

Oncology Today Special Edition: Rounds with the Investigator — A Discussion on the Role of Endocrine-Based Therapy for HR-Positive Breast Cancer

THE CORRECT ANSWER IS INDICATED WITH YELLOW HIGHLIGHTING.

1. Photopsia has been most commonly observed with which of the following oral selective estrogen receptor degraders (SERDs)?
 - a. Elacestrant
 - b. Camizestrant**
 - c. Imlunestrant
 - d. Giredestrant
2. Which therapy yielded the greater reduction in the risk of disease progression or death in the overall population in the Phase III EMBER-3 trial comparing imlunestrant as monotherapy or combined with abemaciclib to standard endocrine therapy for ER-positive, HER2-negative advanced breast cancer previously treated with endocrine therapy?
 - a. Standard endocrine therapy
 - b. Imlunestrant monotherapy
 - c. Imlunestrant with abemaciclib**
 - d. Imlunestrant monotherapy and imlunestrant with abemaciclib yielded similar benefit
3. Which of the following statements best describes invasive disease-free survival results from the Phase III NATALEE trial evaluating the addition of ribociclib to adjuvant endocrine therapy for patients with HR-positive, HER2-negative localized breast cancer?
 - a. No benefit was observed
 - b. Benefit was limited to patients with node-positive disease
 - c. Benefit was limited to patients with node-negative disease
 - d. Benefit extended to both node-positive and node-negative disease**
4. What was the duration of adjuvant abemaciclib administered in combination with endocrine therapy for patients with HR-positive, HER2-negative, node-positive high-risk localized breast cancer in the Phase III monarchE trial?
 - a. 1 year
 - b. 2 years**
 - c. 3 years
 - d. 5 years
5. Which of the following statements best describes the association between progression-free survival (PFS) with elacestrant versus standard endocrine therapy and prior duration of CDK4/6 inhibitor among patients with advanced breast cancer in the Phase III EMERALD trial?
 - a. Longer duration of prior CDK4/6 inhibitor was negatively associated with PFS benefit
 - b. Longer duration of prior CDK4/6 inhibitor was positively associated with PFS benefit**
 - c. No association was observed between duration of prior CDK4/6 inhibitor and PFS benefit