

Meet The Professor: Optimizing the Clinical Management of Hodgkin and Non-Hodgkin Lymphomas — Part 7 of an 8-Part Series**THE CORRECT ANSWER IS INDICATED WITH YELLOW HIGHLIGHTING.**

- In the Phase III CHRONOS-3 trial, what was the progression-free survival (PFS) benefit as measured by hazard ratio observed with the addition of copanlisib to rituximab for patients with relapsed/refractory indolent non-Hodgkin lymphoma?**
 - No PFS benefit, HR=1
 - Nonsignificant improvement in median PFS, HR=0.89
 - Significant improvement in median PFS, HR= 0.52
- What is the estimated incidence of mortality observed with CAR (chimeric antigen receptor) T-cell therapies associated with cytokine release syndrome?**
 - <1%
 - 3%-10%
 - 20%-25%
 - >25%
- On the basis of the pivotal LOTIS-2 study, the CD19-directed antibody and alkylating agent conjugate loncastuximab tesirine was approved for which patients with DLBCL?**
 - Patients with newly diagnosed DLBCL
 - Patients who have received at least 1 prior systemic regimen
 - Patients who have received at least 2 prior systemic regimens
 - Patients who have received at least 4 prior systemic regimens
- Which of the following treatment related AEs was most common with mosunetuzumab in phase I/II investigation of mosunetuzumab monotherapy for patients with R/R FL who have received at least 2 prior lines of therapy?**
 - Hypokalemia
 - Headache
 - Cough
 - Cytokine release syndrome
- Which of the following subgroups of patients with R/R DLBCL experienced the best response rates with loncastuximab tesirine plus ibrutinib in the phase 2 LOTIS 3 study?**
 - Non-GCB DLBCL
 - Germinal Center B-Cell like (GCB) DLBCL
 - All-comers