

Consensus or Controversy? Clinical Investigators Provide Perspectives on the Current and Future Management of Gastroesophageal Cancers**THE CORRECT ANSWER IS INDICATED WITH YELLOW HIGHLIGHTING.**

- 1. The Phase III KEYNOTE-585 study of perioperative pembrolizumab plus chemotherapy versus chemotherapy alone for untreated, resectable gastric/gastroesophageal junction (GEJ) cancer demonstrated what efficacy outcome?**
 - A statistically and clinically significant improvement in event-free survival (EFS) in the main cohort
 - A statistically and clinically significant improvement in overall survival (OS) in the main cohort
 - No statistically significant improvement in EFS or OS in the main cohort**
 - Efficacy results are immature and have not been reported
- 2. The addition of tislelizumab to chemotherapy has demonstrated an improvement in OS in a Phase III trial among which of the following populations?**
 - Gastric/GEJ adenocarcinoma only
 - Esophageal squamous cell carcinoma (SCC) only
 - Both gastric/GEJ adenocarcinoma and esophageal SCC**
 - The addition of tislelizumab to chemotherapy has yet to demonstrate an OS advantage in advanced gastroesophageal cancer
- 3. Which of the following toxicities was most commonly observed with the addition of zolbetuximab to chemotherapy for patients with previously untreated claudin 18.2-positive, HER2-negative advanced gastric/GEJ adenocarcinoma in Phase III studies?**
 - Ocular
 - Neurologic
 - Hematologic
 - Gastrointestinal**
- 4. Early data suggest that ramucirumab/paclitaxel may have greater clinical activity in which group of patients?**
 - Patients with immune checkpoint inhibitor (ICI)-naïve disease
 - Patients with ICI-exposed disease**
 - Patients who have received at least 2 prior lines of therapy
- 5. The Phase II DESTINY-Gastric01 study demonstrated which of the following efficacy outcomes with trastuzumab deruxtecan (T-DXd) as second-line or later therapy compared to physician's choice of chemotherapy for patients with HER2-positive, unresectable or metastatic gastric or GEJ cancer?**
 - No substantial improvement in objective response rate with T-DXd versus chemotherapy
 - No durable response to systemic therapy with T-DXd versus chemotherapy
 - A statistically significant improvement in OS with T-DXd versus chemotherapy**