

Meet The Professor: Management of BRAF-Mutant Melanoma — Part 2  
of a 2-Part Series

THE CORRECT ANSWER IS INDICATED WITH YELLOW HIGHLIGHTING.

1. Recently published results with 5 years of follow-up from the Phase III COMBI-AD study comparing adjuvant dabrafenib/trametinib to placebo for patients with Stage III BRAF-mutant melanoma included which of the following observations in regard to relapse-free survival (RFS)?
  - a. Comparative RFS curves were maintained in comparison to the 4-year report
  - b. The dabrafenib/trametinib RFS curve has begun to tail off in comparison to the 4-year report
2. Primary results from the Phase III IMspire150 trial evaluating the addition of atezolizumab to the combination of vemurafenib and cobimetinib as initial therapy for newly diagnosed advanced melanoma with a BRAF V600E/K mutation demonstrated which of the following with the atezolizumab-containing arm compared to the placebo-containing arm?
  - a. Longer progression-free survival (PFS) and higher rate of discontinuation due to adverse events (AEs)
  - b. Longer PFS and lower rate of discontinuation due to AEs
  - c. No difference in PFS
3. The ongoing Phase III DREAMseq trial evaluating regimen sequencing approaches for patients with Stage III to Stage IV melanoma with a BRAF V600 mutation found improved 2-year overall survival (OS) with which of the following approaches?
  - a. Dabrafenib/trametinib → ipilimumab/nivolumab upon progression
  - b. Ipilimumab/nivolumab → dabrafenib/trametinib upon progression
  - c. There was no difference in 2-year OS between the study arms
4. Recently presented preliminary data from the SECOMBIT trial evaluating the best sequential approach with combination immunotherapy (ipilimumab/nivolumab) and combination targeted therapy (encorafenib/binimetinib) for patients with treatment-naïve metastatic melanoma and a BRAF V600 mutation demonstrated that which of the following treatment approaches resulted in the lowest 3-year OS?
  - a. Encorafenib/binimetinib → ipilimumab/nivolumab upon progression
  - b. Ipilimumab/nivolumab → encorafenib/binimetinib upon progression
  - c. Encorafenib/binimetinib (8 weeks) → ipilimumab/nivolumab → encorafenib/binimetinib upon progression