POST-TEST

Inside the Issue: Optimizing the Diagnosis and Treatment of Neuroendocrine Tumors

THE CORRECT ANSWER IS INDICATED WITH YELLOW HIGHLIGHTING.

- 1. Which of the following agents is an FDA-approved somatostatin analog for the treatment of advanced neuroendocrine tumors (NETs)?
 - a. Lanreotide
 - b. Octreotide
 - c. Both a and b
 - d. Neither a nor b
- 2. What were the final overall survival (OS) results reported from the Phase III NETTER-1 evaluating lutetium Lu 177 dotatate in combination with somatostatin analogs compared to high-dose octreotide LAR (long-acting repeatable) for inoperable midgut NETs that progressed on lower-dose octreotide?
 - a. OS was significantly improved with lutetium Lu 177 dotatate compared to octreotide
 - b. OS was significantly worsened with lutetium Lu 177 dotatate compared to octreotide
 - c. OS was similar with lutetium Lu 177 dotatate and octreotide

3. Lutetium Lu 177 dotatate is FDA approved in which of the following settings?

- a. For all patients with gastroenteropancreatic neuroendocrine tumors (GEP-NETs)
- b. Patients with everolimus-refractory GEP-NETs
- c. Patients with somatostatin receptor (SSTR)-positive GEP-NETs

- 4. The Phase III NETTER-2 study is evaluating lutetium Lu 177 dotatate and octreotide versus octreotide alone in which of the following settings?
 - a. As first-line treatment for SSTR-positive, Grade 1 GEP-NETs
 - b. As first-line treatment for SSTR-positive, Grade 2 and Grade 3 GEP-NETs
 - c. As second-line treatment for SSTR-positive, Grade 1 GEP-NETs
 - d. As second-line treatment for SSTR-positive, Grade 2 and Grade 3 GEP-NETs
- 5. The ongoing Phase III COMPETE study is evaluating which of the following treatments versus everolimus for patients with well differentiated, Grade 2 to Grade 3, SSTR-positive GEP-NETs?
 - a. Lutetium Lu 177 dotatate
 - b. Lutetium Lu 177 edotreotide
 - c. Actinium Ac 225 dotatate