

Second Opinion: Clinical Investigators Provide Perspectives on the Future Role of AKT Inhibition in the Management of Prostate Cancer

THE CORRECT ANSWER IS INDICATED WITH YELLOW HIGHLIGHTING.

- 1. Activation of AKT in prostate cancer is most commonly associated with which genetic alteration?**
 - TP53 mutation
 - PTEN deficiency**
 - BRCA2 mutation
 - CHK2 mutation
- 2. Which of the following testing methods is best suited for detecting PTEN deficiency?**
 - FISH (fluorescence in situ hybridization)
 - IHC (immunohistochemistry)**
 - Next-generation sequencing
 - All of the above methods are equally effective
- 3. Which of the following is the best description of the prognostic value of PTEN deficiency in metastatic prostate cancer?**
 - PTEN deficiency does not correlate with patient outcomes
 - PTEN deficiency is associated with poor prognosis**
 - PTEN deficiency is associated with improved prognosis
- 4. What is the approximate incidence of PTEN deficiency among patients with metastatic prostate cancer?**
 - Lower than 10%
 - Approximately 40%**
 - Higher than 75%
- 5. Which of the following statements best describes the efficacy of capivasertib with abiraterone and androgen deprivation therapy (ADT) in comparison to abiraterone/ADT alone in the Phase III CAPItello-281 study for patients with de novo PTEN-deficient metastatic hormone-sensitive prostate cancer?**
 - Radiographic progression-free survival (rPFS) outcomes were inferior
 - A nonsignificant trend toward rPFS improvement was reported
 - A statistically significant improvement in rPFS was reported**
 - No efficacy findings have been reported yet