## POST-TEST

Oncology Today with Dr Neil Love: BCMA-Directed Therapies for Multiple Myeloma

## THE CORRECT ANSWER IS INDICATED WITH YELLOW HIGHLIGHTING.

1. Which response rate has been reported in the Phase II DREAMM-2 trial evaluating belantamab mafodotin for patients with relapsed/refractory multiple myeloma (MM)?

а.	11%
b.	32%
C	45%

- 2. What was the overall response rate with ciltacabtagene autoleucel (cilta-cel) after a median of 17.1 months of follow-up from Cohort A of the CARTITUDE-2 trial, evaluating this agent in patients with MM after 1 to 3 prior lines of therapy?
  - a. 35%
  - b. 55%
  - c. 75%
  - d. 95%
- 3. Which of the following statements is true regarding the cytokine release syndrome (CRS) associated with CAR T-cell therapy in patients with MM treated with idecabtagene vicleucel (ide-cel) in the KarMMA-1 trial or cilta-cel in the CARTITUDE-1 trial?
  - a. The median time to onset of CRS was shorter with ide-cel
  - b. The incidence of any grade of CRS was higher with ide-cel
  - c. The incidence of Grade ≥3 CRS was higher with cilta-cel
  - d. The median duration of CRS was longer with cilta-cel

- 4. In a recent report of the overall safety profile of teclistamab from the MajesTEC-1 trial for patients with relapsed/refractory MM, which of the following adverse events was most common?
  - a. Neutropenia
  - b. Injection site reaction
  - c. Fatigue
  - d. CRS
- 5. Which of the following overall survival (OS) results was reported after long-term follow-up of the pivotal Phase II KarMMa trial evaluating ide-cel for relapsed/ refractory MM?
  - a. Median OS was >20 months regardless of R-ISS stage
  - Median OS was longer for patients with triple-refractory disease than for patients whose disease was not triple refractory
  - c. Median OS was longer for patients aged ≥65 than for patients younger than 65
  - d. Median OS was shorter for patients with extramedullary disease than for those without extramedullary disease