

## Meet The Professor: Current and Future Management of Chronic Lymphocytic Leukemia — Part 2 of a 6-Part Series

THE CORRECT ANSWER IS INDICATED WITH YELLOW HIGHLIGHTING.

- Results of the Phase III ELEVATE-RR head-to-head trial of acalabrutinib versus ibrutinib for previously treated chronic lymphocytic leukemia (CLL) demonstrated which of the following outcomes with acalabrutinib?**
  - A lower rate of atrial fibrillation/flutter (A-fib) but no improvement in progression-free survival (PFS)
  - Improved PFS but no reduction in the rate of A-fib
  - A lower rate of A-fib and improvement in PFS
  - Neither reduction in the rate of A-fib nor improvement in PFS
- Which of the following adverse events of special interest was most commonly observed with pirtobrutinib in the Phase I/II BRUIN trial for patients with previously treated CLL?**
  - Bruising
  - Atrial fibrillation/flutter
  - Rash
  - Hemorrhage
- The Phase III GLOW trial evaluating fixed-duration ibrutinib/venetoclax versus chlorambucil/obinutuzumab in the first-line treatment of CLL revealed which of the following secondary outcomes?**
  - Significant increase in tumor lysis syndrome with ibrutinib/venetoclax
  - Significant increase in diarrhea with chlorambucil/obinutuzumab
  - Significant decrease in undetectable minimal residual disease (uMRD) in bone marrow and peripheral blood with ibrutinib/venetoclax
  - Significant decrease in uMRD in bone marrow and peripheral blood with chlorambucil/obinutuzumab
- Top-line results of the Phase III SEQUOIA trial demonstrated a statistically significant improvement in PFS with which of the following agents compared to bendamustine/rituximab for patients with treatment-naïve CLL?**
  - Acalabrutinib
  - Ibrutinib
  - Pirtobrutinib
  - Umbralisib/ublituximab
  - Venetoclax
  - Zanubrutinib
- A recent analysis by Sharma and colleagues presented at ASH 2021 suggests which of the following expectations for a new formulation of acalabrutinib for patients with CLL?**
  - Comparable to the approved 100 mg BID capsules regardless of proton pump inhibitor (PPI) use but not of food ingestion
  - Superior to the approved 100 mg BID capsules regardless of PPI use but not of food ingestion
  - Comparable to the approved 100 mg BID capsules regardless of food ingestion but not of PPI use
  - Superior to the approved 100 mg BID capsules regardless of food ingestion but not of PPI use
  - Comparable to the approved 100 mg BID capsules regardless of both PPI use and food ingestion
  - Superior to the approved 100 mg BID capsules regardless of both PPI use and food ingestion