

The Evolving Role of PARP Inhibition in the Management of Ovarian Cancer

THE CORRECT ANSWER IS INDICATED WITH YELLOW HIGHLIGHTING.

- 1. Which of the following statements is true about the mechanism of action of PARP inhibitors in the management of BRCA1-deficient epithelial ovarian cancer?**
 - a. PARP inhibition elicits STING-dependent antitumor immunity
 - b. The activation of the STING pathway is not required for the antitumor efficacy of PARP inhibition
- 2. The MEDIOLA trial demonstrated a promising response rate of approximately 72% with which treatment combination for patients with platinum-sensitive ovarian cancer and germline BRCA mutations?**
 - a. Olaparib/atezolizumab
 - b. Olaparib/pembrolizumab
 - c. Olaparib/durvalumab
 - d. Olaparib/nivolumab
- 3. Which of the following statements is true about the design of the Phase III SOLO-1 trial that led to the FDA approval of olaparib as maintenance therapy for patients with advanced ovarian cancer after response to first-line platinum-based chemotherapy?**
 - a. All trial participants received maintenance olaparib for 36 months or until objective radiological disease progression
 - b. Only patients with deleterious or suspected deleterious germline or somatic BRCA mutations were eligible
- 4. Which of the following progression-free survival (PFS) results was demonstrated in the cohort of patients with homologous recombination deficiency-positive disease in the VELIA trial, investigating veliparib in combination with chemotherapy and as continuation maintenance therapy for patients with newly diagnosed advanced epithelial ovarian, fallopian tube or primary peritoneal cancer?**
 - a. A statistically significant improvement in PFS with veliparib throughout versus chemotherapy induction therapy alone
 - b. No statistically significant improvement in PFS with veliparib throughout versus chemotherapy induction therapy alone