Consensus or Controversy, Issue 3: Clinical Investigators Provide Their Perspectives on Controversial Issues in the Management of Relapsed or Refractory Multiple Myeloma and the Role of Novel Investigational Agents

THE CORRECT ANSWER IS INDICATED WITH YELLOW HIGHLIGHTING.

1. Three-drug regimens recommended by the investigators surveyed for an otherwise healthy younger patient who initially responds to induction therapy with lenalidomide/bortezomib/dexamethasone (RVD) but develops symptomatic disease progression with new bone lesions during the first year of lenalidomide maintenance include
   a. Cyclophosphamide/bortezomib/dexamethasone (CyBorD)
   b. Carfilzomib/pomalidomide/dexamethasone
   c. RVD re-treatment
   d. All of the above
e. Both a and b

2. Most of the investigators surveyed would recommend treatment with _____________ for an otherwise healthy transplant-ineligible 77-year-old man with Stage III high-risk multiple myeloma (MM) with extensive bone disease who receives RVD lite but develops symptomatic disease progression after 6 months.
   a. Carfilzomib/pomalidomide/dexamethasone
   b. Carfilzomib/lenalidomide/dexamethasone
   c. Carfilzomib/cyclophosphamide/dexamethasone
   d. Cyclophosphamide/pomalidomide/dexamethasone

3. All of the clinical investigators surveyed would recommend a pomalidomide-based regimen for a 62-year-old man with standard-risk MM and normal renal function who achieves a complete response after initial treatment with 4 cycles of lenalidomide/dexamethasone before transplantation, experiences a first relapse 3 years later for which he receives 18 months of CyBorD and experiences a second, indolent relapse.
   a. True
   b. False

4. The majority of the investigators surveyed would recommend a 3-drug regimen containing _____________ for a 72-year-old woman with t(4;14) MM who achieves a complete response after initial treatment with 6 cycles of CyBorD, experiences a first relapse after 2 years during treatment with CyBorD, receives 6 months of lenalidomide/dexamethasone and develops rapidly progressive disease with an increasing level of creatinine and hypercalcemia.
   a. Bortezomib
   b. Carfilzomib
   c. Lenalidomide

5. All of the faculty surveyed would perform a baseline cardiac evaluation prior to initiating carfilzomib therapy for patients with MM.
   a. True
   b. False

6. Adverse events associated with pomalidomide/dexamethasone therapy include _____________.
   a. Myelosuppression
   b. Fatigue
   c. Gastrointestinal (GI) toxicity
d. All of the above
e. None of the above
POST-TEST

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7. The faculty members have observed ___________ as a common adverse event associated with panobinostat therapy.
   a. GI toxicity
   b. Cytopenia
   c. Both a and b

8. The most common side effect associated with the novel oral proteasome inhibitor oprozomib is GI toxicity.
   a. True
   b. False