

## Inside the Issue: Integrating HER2-Targeted Strategies into the Management of Gastrointestinal Cancers

THE CORRECT ANSWER IS INDICATED WITH YELLOW HIGHLIGHTING.

- 1. What was the approximate overall response rate for patients with advanced gastric or gastroesophageal junction cancer treated with pembrolizumab, trastuzumab and chemotherapy as part of the KEYNOTE-811 study?**
  - a. 20%
  - b. 31%
  - c. 50%
  - d. 74%**
  - e. 90%
- 2. What was the most commonly reported any-grade adverse event for patients who received tucatinib with trastuzumab as part of the Phase II MOUNTAINEER study?**
  - a. Rash
  - b. Anemia
  - c. Pyrexia
  - d. Diarrhea**
- 3. In the DESTINY-Gastric01 study of trastuzumab deruxtecan (T-DXd) versus standard-of-care therapy for HER2-positive advanced gastric cancer, which of the following statements best describes the reported response data?**
  - a. Patients were more likely to experience response to standard-of-care therapy over T-DXd
  - b. Patients were more likely to experience response to T-DXd over standard-of-care therapy**
  - c. There was no difference in response rates between T-DXd and standard-of-care therapy
- 4. In the DESTINY-CRC02 study, patients with HER2-positive advanced colorectal cancer experienced a better response to which dose of T-DXd?**
  - a. 5.4 mg/kg q3wk**
  - b. 6.4 mg/kg q3wk
  - c. Both doses of T-DXd had the same overall response rate
- 5. At which grade of interstitial lung disease should T-DXd treatment be permanently discontinued?**
  - a. Grade 1
  - b. Grade 2**
  - c. Grade 3
  - d. Grade 4