

Oncology Today with Dr Neil Love: Small Cell Lung Cancer Edition  
(Video Presentation)

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. Design was the same for both studies
  - b. Both studies allowed physician's choice of platinum chemotherapy (carboplatin or cisplatin)
  - c. Patients with asymptomatic, untreated brain metastases were eligible for the CASPIAN study**
  - d. IMPower133 was a 3-arm study comparing chemotherapy alone, chemotherapy with a PD-L1 inhibitor and chemotherapy with dual immune checkpoint inhibition
- 2. 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**
- 3. 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
- 4. 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**