POST-TEST

Consensus or Controversy? Radiation and Medical Oncology Investigator Perspectives on the Role of Immune Checkpoint Inhibition in the Management of Locally Advanced Non-Small Cell Lung Cancer

THE CORRECT ANSWER IS INDICATED WITH YELLOW HIGHLIGHTING.

1. **In the post-hoc analysis of the Phase III PACIFIC trial, which evaluated consolidation durvalumab versus placebo for patients with unresectable Stage III non-small cell lung cancer (NSCLC) without disease progression after chemoradiation therapy, which subgroup seemed to benefit the least from consolidation durvalumab in terms of overall survival?**
   a. Patients with PD-L1 expression of 25% or more
   b. Patients with PD-L1 expression of 1% to 24%
   c. Patients with PD-L1 expression of less than 1%
   d. All patients benefitted equally regardless of PD-L1 expression level

2. **In the Phase II LUN14-179 trial by the Hoosier Cancer Research Network evaluating consolidation pembrolizumab after concurrent chemoradiation therapy for unresectable Stage III NSCLC, what was the prevalent reason for the majority of the patients being unable to complete 1 year of treatment?**
   a. Disease progression
   b. Adverse events
   c. Death
   d. Withdrawal from the study

3. **What proportion of patients with NSCLC are diagnosed with Stage III disease at initial presentation?**
   a. Approximately 5%
   b. Approximately 15%
   c. Approximately 33%
   d. Approximately 50%

4. **The Phase III RTOG-0617 trial comparing the efficacy and safety of standard-dose (60 Gray) versus high-dose (74 Gray) conformal radiation therapy with concurrent and consolidation carboplatin/paclitaxel with or without cetuximab for patients with Stage III NSCLC reported which of the following results?**
   a. The high dose significantly improved overall survival in comparison to the standard dose
   b. The high dose did not significantly improve overall survival in comparison to the standard dose
   c. The comparative doses demonstrated equivalent toxicity profiles
   d. Both a and c
   e. Both b and c

5. **Which of the following statements is true regarding the difference in rate of Grade 3 or higher pneumonitis or radiation pneumonitis between patients on the PACIFIC trial who received durvalumab and those who received placebo, each after definitive platinum-based chemoradiation therapy?**
   a. The difference was less than 1%
   b. The difference was greater than 6%
   c. The rates were not numerically different

6. **What is the most commonly observed immune-related adverse event in patients with lung cancer who receive the anti-PD-1 antibody nivolumab?**
   a. Renal toxicity
   b. Hepatic toxicity
   c. Dermatologic toxicity
   d. Gastrointestinal toxicity

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7. **In the ongoing PACIFIC-2 trial evaluating the efficacy and safety of durvalumab versus placebo administered concurrently with platinum-based chemoradiation therapy for locally advanced, unresectable NSCLC, which consolidation therapy will be administered to patients with a complete response, a partial response or stable disease after concurrent chemoradiation therapy?**
   a. Durvalumab or placebo
   b. Platinum-based chemotherapy or placebo
   c. Observation

8. **The ongoing Phase II DETERRED trial is investigating PD-L1 blockade to evaluate the safety of carboplatin, paclitaxel and radiation therapy in combination with which anti-PD-L1 antibody for patients with previously untreated nonmetastatic unresectable NSCLC for whom chemoradiation is the definitive therapy?**
   a. Avelumab
   b. Durvalumab
   c. Atezolizumab
   d. Pembrolizumab

9. **The abscopal effect that may be induced by local radiation therapy involves the regression of tumor lesions outside the primary site of irradiation.**
   a. True
   b. False

10. **The Phase II ETOP 6-14 NICOLAS trial is evaluating the addition of which concurrent anti-PD-1 antibody to standard first-line chemotherapy and radiation therapy for patients with unresectable, locally advanced NSCLC?**
    a. Pembrolizumab
    b. Durvalumab
    c. Nivolumab
    d. Avelumab
    e. Dostarlimab