

BREAST CANCER

1. The least rate of morbidity in breast cancer is
 - 1) In Ukraine
 - 2) In Japan
 - 3) In Canada
 - 4) In Sweden
2. The organ-preserving operation in breast cancer can be used:
 - 1) T₃ N₁ M₀
 - 2) T₁ N₂ M₀
 - 3) T₁ N₀ M₀
 - 4) T₄ N₃ M₁
3. What treatment would you choose for the patient with breast cancer
T₂ N₀ M₀
 - 1) Radical operation only
 - 2) Radical irradiation only
 - 3) Chemotherapy only
 - 4) Hormone-therapy only
4. The most frequently breast cancer is seen in
 - 1) US
 - 2) Central Africa
 - 3) East Asia
 - 4) Mediterranean countries
5. What treatment would you choose for the patient with breast cancer
T₄ N₁ M₀ (local destruction)
 - 1) Organ-saving operation + hormone-therapy
 - 2) Local irradiation of the breast + radical irradiation
 - 3) Palliative mastectomy
 - 4) Only chemotherapy
6. In what cases the palliative operation is useful
 - 1) T₂ N₁ M₁
 - 2) T₄ N₀ M₀
 - 3) T₄ N₂ M₁
 - 4) T₃ N₁ M₀
7. What is more significant for the results of BC hormone-therapy:
 - 1) The level of hormones (Estrogen, Progesterone) in blood serum
 - 2) To presence of hormonal receptors on the malignant cells surface
8. What method of treatment can be used as a radical one in breast cancer:
 - 1) Cytostatic therapy
 - 2) Radiation therapy
 - 3) Surgery
 - 4) Hormone-therapy
- 5) 9. The patient with breast cancer T₂ N₂ M₀; ER + , PR +; HER – 2 ne (-), you tactic?

10. What of next pathological situations belongs to the true tumors
 - 1) Acute mastitis
 - 2) Mammalgia
 - 3) Fibroadenoma
 - 4) Schimmelbusch – disease

11. The usual precancerous situation in breast cancer is
 - 1) The polyposis
 - 2) The fibroadenoma
 - 3) The localized hormonal dysplasia
 - 4) The diffuse hormonal dysplasia

12. What treatment would you choose for the patient with breast cancer $T_2 N_1 M_0$
 - 1) Radical mastectomy+ adjuvant chemotherapy (scheme – CMF)
 - 2) Radical mastectomy + adnexectomy + radical irradiation + chemotherapy (scheme – FAC)
 - 3) Radical irradiation
 - 4) Adnexectomy + chemotherapy (scheme – CMF)

13. The adjuvant chemotherapy in breast cancer means
 - 1) Additional cytostatic treatment after radical operation
 - 2) Cytostatic treatment after palliative operation
 - 3) Cytostatic treatment after radiological treatment

14. The relation between male and female breast cancer is
 - 1) 1:1
 - 2) 1:10
 - 3) 1:100
 - 4) 1:200 cases

15. What group of lymphatic nodes don't belong to the regional group for breast
 - 1) Axillary lymph nodes
 - 2) Parasternal lymph nodes
 - 3) Paratracheal lymph nodes
 - 4) Rotter lymph node

16. The rate of breast cancer in Ukraine is nearly
 - 1) 10 / 100 000
 - 2) 100 / 100 000
 - 3) 60 / 100 000
 - 4) 20 / 100 000

17. What treatment would you choose for patient with breast cancer $T_1 N_0 M_1$ (MTS in lungs)
 - 1) Radical mastectomy + hormone-therapy
 - 2) Palliative mastectomy + chemotherapy
 - 3) Tumorectomy + chemotherapy + irradiation of MTS
 - 4) Simple mastectomy + lung resection

18. The lymph nodes localized lateral from the m. pectoral minor belong to the
 - 1) I level of metastasis
 - 2) II level of metastasis
 - 3) III level of metastasis

19. Is breast cancer a common localization in Africa?
- 1) Yes
 - 2) No
 - 3) In some countries
20. What treatment would you choose for the patient with breast cancer T₃ N₁ M₁ (MTS in liver)
- 1) Radical mastectomy + radical irradiation
 - 2) Palliative mastectomy + chemotherapy
 - 3) Organ-saving operation + hormone-therapy
 - 4) Radical irradiation + hormone-therapy
 - 5) Simple mastectomy + liver resection
21. What affirmation is right: “1” or “2”?
- 1) Computer – assisted digitized mammographic imaging, magnetic resonance imaging (MRI) positron emission tomography and radionuclide scanning are under intense investigation as emerging techniques for breast imaging.
 - 2) All mentioned above techniques are obligate diagnostic imaging for BC.
22. What affirmation is right: a) 1, b) 2, c) Both, d) None
- 1) The expression of nuclear estrogen and progesterone receptors plays an important role in differentiation and growth of normal breast epithelium and the response of breast cancers cells to hormone-therapy
 - 2) The response of breast cancer cells to hormone-therapy depends only on the level of estrogen and progesterone in blood serum.
23. What affirmation is right:
- a) None
 - b) Both
 - c) 1
 - d) 2
1. BRCA-1 and BRCA-2 are cellular surface markers, indicating the stage of malignancy
 2. BRCA-1 and BRCA-2 are tumor suppressor genes that play a critical role in the cellular response to DNA damage; inherited mutations in these genes are associated with increased risk of breast cancer.
- 24.
1. Microcalcification in the breast tissue is a sign of general atherosclerosis and is to take account in planning the treatment of BC
 2. Microcalcification and the soft tissue density are the major indications for biopsy in mammographic screening; the mammographic abnormality with the highest rate of malignancy is a mass density with associated calcification.

What affirmation is right: a) Both b) None of them c) “1” d) “2”

25. The pregnancies defends the organism against breast cancer development
- 1) It plays no role
 - 2) Sometimes
 - 3) Yes, it they are many of them
 - 4) Never
 - 5) The pregnancy causes the breast cancer

26. The right answer is: 1, 2 , none of them , the both.

- 1) Diagnostic methods include fine – needle aspiration cytology, needle core biopsy with US or stereotactic guidance and excisional biopsy with or without wire or tack localization
 - 2) For patients with breast symptoms or palpable abnormalities, mammography characterizes the suspicious area, evaluates the remainder of the breast for occult lesion, and assumes the contralateral breast.
27. The palliative mastectomy is to be used in breast cancer:
- 1) $T_1 N_1 M_0$
 - 2) $T_4 N_1 M_0$
 - 3) $T_2 N_1 M_0$
 - 4) $T_{is} N_0 M_0$
28. What is the most important procedure for diagnosis in breast cancer
- 1) Self-examination
 - 2) Clinical examination
 - 3) Mammography
 - 4) Morphological verification
 - 5) Ultrasound examination
29. What statement is false in breast cancer:
- 1) St I = $T_1 N_0 M_0$
 - 2) St III = $T_2 N_0 M_0$
 - 3) St III = $T_2 N_1 M_0$
 - 4) St III = $T_3 N_0 M_0$
 - 5) St IV = $T_4 N_2 M_0$
30. What affirmation is right: a) None, b) both , c) 1 , d) 2
- 1) BRCA – 1 and BRCA – 2 are cellular surface markers, indicating the stage of malignancy
 - 2) BRCA – 1 and BRCA – 2 are tumor suppressive genes that play a critical role in the cellular response to DNA damage; inherited mutations in these genes are associated with increased risk of BC
31. What treatment would you choose for patient with breast cancer $T_{is} N_0 M_0$
- 1) Quadrantectomy
 - 2) Radical mastectomy
 - 3) Radical irradiation
 - 4) Chemotherapy
 - 5) Hormone-therapy
32. What treatment would you choose for the patient with breast cancer $T_4 N_1 M_1$
- 1) Palliative mastectomy
 - 2) Organ-saving operation + radical radiation therapy
 - 3) Chemotherapy + hormone-therapy + palliative mastectomy
33. What affirmation is right: a) “1”, b) “2”, c) Both, d) None
1. ERBB2 (HER2) is a growth – signaling molecule on the surface of normal breast cells that is overexpressed in approximately 20% of BRCA, contributing to growth autonomy and genomic instability.
 2. HER2 is a modern anticancer target preparation, that is used in postmenstrual women with BCA

34. The heredity of breast cancer is determined by:
1. AFP
 2. CA – 125
 3. BRCA – 1, BRCA – 2
 4. CA – 19 – 9
35. The highest morbidity in breast cancer is:
- 1) In Germany
 - 2) In Japan
 - 3) In US
 - 4) In Ukraine
36. The usual precancerous situation in breast cancer is:
- 1) The polyposis
 - 2) The fibroadenoma
 - 3) The localized hormonal dysplasia
 - 4) The diffuse hormonal dysplasia
37. What schedules of cytostatic therapy is not used in breast cancer
- 1) CMF
 - 2) FAC
 - 3) CAV
 - 4) FEC
38. What tests are most important for indication of hormonal therapy for breast cancer?
- 1) Level of hormones (estrogen, progesterone etc.)
 - 2) TNM staging
 - 3) The age of patient
 - 4) The hormonal receptors
39. What are the BRCA – 1, BRCA – 2:
- 1) Carcinogenic genes
 - 2) Tumor-suppressor genes
 - 3) Tumorigenic viruses
 - 4) A heredity marker for breast cancer
40. In what stages of breast cancer a radical mastectomy can be used:
- 1) T_{is} N₀ M₀
 - 2) T₁ N₁ M₀
 - 3) T₂ N₂ M₀
 - 4) T₂ N₃ M₀
41. What is the most significant for the results of BC hormone-therapy:
- 1) The level of hormones (estrogen, progesterone) in blood serum.
 - 2) To presence of hormonal receptors on the malignant cells surface
42. What affirmation is right: 1 or 2
- 1) Malignant breast masses classically are node, infiltration with regular borders and unique density
 - 2) Malignant breast masses classically are non-tender and firm, with irregular borders.

43. What is right for the BCA patients?

- 1) Prognostic factors include pathologic tumor size, hormone receptors, axillary nodal status, histologic subtype, tumor grade, the age of patient.
- 2) Prognostic factors include:
 - a) ♂ or ♀
 - b) Profession
 - c) Number of pregnancies
 - d) Number of birth

44. 1) The multilocal nature of Lobular Carcinoma “in situ” (LCIS) manes margin clearance an unrealistic and unnecessary goal

- a) I agree
- b) I do not agree
- c) I agree partially

45. Risk factors for BC includes:

1. ♂ or ♀
2. Profession
3. Number of pregnancies
4. Number of birth
5. Duration of lactation
6. Trauma

What factors play significant role as risk factors?

46. The breast self-examination of healthy ladies is to perform:

1. Every two week
2. Twice a month
3. Every month
4. Once a year

47. The breast clinical medical examination is to perform in healthy female:

1. Every month
2. Once a year
3. Every two years
4. Every 6 month

48. 1) Lobular Carcinoma “in situ” (LCIS) has a propensity for multi-centric and bilaterality; it is an indicator or risk of subsequent breast Ca.

2) Ductal Carcinoma “in situ” (DCIS) almost always is first identified by mammography.

The peak incidence is between 51 and 59 years of age and it accounts for most of the increasing number of “CAIS” lesions diagnosed.

What answer is right?

- a) Both
- b) None of them
- c) 1
- d) 2

49. Prognostic factors for BC includes:

1. Pathologic tumor size
2. Hormone receptors
3. Axillary nodal status
4. Histologic subtype
5. Tumor grade

6. Age
7. Weight
8. Heredity factors

What factors are really significant?

50. What kind of treatment would you choose for the patient “tumor of the breast, cytology – suspect of cancer”:

- 1) Organ-retaining operation + chemotherapy
- 2) Biopsy of the tumor – if cancer is - Organ-retaining operation + radical irradiation
- 3) Radical irradiation + hormonal therapy

51. What is more significant for the results of BC hormonal therapy:

- 1) The level of hormones (estrogen, progesterone) in blood serum
- 2) The presence of hormonal receptors on the malignant cells surface

52. What kind of treatment would you choose for the patient with breast cancer $T_4N_1M_0$ (local destruction):

- 1) Organ-retaining operation + hormone therapy
- 2) Local irradiation of the breast + radical irradiation
- 3) Palliative mastectomy
- 4) Only chemotherapy

53. The breast medical examination is performing in healthy female:

- 1) every month
- 2) once a year
- 3) every two years
- 4) half a year

54. Male breast cancer occurs in ____ of all breast cancers (male+female):

- 1) 50%
- 2) 25%
- 3) 10%
- 4) 1%

55. The ethiological factors in breast cancer are mostly:

- 1) of chemical origin
- 2) of hormonal origin
- 3) of physical origin
- 4) of infection origin

56. The breast self examination of healthy ladies is performed:

- 1) every week
- 2) twice a month
- 3) every month
- 4) once a year