 11 or lower who received endocrine treatment alone
   d. All of the above
   e. Both a and b
   f. Both b and c

5. **Women aged 50 or younger with ER-positive, HER2-negative, axillary node-negative breast cancer and a RS of 16 to 25 in the TAILORx trial obtained _____ from chemotherapy.**
   a. No benefit
   b. Some benefit