

# Highlights from the 2014 Aplastic Anemia and MDS International Foundation Bone Marrow Failure Disease Scientific Symposium

Thank you for participating in this medical educational activity. Please mail to the following address by *October 31, 2015*.

Medical Education Resources, 9785 South Maroon Circle, Suite 100, Englewood, CO 80112  
Fax: 303-798-5731 or E-mail: [info@mer.org](mailto:info@mer.org)

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# Interactive Updates in Non-Transplant Therapy of MDS

## Highlights from the 2014 Aplastic Anemia and MDS International Foundation Bone Marrow Failure Disease Scientific Symposium

### CME Assessment Test

- Which of the following pairs bear most resemblance to each other?
  - Low risk (<10% blasts) MDS and high risk MDS (10-20% blasts)
  - Which of the following is the principal cause of death in MDS?
  - Which of the following would have the best prognosis after 3+7 chemotherapy?
- Which of the following is the principal cause of death in MDS?
  - Progression to AML
  - Bone marrow failure before progression
  - Both
  - Neither
- Which of the following would have the best prognosis after 3+7 chemotherapy?
  - A 50 year-old with 15% blasts and a complex karyotype
  - A 50 year-old with 80% blasts and a normal karyotype
  - A 50 year-old with 15% blasts and inversion of chromosome 16 (inv 16)
- Which is the variable predictive of response to ESAs in LR-MDS?
  - Endogenous EPO serum level < 500U/L
  - Transfusion dependence
  - Bone marrow blast percentage
  - Marrow cellularity
- What is the significance of recurrent somatic mutations in LR-MDS?
  - Negative prognostic significance
  - No prognostic value
  - Variable prognostic significance depending on the type of mutation
  - Diagnostic value
- A 68 year old woman presents with fatigue and dyspnea on exertion. Her CBC shows a normal neutrophil count but a platelet count of  $480 \times 10^9/L$  and a hemoglobin of 9.4 g/dL with an MCV of 97 fL. B12 and folate levels are within normal limits, and the patient takes no medications except simvastatin and aspirin. Marrow biopsy shows a hypercellular marrow with erythroid hypoplasia, micromegakaryocytes, left-shifted myelopoiesis, and occasional dysplastic red cells. The karyotype is 47, del(5)(q13q33), +8 in 14 of 20 metaphases. Serum erythropoietin level is 510 U/L. Which of the following agents is most likely to be effective in this patient?
  - Lenalidomide
  - Azacitidine
  - Anti-thymocyte globulin
  - Darbepoetin
- Which of the following proteins is critical for the action of lenalidomide in MDS?
  - Ikaros 2 transcription factor
  - Interleukin 6
  - Cereblon
  - Interferon alpha

### CME Assessment Test Answer Sheet – Program ID #???????

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#### INSTRUCTIONS

(1) Read the articles in the publication carefully. (2) Circle the correct response to each question on the Answer Sheet. (3) To receive CME credit, fax the completed Answer Sheet and Evaluation Form to the Medical Education Resources (303-798-5731) or mail to the Medical Education Resources, 9785 South Maroon Circle, Suite 100, Englewood, CO 80112. No processing fee is required.

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| 1. | A | B | C |   |  |  |  |
| 2. | A | B | C | D |  |  |  |
| 3. | A | B | C |   |  |  |  |
| 4. | A | B | C | D |  |  |  |
| 5. | A | B | C | D |  |  |  |
| 6. | A | B | C | D |  |  |  |
| 7. | A | B | C | D |  |  |  |