POST-TEST

Striving for Consensus: Current and Future Management of HER2-Low and HER2-Ultralow Breast Cancer

THE CORRECT ANSWER IS INDICATED WITH YELLOW HIGHLIGHTING.

- How is HER2-ultralow breast cancer defined?
 - a. HER2 IHC 0 with ≤1% staining
 - b. HER2 IHC 0 with ≤5% staining
 - c. HER2 IHC 0 with ≤10% staining
 - d. HER2 IHC 1+
 - e. HFR2 IHC 1+ or 2+
- 2. Which of the following best describes progression-free survival (PFS) with T-DXd versus chemotherapy by time to progression on first-line CDK4/6 inhibitor (CDK4/6i) and endocrine therapy (ET) in the Phase III DESTINY-BreastO6 trial for patients with HER2-low and HER2-ultralow metastatic breast cancer (mBC)?
 - a. T-DXd improved PFS only in patients who experienced disease progression after <6 months on first-line ET and CDK4/6i
 - b. T-DXd improved PFS only in patients who experienced disease progression after <12 months on first-line ET and cDK4/6i
 - c. T-DXd improved PFS only in patients who experienced disease progression after >12 months on first-line ET and CDK4/6i
 - d. T-DXd improved PFS regardless of time to progression on first-line ET and CDK4/6i
- 3. Which of the following any-grade adverse events was most commonly observed with T-DXd in patients with previously treated HR-positive, HER2-low or HER2-ultralow mBC in the Phase III DESTINY-Breast06 trial?
 - a. Neutropenia
 - b. Nausea
 - c. Keratitis
 - d. Headache

- 4. Which of the following best reflects the FDA approval status of T-DXd for patients with HER2-low breast cancer?
 - a. T-DXd is not approved for any patients with HER2-low disease
 - b. T-DXd is approved only as first-line therapy for advanced HER2 IHC 2+ disease
 - c. T-DXd is approved only for patients with HER2 IHC 2+ disease who received prior chemotherapy in the metastatic setting or developed disease recurrence during or within 6 months of completing adjuvant chemotherapy
 - d. T-DXd is approved for patients with HER2 IHC 1+ or 2+ disease who received prior chemotherapy in the metastatic setting or developed disease recurrence during or within 6 months of completing adjuvant chemotherapy
- 5. What was the approximate reduction in the risk of disease progression or death with T-DXd versus treatment of physician's choice for patients with previously treated HR-positive, HER2-ultralow mBC in the Phase III DESTINY-Breast 06 trial?
 - a. 6%
 - b. 11%
 - c. 22%
 - d. 47%