

Oncology Today with Dr Neil Love: Key Presentations from the 64th American Society of Hematology (ASH) Annual Meeting — Chronic Lymphocytic Leukemia Edition

THE CORRECT ANSWER IS INDICATED WITH YELLOW HIGHLIGHTING.

- 1. Which observation was reported in an analysis of progression-free survival (PFS) outcomes by genomic features in the ELEVATE-TN trial comparing acalabrutinib with or without obinutuzumab to chlorambucil/obinutuzumab for treatment-naïve chronic lymphocytic leukemia (CLL)?**
 - a. PFS was improved among all patients who received obinutuzumab with acalabrutinib
 - b. Patients with low-risk disease did not benefit from the addition of obinutuzumab to acalabrutinib
 - c. Patients with the highest-risk disease (del[17p], complex karyotype) did not benefit from the addition of obinutuzumab to acalabrutinib**
- 2. Which observation was reported at a median follow-up of 3.5 years in the GLOW study evaluating first-line fixed-duration ibrutinib/venetoclax versus chlorambucil/obinutuzumab?**
 - a. Significant improvement in only PFS with ibrutinib/venetoclax
 - b. Significant improvement in both PFS and overall survival with ibrutinib/venetoclax**
 - c. Fewer infection-related deaths with chlorambucil/obinutuzumab
- 3. Which of the following statements best characterizes the administration of the triplet combination of acalabrutinib, venetoclax and obinutuzumab for patients with high-risk, treatment-naïve CLL in the AVO trial?**
 - a. Treatment was continuous
 - b. Treatment was of a fixed duration
 - c. Treatment was guided by minimal residual disease status**
- 4. Which of the following outcomes was observed in the ALPINE study evaluating zanubrutinib versus ibrutinib for patients with relapsed/refractory CLL?**
 - a. The overall rate of cardiac adverse events was higher with ibrutinib
 - b. The rate of serious cardiac adverse events was higher with ibrutinib
 - c. The rate of cardiac adverse events leading to treatment discontinuation was higher with ibrutinib
 - d. All of the above**
 - e. The rate of cardiac events was similar with zanubrutinib and ibrutinib
- 5. The Phase Ib/II EPCORE CLL-1 study demonstrated which of the following results with subcutaneous epcoritamab for patients with Richter's syndrome?**
 - a. An overall response rate of 60% with a majority of responses being complete responses**
 - b. An overall response rate of 60% with a majority of responses being partial responses
 - c. An overall response rate of 60% with no complete responses
 - d. A very low overall response rate with no complete responses