

Immunotherapy in metastatic uveal melanoma: one center experience

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Background

Metastatic uveal melanoma (mUM) is associated with a poor prognosis, with a median overall survival (OS) of 4-15 months. Therapies used in cutaneous melanoma with success have limited to inefficacy in uveal melanoma. Despite new insights into the genetic and molecular background of mUM, satisfactory systemic treatment approaches are currently lacking. Limited data exists regarding the efficacy of anti-CTLA4 and anti-PD-1 in this disease.

Material and methods

From 2018 till 2019 21 mUM patients received check point inhibitors as second line therapy and 2 mUM patients received it as first line. among 10 mUM patients received anti-CTLA4 therapy ipi (ipilimumab), 5 were men and 5 were women.

Anti PD-1 monoclonal antibody therapy was given to 13 patients with metastatic UM. 46 % of men (n = 6), 54 % of women (n = 7).

Results

In Ipi group only 1 (10%) patient has disease stabilization for more than 36 months. In the remaining 9 (90%) patients, disease progression was revealed. The median time to progression was 3 months (95% CI 2–5 months). The OS expectancy was 9 months (95% CI 5–14 months). Partial and complete responses to treatment were not registered in patients; stabilization of the disease was achieved in 2 (15%) patients. The PFS was 4 months (95% CI 2–7 months). The OS expectancy since diagnosis was 54 months (95% CI 25–84 months). The OS expectancy from initiation of immunotherapy was 38 months (95% CI 18–62 months). All patients received no any G3/4 AEs

Conclusions

In this single center experience, no patients had tumor response to anti-CTLA4 and anti-PD-1 therapy. We report the clinical outcome and toxicity associated with monotherapy anti-CTLA4 and anti-PD1 treatment approach. The study results of innovative treatment strategies are urgently needed.