POST-TEST

Oncology Today with Dr Neil Love: Optimizing the Integration of ADCs into the Treatment of HR-Positive and Triple-Negative Metastatic Breast Cancer

THE CORRECT ANSWER IS INDICATED WITH YELLOW HIGHLIGHTING.

1. **Which of the following antibody-drug conjugates is FDA approved for HR-positive, HER2-negative metastatic breast cancer (mBC)?**
   a. Trastuzumab deruxtecan
   b. Sacituzumab govitecan
   c. Datopotamab deruxtecan
   d. Both a and b
   e. All of the above

2. **Which of the following statements best characterizes progression-free survival (PFS) outcomes observed with trastuzumab deruxtecan (T-DXd) for patients in the DESTINY-BREAST06 trial with HR-negative mBC that was HER2 low or HER2 ultralow?**
   a. PFS was longer for patients with HER2-low than HER2-ultralow disease
   b. PFS was longer for patients with HER2-ultralow than HER2-low disease
   c. PFS was similar for patients with HER2-low and HER2-ultralow disease

3. **Pooled analysis and real-world studies evaluating the safety of rechallenging with T-DXd after the development of Grade 1 interstitial lung disease (ILD) have provided which of the following conclusions?**
   a. Re-treatment with T-DXd after Grade 1 ILD is safe — no cases of recurrent ILD were observed
   b. Re-treatment with T-DXd after Grade 1 ILD is safe, and rates of recurrent ILD are low
   c. Re-treatment with T-DXd after Grade 1 ILD is not safe

4. **Noteworthy adverse events of which type have been associated with datopotamab deruxtecan but not with T-DXd or sacituzumab govitecan?**
   a. Neutropenic
   b. Ocular surface
   c. Gastrointestinal

5. **The ASCENT-04 trial evaluating first-line sacituzumab govitecan with pembrolizumab versus chemotherapy with pembrolizumab for patients with PD-L1-positive metastatic triple-negative breast cancer demonstrated which of the following outcomes?**
   a. A statistically significant superior median PFS with chemotherapy and pembrolizumab
   b. A statistically significant superior median PFS with sacituzumab govitecan and pembrolizumab
   c. A similar median PFS in both study arms