

Meet The Professor: Optimizing the Clinical Management of Hodgkin and Non-Hodgkin Lymphomas — Part 8 of an 8-Part Series

THE CORRECT ANSWER IS INDICATED WITH YELLOW HIGHLIGHTING.

1. 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?
 - a. No PFS benefit, HR=1
 - b. Nonsignificant improvement in median PFS, HR=0.89
 - c. Significant improvement in median PFS, HR= 0.52

2. What is the estimated incidence of mortality associated with cytokine release syndrome observed with CAR T-cell therapies?
 - a. <1%
 - b. 3%-10%
 - c. 20%-25%
 - d. >25%

3. 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?
 - a. Patients with newly diagnosed DLBCL
 - b. Patients who have received at least 1 prior systemic regimen
 - c. Patients who have received at least 2 prior systemic regimens
 - d. Patients who have received at least 4 prior systemic regimens

4. 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?
 - a. Hypokalemia
 - b. Headache
 - c. Cough
 - d. Cytokine release syndrome

5. Which of the following subgroups of patients with R/R DLBCL experienced the best response rates with loncastuximab tesirine plus ibritinib in the phase 2 LOTIS 3 study?
 - a. Non-GCB DLBCL
 - b. Germinal Center B-Cell like (GCB) DLBCL
 - c. All-comers