POST-TEST

Cancer Conference Update: What Happened at the 2020 San Antonio Breast Cancer Symposium® — Triple-Negative Breast Cancer (Session 1)

THE CORRECT ANSWER IS INDICATED WITH YELLOW HIGHLIGHTING.

1. **Which of the following subgroups of patients with advanced triple-negative breast cancer (TNBC) derived a progression-free survival (PFS) benefit with the addition of pembrolizumab to chemotherapy in the Phase III KEYNOTE-355 trial?**
   a. All patients with previously untreated disease regardless of PD-L1 expression
   b. Patients with previously untreated disease and a PD-L1 combined positive score of ≥10

2. **Which of the following event-free survival (EFS) results was demonstrated in the first interim analysis of the ongoing Phase III KEYNOTE-522 trial, which is investigating pembrolizumab in combination with chemotherapy versus chemotherapy alone as neoadjuvant therapy, followed by adjuvant pembrolizumab versus placebo after definitive surgery for patients with newly diagnosed Stage II or III TNBC?**
   a. Significantly higher rate of EFS with neoadjuvant pembrolizumab/chemotherapy
   b. No difference in EFS between the neoadjuvant treatments
   c. Lower rate of EFS with neoadjuvant pembrolizumab/chemotherapy

3. **Results from the Phase III IMpassion031 trial of atezolizumab in combination with neoadjuvant anthracycline/*nab* paclitaxel-based chemotherapy compared to chemotherapy alone for patients with early-stage TNBC demonstrated which of the following outcomes?**
   a. No improvement in pathologic complete response (pCR) with the addition of atezolizumab
   b. Benefit in pCR with the addition of atezolizumab for patients with PD-L1-postive TNBC and not those with PD-L1-negative disease
   c. Benefit in pCR with the addition of atezolizumab regardless of PD-L1 status

4. **Which of the following drug types best describes the mechanism of action of sacituzumab govitecan in patients with recurrent metastatic TNBC?**
   a. Anti-PD-1 monoclonal antibody
   b. Anti-PD-L1 monoclonal antibody
   c. Nectin-4-directed antibody-drug conjugate
   d. Trop-2-directed antibody-drug conjugate