POST-TEST

Key Considerations in the Optimal Clinical Care of Patients with Small Cell Lung Cancer — Session 2

THE CORRECT ANSWER IS INDICATED WITH YELLOW HIGHLIGHTING.

- 1. Analysis of tissue tumor mutational burden (tTMB) in the Phase III CASPIAN trial investigating durvalumab for patients with extensive-stage small cell lung cancer (ES-SCLC) revealed which of the following in terms of prognostic value?
 - a. tTMB predicted for improvement in overall survival (OS) alone with durvalumab in combination with tremelimumab and platinum etoposide
 - tTMB predicted for improvement in OS and progression-free survival (PFS) with durvalumab in combination with tremelimumab and platinum etoposide
 - c. tTMB did not predict for improvement in OS with durvalumab in combination with tremelimumab and platinum etoposide
- 2. The Phase III, open-label IMforte trial for patients with ES-SCLC is evaluating which two agents as maintenance therapy versus atezolizumab post-induction with carboplatin, etoposide and atezolizumab?
 - a. Lurbinectedin with atezolizumab
 - b. Durvalumab with tremelimumab
 - c. Nivolumab with ipilimumab
 - d. Trilaciclib with pembrolizumab

- 3. The Phase III ATLANTIS trial investigating the efficacy of lurbinectedin with doxorubicin for patients with SCLC demonstrated a difference of PFS between lurbinectedin/doxorubicin and the control arm of how many months?
 - a. 0
 - b. 6
 - c. 12
- 4. Safety analysis from the Phase III CASPIAN study evaluating platinum/ etoposide with or without durvalumab for patients with ES-SCLC demonstrated which of the following adverse events was most common with the addition of durvalumab?
 - a. Diarrhea
 - b. Neutropenia
 - c. Alopecia
 - d. Pneumonia
- 5. Results from a Phase III basket trial of lurbinectedin indicated Grade 4 neutropenia was experienced by approximately what percentage of patients?
 - a. 0%
 - b. 5%
 - c. 10%
 - d. 25%