POST-TEST

Oncology Today with Dr Neil Love: Small Cell Lung Cancer Edition (Audio Interview)

THE CORRECT ANSWER IS INDICATED WITH YELLOW HIGHLIGHTING.

1. **Which of the following statements is true regarding the design of the Phase III CASPIAN and IMPower133 studies assessing the addition of immune checkpoint inhibitor therapy to platinum/etoposide as up-front treatment for extensive-stage small cell lung cancer (SCLC)?**
   a. Both trials allowed physician's choice of platinum chemotherapy (carboplatin or cisplatin)
   b. Patients with asymptomatic, untreated brain metastases were eligible for the CASPIAN study
   c. IMPower133 was a 3-arm study comparing chemotherapy alone, chemotherapy with a PD-L1 inhibitor and chemotherapy with dual immune checkpoint inhibition

2. **Which of the following statements is true when comparing the hematologic toxicity profiles of lurbinectedin and topotecan for patients with recurrent SCLC?**
   a. Topotecan is favorable
   b. Lurbinectedin is favorable
   c. The hematologic toxicity profiles are similar

3. **Recent data suggest that which subtype of SCLC is enriched for T-cell inflamed phenotype, which may predict for clinical benefit from immunotherapy?**
   a. ASCL1
   b. POU2F3
   c. YAP1

4. **Which overall survival (OS) result was reported from the Phase III CASPIAN study comparing the anti-PD-L1 agent durvalumab in combination with platinum/etoposide to platinum/etoposide alone as first-line therapy for patients with extensive-stage SCLC?**
   a. No significant improvement in OS with the addition of durvalumab
   b. A statistically significant improvement in OS with the addition of durvalumab