

## POST TEST

### Metastatic Prostate Cancer: Current Trends and Future Landscape

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Deadline September 30, 2017

Please email test to [ceuprograms@ctsma.org](mailto:ceuprograms@ctsma.org)

Or mail to Jennifer Amaral CMA(AAMA) 208 Deerfield Ridge Dr, Mystic CT 06355

Make Checks Payable to CSMA.

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1. After participating in this activity, how confident are you in your ability to create individualized treatment plans for patients with prostate cancer based on current screening and staging guidelines and evidence for monotherapy, combination therapy, and sequencing of therapies?

- Very confident
- Moderately confident
- Somewhat confident
- Not at all confident

2. After participating in this activity, how often will you evaluate data for the benefits and risks of current and evolving strategies in the treatment of metastatic prostate cancer?

- Always
- Most of the time
- Rarely
- Never

3. Your patient has clinically localized prostate cancer and a Gleason score of 7. According to the National Comprehensive Cancer Network (NCCN) stratification scheme, in what risk group is this patient?

- Low
- Intermediate
- High
- Very high

4. A tumor that invades the seminal vesicles is staged as \_\_\_\_.

- T1
- T2
- T3
- T4

5. Your patient is undergoing androgen-derivation therapy in combination with radiation therapy for locally advanced or intermediate-/high-risk prostate cancer. What potential treatment-related adverse effect should you discuss with him?

- Risk for lymphopenia
- Risk for febrile neutropenia
- Risk for chronic constipation
- Risk for impaired cognitive performance

6. Mechanisms for the development of castration-resistant prostate cancer (CRPC) include \_\_\_\_.

- decreased sensitivity of the androgen receptor to its agonists
- androgen receptor mutations that render the receptor (AR) responsive to alternate, non-androgen ligands
- ligand-independent AR deactivation
- All of the above

7. The PRINCE trial demonstrated that intermittent dosing (12 weeks of treatment followed by a pause until disease progression) is safe.

- docetaxel
- cabazitaxel
- abiraterone
- enzalutamide

8. Which of the following describes the mechanism of action for enzalutamide?

- Inhibition of CYP17, an enzyme involved in the production of testosterone
- Inhibition of DNA binding of the AR and downstream transcription
- Use of vaccinia and fowlpox viruses as vectors to deliver the PSA antigen
- Autologous cellular immunotherapy

9. Which of the following is an NCCN category 1 option to treat symptomatic bone metastases without visceral metastases?

- Sipuleucel-T
- Denosumab
- Radium-223
- None of the above

10. Checkpoint inhibitors currently under investigation in metastatic CRPC include \_\_\_\_.

- olaparib
- galeterone
- rilimogene galvacirepvac
- pembrolizumab