POST-TEST

Data + Perspectives: Clinical Investigators Explore the Current and Future Management of Triple-Negative Breast Cancer

THE CORRECT ANSWER IS INDICATED WITH YELLOW HIGHLIGHTING.

- 1. The interim overall survival analysis of the IMpassion130 trial evaluating atezolizumab with *nab* paclitaxel versus *nab* paclitaxel alone as first-line therapy for metastatic triple-negative cancer (TNBC) demonstrated a greater survival benefit with the combination in which subgroup of patients?
 - a. The intent-to-treat population
 - b. Patients with PD-L1 immune cell-positive disease
- 2. The BROCADE3 trial demonstrated significantly improved progression-free survival for patients with previously treated locally advanced or metastatic HER2-negative breast cancer with a germline BRCA mutation with the addition of which PARP inhibitor to carboplatin/paclitaxel compared to placebo with carboplatin/paclitaxel?
 - a. Niraparib
 - b. Olaparib
 - c. Veliparib
 - d. Talazoparib
- 3. In a predefined subgroup analysis of the OlympiAD trial of olaparib monotherapy versus physician's choice of chemotherapy for patients with metastatic breast cancer with a germline BRCA mutation, the overall survival benefit in the olaparib arm was greater among patients who had not received prior chemotherapy for metastatic disease than among those who had.
 - a. True
 - b. False

- 4. In the KEYNOTE-522 trial, the addition of pembrolizumab to standard chemotherapy for neoadjuvant and adjuvant treatment of early TNBC led to higher rates of pathologic complete response especially for patients with which nodal status?
 - a. Node-negative disease
 - b. Node-positive disease
- 5. The LOTUS trial demonstrated an improvement in progression-free survival with the combination of the investigational AKT inhibitor ipatasertib with paclitaxel compared to placebo/paclitaxel for patients with TNBC.
 - a. True
 - b. False