

Data + Perspectives: Exploring the Role of Novel Agents and Emerging Strategies in the Management of Acute Myeloid Leukemia

THE CORRECT ANSWER IS INDICATED WITH YELLOW HIGHLIGHTING.

1. What was noted with regard to overall survival (OS) in a recent report of the results from the Phase III QUAZAR AML-001 study assessing maintenance CC-486 versus placebo for patients with AML in first remission?
 - a. OS was significantly lower with CC-486
 - b. OS was significantly improved with CC-486
 - c. No statistical difference in OS
2. Based on current evidence and FDA approvals, for which of the following patients with AML would treatment with CPX-351 be considered more appropriate?
 - a. A 63-year-old patient with newly diagnosed, therapy-related AML
 - b. A 63-year-old patient with relapsed/refractory AML
3. Based on the mechanism of action, which of the following agents would be most appropriate as a component of up-front treatment for AML harboring a FLT3-ITD mutation?
 - a. Ivosidenib
 - b. APR-246
 - c. Midostaurin
4. What is the most appropriate course of action for a patient with AML who experiences symptoms of differentiation syndrome on day 45 after starting treatment with enasidenib?
 - a. Permanently discontinue enasidenib
 - b. Lower the dose until symptoms resolve
 - c. Start systemic corticosteroids immediately
5. Which of the following regimens would be most appropriate for a 75-year-old patient with newly diagnosed AML with an IDH1 mutation who is unfit to receive intensive induction chemotherapy?
 - a. Enasidenib
 - b. Ivosidenib
 - c. Enasidenib and azacitidine
6. Which of the following adverse effects is most likely to occur in patients with AML receiving therapy with the FLT3 inhibitor gilteritinib?
 - a. Gastrointestinal toxicity
 - b. Tumor lysis syndrome
 - c. Ocular toxicity
7. Why is a short treatment holiday (approximately 2 weeks off therapy) recommended for a patient with AML who is in morphologic remission after completion of the first cycle of an induction regimen (at day 28) containing venetoclax and an HMA?
 - a. To manage tumor lysis syndrome
 - b. To allow recovery from myelosuppression
 - c. To reduce the incidence of infections
 - d. To allow for rapid resolution of extramedullary disease
8. Which of the following occurrences best describes the biology behind the synergistic effect of combining venetoclax with an HMA such as azacitidine?
 - a. Differentiation of erythroleukemia cells
 - b. CHIP
 - c. Metabolic inflexibility of leukemic stem cells
9. Which of the following best describes the mechanism of action of the novel agent APR-246 under investigation for AML?
 - a. CD123-targeted toxin
 - b. Antibody-drug conjugate targeting CD47
 - c. Reactivator of mutated p53
10. Which of the following factors is not associated with ineligibility to receive intensive chemotherapy in patients with AML?
 - a. Age of 75 or older
 - b. Comorbidities such as renal failure or severe heart disease
 - c. Low diffusing capacity for carbon monoxide
 - d. Presence of an NPM1 mutation