

Oncology Today with Dr Neil Love: Optimizing the Management of Metastatic BRCA-Negative, Triple-Negative Breast Cancer

THE CORRECT ANSWER IS INDICATED WITH YELLOW HIGHLIGHTING.

1. What was the approximate reduction in the risk of disease progression or death with sacituzumab tirumotecan compared to treatment of physician's choice for patients with previously treated metastatic triple-negative breast cancer (mTNBC) in the Phase III OptiTROP-Breast01 study?
 - a. 15%
 - b. 27%
 - c. 41%
 - d. 68%
2. What is the approximate incidence of HER2-low status (IHC 1+ or 2+) in TNBC?
 - a. 9%
 - b. 17%
 - c. 34%
 - d. 69%
3. The novel investigational antibody-drug conjugate emiltatug ledadotin targets which of the following proteins?
 - a. Nectin-4
 - b. B7-H4
 - c. HER3
 - d. TROP2
4. What was the approximate median duration of response observed with first-line sacituzumab govitecan and pembrolizumab for patients with mTNBC in the Phase III ASCENT-04/KEYNOTE-D19 trial?
 - a. 5.1 months
 - b. 9.2 months
 - c. 16.5 months
 - d. 23.2 months
5. Which of the following outcomes best describes the incidence of pneumonitis in patients with mTNBC receiving first-line sacituzumab govitecan and pembrolizumab compared to those receiving chemotherapy and pembrolizumab in the Phase III ASCENT-04 trial?
 - a. Significantly higher with sacituzumab govitecan
 - b. Significantly higher with chemotherapy
 - c. Similar with sacituzumab govitecan and chemotherapy