

Oncology Today with Dr Neil Love: Updates on Ovarian Cancer From SGO 2022

THE CORRECT ANSWER IS INDICATED WITH YELLOW HIGHLIGHTING.

1. In the Phase II OVARIO trial, what was the 24-month progression-free survival (PFS) outcome with the addition of niraparib to bevacizumab for patients with advanced ovarian cancer (OC) after front-line platinum-based chemotherapy?
 - a. No PFS benefit in the overall population or any subgroup
 - b. PFS benefit in the overall population and the subgroup with homologous recombination proficiency (HRp) but not in the subgroup with homologous recombination deficiency (HRd)
 - c. PFS benefit in the overall population and subgroups, with the greatest PFS benefit in the HRp subgroup
 - d. PFS benefit in the overall population and subgroups, with the greatest benefit in the HRd subgroup
2. Which of the following is a target of the novel antibody-drug conjugate upifitamab rilsodotin?
 - a. NaPi2b
 - b. TROP2
 - c. MUC16
 - d. Mesothelin
3. Which of the following Grade 3 treatment-related adverse events was most common in patients receiving mirvetuximab soravtansine for platinum-resistant OC in the SORAYA trial?
 - a. Blurred vision
 - b. Fatigue
 - c. Keratopathy
 - d. Diarrhea
4. Which patients with newly diagnosed advanced OC experienced the greatest PFS benefit, as assessed by hazard ratio, with an individualized starting dose of maintenance niraparib compared to placebo in the Phase III PRIME trial?
 - a. Those with germline BRCA mutations
 - b. Those with nongermline BRCA mutations and HRd
 - c. Those with nongermline BRCA mutations and HRp
5. In the Phase III SOLO-3 trial, what was the overall survival (OS) outcome, as measured by hazard ratio, with olaparib monotherapy compared to nonplatinum chemotherapy for patients with heavily pretreated, platinum-sensitive relapsed OC and germline BRCA1/2 mutations?
 - a. Significant improvement in median OS, hazard ratio 0.62
 - b. Nonsignificant improvement in median OS, hazard ratio 0.80
 - c. No OS benefit, HR = 1.07