

Prostate Cancer Management: Enhancing Cost-Effectiveness and Patient Outcomes

Physician Credit

*Instructions for Receiving Continuing Physician Education (CME)
Credit: Testing and Grading Information*

This activity is free online at www.ajmc.com/ce and at www.arcmesa.org, where you will be directed to the activity including the online posttest, activity evaluation, and request for credit. Instant online grading is available, along with a downloadable CME certificate.

Testing and Grading Directions

1. Each participant evaluating the activity and achieving a passing grade of 70% or higher on the online posttest will be eligible to receive a CME certificate.
2. Participants receiving a failing grade on the exam will be notified and permitted to take 1 reexamination at no cost.
3. To receive credit, go to www.ajmc.com/ce or www.arcmesa.org, locate this activity in the CE course list, click on the online posttest link, and complete the online posttest and activity evaluation form to receive your certificate.

Release date: December 15, 2014

Expiration date: December 15, 2015

Pharmacy Credit

*Instructions for Receiving Continuing Pharmacy Education (CPE)
Credit: Testing and Grading Information*

This lesson is free online; receive instant grading and request your CE credit at www.PharmacyTimes.org.

Testing and Grading Directions

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2. Participants receiving a failing grade on the exam will be notified and permitted to take 1 reexamination at no cost.
3. To receive your credit online, go to www.PharmacyTimes.org, complete the online posttest (achieving a passing grade of 70% or better) and the online activity evaluation form. Your CE credit will be automatically uploaded to CPE Monitor™. Please ensure that your *Pharmacy Times* account is updated with your NABP e-profile ID number and your date of birth (MMDD format). Participation data will *not* be uploaded into CPE Monitor™ if you do not have your NABP e-profile ID number and date of birth entered into your profile on www.pharmacytimes.org.

Sample of Online Posttest

Choose the best answer for each of the following:

1. In the TNM prostate cancer staging system, which of the following is/are true?

- A. T stage describes local cancer confined to the prostate
- B. M stage describes the spread of metastases to the nearest lymph nodes through the lymphatic system
- C. N stage describes the spread of metastases to the distant sites through the lymph or blood system
- D. All of the above

2. Patients whose prostate specific antigen (PSA) levels increase by more than what amount per year before undergoing surgery or radiation therapy may have a higher rate of prostate cancer recurrence?

- A. 0.75 ng/mL
- B. 1.0 ng/mL
- C. 1.5 ng/mL
- D. 2.0 ng/mL

3. Which of the following are considered appropriate for men with low-risk prostate cancer?

- A. Brachytherapy
- B. Cryotherapy
- C. Intensity-modulated radiation therapy
- D. All of above

4. Which of the following is/are true of active surveillance?

- A. Active surveillance involves enhanced monitoring of patients to retain the goal of curative treatment should disease progression occur
- B. Allows the avoidance of treatment-related adverse events
- C. May be associated with potential physician and patient anxiety that can occur as a result of withholding an interventional treatment
- D. All of the above

5. Hormonal manipulations (such as orchiectomy or luteinizing hormone-releasing hormone agonist [LHRH]) are standard treatment options for patients with which stage of prostate cancer?
- Stage I
 - Stage II
 - Stage III
 - All of the above
6. Which of the following uses radioactive implants placed under radiologic guidance to emit radiation to cells affected by cancer?
- Brachytherapy
 - EBRT
 - IMRT
 - Orchiectomy
7. The goal of which of the following therapies is to reduce the level of testosterone and other androgens to castrate levels?
- Androgen deprivation therapy
 - External-beam radiation therapy (EBRT)
 - Intensity-modulated radiation therapy (IMRT)
 - Orchiectomy
8. According to one study, over a 2-year period, approximately how much were the estimated medical costs of patients with prostate cancer with the initiation of active treatment?
- \$37,000
 - \$56,000
 - \$83,000
 - \$105,000
9. What percentage of men experience biochemical recurrence 5 years after initial therapy?
- 5%
 - 10%
 - 15%
 - 20%
10. How does the American Urological Association define a detectable or rising PSA value?
- >0.2 ng/mL after surgery with a second confirmatory level of >0.2 ng/mL
 - >0.4 ng/mL after surgery with a second confirmatory level of >0.5 ng/mL
 - >0.8 ng/mL after surgery with a second confirmatory level of >1.0 ng/mL
 - >1.0 ng/mL after surgery with a second confirmatory level of >1.0 ng/mL
11. Treatment with which of the following is often complicated by testosterone surges and microsuges?
- Gonadotropin-releasing hormone (GnRH) agonists
 - GnRH antagonists
 - LHRH agonist
 - LHRH antagonist
12. Which of the following is the only GnRH antagonist currently available for use in prostate cancer in the United States?
- Abarelix
 - Acycline
 - Degarelix
 - Oxarelix
13. Which of the following is an androgen receptor antagonist that was approved in August 2012 for the treatment of castration-resistant prostate cancer (CRPC) following docetaxel treatment?
- Bicalutamide
 - Enzalutamide
 - Finasteride
 - Nilutamide
14. Juice and extract from which of the following have resulted in significant improvement in PSA doubling time (PSADT) in two phase 2 trials?
- Apple
 - Mango
 - Orange
 - Pomegranate
15. Members of the Brassica family of vegetables produce which of the following compounds, which has been shown to suppress tumor cell growth in vitro?
- cAMP
 - dATP
 - indole-3-carbinol
 - IP3

16. Which of the following is an FDA-approved therapeutic vaccine in oncology?
- A. Abiraterone
 - B. Sipuleucel-T
 - C. Radium-223
 - D. Cabazitaxel
17. In the CHAARTED trial, at a median follow-up of 29 months, the median overall survival improvement was:
- A. 9.2 months
 - B. 10.8 months
 - C. 13.6 months
 - D. 18.6 months
18. In a large phase 3 trial comparing denosumab and zoledronic acid in men with mCRPC, patients receiving denosumab had a significantly longer time to:
- A. First skeletal event
 - B. Onset of nausea and vomiting
 - C. Onset of thrombocytopenia
 - D. Onset of leukopenia
19. Intermittent ADT involves:
- A. ADT readministration after sipuleucel-T
 - B. ADT readministration after docetaxel
 - C. ADT readministration when clinical symptoms become apparent
 - D. ADT readministration when PSA is decreases
20. Radium-223 is an alpha-particle-emitting radioisotope that exerts cytotoxic action by:
- A. Inducing double-strand breaks in the DNA of adjacent cells
 - B. Inducing single-strand breaks in the DNA of adjacent cells
 - C. Inducing double-strand breaks in the RNA of adjacent cells
 - D. Inducing single-strand breaks in the RNA of adjacent cells

Sample
Posttest