POST-TEST

Oncology Today with Dr Neil Love: Optimal Use of PARP Inhibitors for Patients with Hormone-Sensitive and Castration-Resistant Metastatic Prostate Cancer

THE CORRECT ANSWER IS INDICATED WITH YELLOW HIGHLIGHTING.

1. **The Phase II TRITON2 study of rucaparib monotherapy demonstrated an efficacy benefit for patients with metastatic castration-resistant prostate cancer (mCRPC) without homologous recombination repair (HRR) mutations.**
   a. True
   b. False

2. **In the Phase III PROfound study of olaparib versus physician's choice of new hormonal agents for patients with mCRPC, olaparib demonstrated the greatest benefit in which subgroup of patients?**
   a. Those with ATM mutations
   b. Those with BRCA1 mutations
   c. Those with BRCA2 mutations
   d. Those with CDK12 mutations

3. **In the Phase III PROpel study of olaparib and abiraterone versus abiraterone alone for mCRPC, which outcome was reported for patients with an HRR mutation?**
   a. Inferior radiographic progression-free survival (rPFS)
   b. A numerical but nonsignificant improvement in rPFS
   c. A significant improvement in rPFS

4. **Niraparib in combination with abiraterone and prednisone is FDA approved in the first-line setting for patients with mCRPC …**
   a. With BRCA mutations
   b. With any HRR gene mutation
   c. Regardless of BRCA mutation status
   d. This combination has not received FDA approval

5. **In the Phase III TALAPRO-2 study evaluating talazoparib and enzalutamide for mCRPC in the first-line setting, which of the following was the most common Grade ≥3 hematologic treatment-emergent adverse event?**
   a. Anemia
   b. Neutropenia
   c. Thrombocytopenia