POST-TEST

Addressing Current Questions and Controversies: PARP Inhibition in the Management of Ovarian and Other Gynecologic Cancers

THE CORRECT ANSWER IS INDICATED WITH YELLOW HIGHLIGHTING.

1. **In 2014 the FDA approved olaparib monotherapy for patients with deleterious or suspected deleterious germline BRCA-mutated, advanced recurrent ovarian cancer (OC) previously treated with 3 or more lines of chemotherapy.**
   a. True
   b. False

2. **The 2016 NCCN guidelines recommend that _____ undergo BRCA1 and BRCA2 testing.**
   a. Only patients of Ashkenazi Jewish descent
   b. Only patients with a strong family history of OC
   c. All patients with epithelial OC

3. **Common adverse events associated with olaparib therapy in OC include _____.**
   a. Gastrointestinal side effects
   b. Anemia
   c. Both a and b
   d. None of the above

4. **The SOLO1 trial is evaluating olaparib maintenance therapy in patients with _____ OC.**
   a. BRCA wild-type
   b. BRCA-mutated
   c. Neither a nor b

5. **Treatment benefits have been observed with olaparib in patients with platinum-sensitive OC in addition to those with platinum-resistant OC.**
   a. True
   b. False

6. **The following genes are associated with a predisposition to OC:**
   a. BRCA1
   b. BRCA2
   c. Lynch syndrome (HNPCC)
   d. RAD51
   e. All of the above

7. **The Phase III GOG-3005 study is evaluating carboplatin and paclitaxel with or without concurrent or continuation maintenance _____ for patients with previously untreated Stage III or IV epithelial OC.**
   a. Veliparib
   b. Rucaparib
   c. Niraparib

8. **_____ deficiency is common in endometrial cancer, and deficient cells have been shown to be sensitive to PARP inhibitors in case reports of BRCA wild-type endometrial cancer.**
   a. PALB2
   b. PTEN
   c. Neither a nor b

9. **Data from the GOG-280 trial of veliparib for patients with BRCA1/2-deficient recurrent epithelial ovarian, fallopian tube or primary peritoneal carcinoma demonstrated a 26% response rate in the overall population and a 35% response rate among patients with platinum-sensitive disease.**
   a. True
   b. False

10. **Results from the Phase II ARIEL2 prospective trial demonstrated that a genome scarring homologous recombination deficiency signature can identify patients with BRCA wild-type high-grade ovarian cancer who are likely to benefit from _____ therapy.**
    a. Bevacizumab
    b. Rucaparib
    c. Niraparib