

POST-TEST

Expert Second Opinion: Investigators Discuss the Optimal Management of Myelofibrosis and Systemic Mastocytosis

THE CORRECT ANSWER IS INDICATED WITH YELLOW HIGHLIGHTING.

1. What is the recommended starting dose of avapritinib for patients with indolent systemic mastocytosis?
 - a. 25 mg daily
 - b. 150 mg daily
 - c. 200 mg daily
 - d. 300 mg daily
2. Which of the following results best describes a primary efficacy outcome from the first 24 weeks of luspatercept/JAK inhibitor therapy compared to placebo for patients with myelofibrosis (MF)-associated anemia receiving red blood cell (RBC) transfusions in the Phase III INDEPENDENCE study?
 - a. An inferior RBC transfusion independence rate with luspatercept/JAK inhibitor
 - b. A clinically meaningful but not statistically significant improvement in RBC transfusion independence with luspatercept/JAK inhibitor
 - c. A clinically meaningful and statistically significant improvement in RBC transfusion independence with luspatercept/JAK inhibitor
3. The Phase II ODYSSEY study is evaluating which strategy for improving anemia in patients with MF who have or have not previously received a JAK inhibitor?
 - a. Luspatercept monotherapy
 - b. Momelotinib monotherapy
 - c. Combined luspatercept and momelotinib
4. Systemic mastocytosis is a chronic leukemia that is often driven by a mutation involving which gene?
 - a. JAK2
 - b. CALR
 - c. KIT
 - d. BRAF
5. Elenestinib is a selective oral inhibitor of KIT D816V that differs from avapritinib in which way?
 - a. Once daily dosing
 - b. More potent inhibition of KIT D816V
 - c. Oral administration
 - d. Limited central nervous system penetration