## Breast Cancer Update — Issue 3, 2013

1. The Phase III EMILIA trial for patients

a. Progression-free survival

c. Objective response rate

2. The Phase III CLEOPATRA study demon-

strated a statistically significant advantage

pertuzumab to trastuzumab and docetaxel

for patients with HER2-positive metastatic

with the addition of

capecitabine/lapatinib.

b. Overall survival

d. All of the above

breast cancer.

with HER2-positive advanced breast

cancer demonstrated a significant increase in with T-DM1 versus

## THE CORRECT ANSWER IS INDICATED WITH YELLOW HIGHLIGHTING.

6. In the BOLERO-3 trial common side effects

7. Results of the Phase III BOLERO-3 trial

evaluating the addition of everolimus to

vinorelbine/trastuzumab for trastuzumab-resis-

tant, HER2-positive metastatic breast cancer

ment in median progression-free survival with

indicated a statistically significant improve-

the addition of everolimus to vinorelbine/

a. Hyperglycemia

b. Hyperlipidemia

e. All of the above

c. Rash

trastuzumah

d. Stomatitis

that were associated with everolimus included

	b. Overall survival c. Both a and b	a. True b. False
	Data from an NCCN study of T1a,b NOMO breast tumors indicate that the subgroup of patients with hormone receptor-negative, HER2-positive T1b breast cancer have a higher 5-year median relapse-free survival with chemotherapy/trastuzumab than with no chemotherapy/trastuzumab.  a. True  b. False	8. A Phase III study of eribulin versus capecitabine for patients with locally advanced or metastatic breast cancer previously treated with anthracyclines and taxanes reported that patients with HER2-negative, ER-negative or triple-negative disease may experience a greater benefit in overall survival with eribulin compared to capecitabine.
4.	The Phase III MARIANNE trial is evaluating with or without pertuzumab	b. False
5.	versus trastuzumab and a taxane for patients with HER2-positive metastatic breast cancer.  a. T-DM1 b. Lapatinib c. Olaparib  A Phase II trial evaluating the use of the to select neoadjuvant therapy for patients with ER-positive breast cancer reported a pathologic complete response rate of approximately 20% for patients with receiving chemotherapy (TC x 6).	9. Analysis of quality of life in patients with locally advanced or metastatic breast cancer in the Phase III study of eribulin versus capecitabine demonstrated:  a. Overall quality of life was improved with both agents but was significantly better with eribulin than with capecitabine  b. Advantages in parameters linked to gastrointestinal effects with eribulin c. Advantages in parameters related to hair loss with capecitabine  d. All of the above
	a. MammaPrint assay; high-risk scores b. Oncotype DX assay RS; high-risk RS (≥25) c. PAM50 assay; risk of recurrence high- risk classification	10. The ATLAS and aTTom trials investigating the effect of continuing adjuvant tamoxifen to 10 years versus stopping at 5 years demonstrated a 25% reduction in breast cancer mortality after year 10 in patients who continued tamoxifen to 10 years.
		a. True  b. False