

Cases from the Community: Clinical Investigators Provide Their Perspectives on Actual Breast Cancer Cases and the Implications of Emerging Research

THE CORRECT ANSWER IS INDICATED WITH YELLOW HIGHLIGHTING.

- In the Phase III APHINITY study the addition of pertuzumab to adjuvant chemotherapy/trastuzumab resulted in a 20% to 25% relative risk reduction in invasive disease-free survival for patients with hormone receptor (HR)-negative disease and those with node-positive disease.
a. True
b. False
- Patients in which subset experienced an improvement in invasive disease-free survival in the Phase III ExteNET study comparing 1 year of neratinib to placebo for HER2-positive breast cancer after completion of trastuzumab adjuvant therapy?
a. HR-positive
b. HR-negative
c. Both a and b
- What was demonstrated in the SWOG-8814 study regarding the utility of the 21-gene assay Recurrence Score® (RS) for patients with ER-positive, node-positive breast cancer?
a. RS was prognostic
b. RS was predictive of benefit from adjuvant chemotherapy
c. Neither a nor b
d. Both a and b
- Which of the following genomic assays is supported by the ASCO Biomarker Guidelines for patients with ER-positive, HER2-negative breast cancer and 1 to 3 positive nodes?
a. 21-gene assay
b. 70-gene assay
c. Breast Cancer Index
d. All of the above
- With which of the following CDK4/6 inhibitors is Grade 3 or 4 neutropenia more commonly observed?
a. Palbociclib
b. Ribociclib
c. Abemaciclib
d. Both a and b
e. Both b and c
- What overall response rates have been observed with CDK4/6 inhibitors combined with endocrine therapy for patients with ER-positive, HER2-negative metastatic breast cancer in the first-line setting?
a. 50% to 60%
b. 20% to 30%
c. 10% to 15%
- Which of the following CDK4/6 inhibitors is approved as monotherapy for patients with refractory HR-positive, HER2-negative metastatic breast cancer?
a. Palbociclib
b. Ribociclib
c. Abemaciclib
d. None of the above
- According to the ASCO clinical practice guidelines for HER2-positive brain metastases, CNS metastatic progression or absence of progression should be the primary driver of systemic management decision-making.
a. True
b. False
- In the TBCRC 022 Phase II study of neratinib and capecitabine in patients with HER2-positive breast cancer brain metastases, the CNS overall response rate was approximately _____.
a. 25%
b. 50%
c. 75%

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10. The overall response rate with single-agent anti-PD-L1 (atezolizumab) or anti-PD-1 (pembrolizumab) checkpoint inhibitors for patients with metastatic triple-negative breast cancer is approximately 25%.

- a. True
- b. False