

Expert Second Opinion: Investigators Provide Perspectives on the Best-Practice Use of Immunotherapy for Endometrial Cancer

THE CORRECT ANSWER IS INDICATED WITH YELLOW HIGHLIGHTING.

- 1. The Phase III Keynote-B21 study evaluating adjuvant pembrolizumab/chemotherapy versus placebo/chemotherapy for newly diagnosed, high-risk endometrial cancer (EC) reported which of the following efficacy outcomes?**

 - Inferior disease-free survival (DFS)
 - Significant improvement in DFS for patients with mismatch repair (MMR)-deficient (dMMR) disease but not for those with MMR-proficient (pMMR) disease
 - Significant improvements in DFS regardless of MMR status
 - No significant difference in DFS
- 2. In the Phase III RUBY Part 1 study evaluating the addition of dostarlimab to chemotherapy in the up-front setting for advanced EC, a statistically significant improvement in progression-free survival (PFS) was reported in the group of patients with which of the following molecular subtypes of EC?**

 - POLE mutated
 - TP53 mutated
 - Both a and b
 - Neither a nor b
- 3. According to NCC Guidelines, MMR immunohistochemistry or microsatellite instability testing should be performed for all patients who have POLE pathogenic mutations.**

 - True
 - False
- 4. The Phase III DUO-E study evaluating maintenance durvalumab with or without olaparib for advanced EC reported which of the following efficacy outcomes for patients receiving durvalumab/olaparib?**

 - Inferior PFS
 - A significant improvement in PFS regardless of MMR status
 - A significant improvement in PFS for patients with dMMR disease but not for those with pMMR disease
 - No significant improvement in PFS
- 5. What was the duration of maintenance therapy in Part 2 of the Phase III RUBY trial, evaluating the addition of niraparib to dostarlimab as maintenance therapy after initial therapy with carboplatin/paclitaxel and dostarlimab?**

 - Up to 2 years
 - Up to 3 years
 - Indefinitely