

SURVIVAL OF MELANOMA IN POSSESSION OF INNOVATIVE THERAPIES, A SINGLE INSTITUTE RETROSPECTIVE STUDY

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Introduction:

The treatment of metastatic malignant melanoma has dramatically changed in recent years due to the introduction of targeted and immunotherapy. In this retrospective study we report the survival results of first line therapies at the Department of Dermatology of the National Institute of Oncology (Budapest).

Material and Methods :

A group of 150 patients with unresectable or metastatic malignant melanoma receiving first line therapy were selected between January 1, 2016 and December 14, 2017. The median follow-up period was 12,0 (0,0-36,9) months. The female/male ratio was 70/80 with the average age of 63 years (26-89). Cerebral metastases were present in 58 patients (39%) at the beginning of the treatment. 78 tumors (52%) showed BRAF positivity. The patients' ECOG status were 0-2.

The first line therapy was indicated by a multidisciplinary oncology team according to BRAF and ECOG status, staging of disease and co-morbidities.

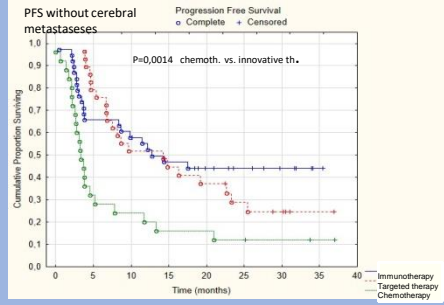
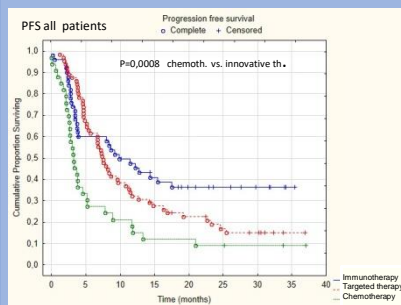
The primary tumour was cutaneous in 110 patients out of the 150 (74%), mucosal in 5 cases (3%), ocular in 14 cases (9%) and in 21 cases (14%) metastatic melanoma of an unknown primary origin was found.

In the first line of treatment 50 patients (33%) received immunotherapy (anti PD1), 66 patients (44%) targeted therapy (BRAF+MEK inhibition), 34 patients (23%) systemic, or regional chemotherapy.

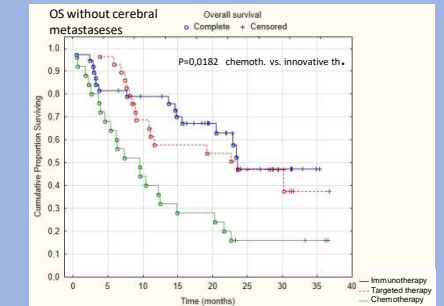
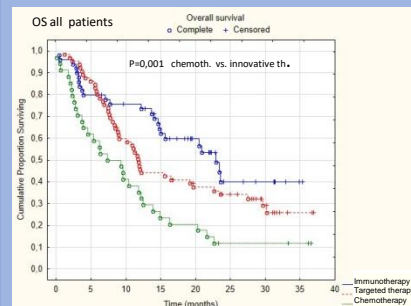
Results:

The median progression free survival (PFS) was 9,6 months (0,2-35,4) in the immunotherapy group, 7,0 months (0,9-36,9) in the case of targeted therapy, and 2,3 months (0,0-36,9) in the chemotherapy group. The PFS was 7,2 months (0,0-36,9) in the whole study population.

In patients without cerebral metastases the median PFS was 12,5 months (0,4-35,4) with use of immunotherapy, 14,0 months (3,8-36,9) with targeted therapy and 3 months (0-36,9) with chemotherapy. The median PFS of all patients without cerebral metastases was 9 months (0-36,9) at the beginning of the therapy.



The median overall survival (OS) was 16,8 months (0,4-35,3) in the immunotherapy group, 11,8 months (1,2-36,9) in the targeted therapy group and 8,3 months (0,0-36,9) in the chemotherapy group. The OS of all the 150 patients was 12,2 months (0,0-36,9). The median OS of patients without cerebral metastases were 19 months (0,4-35,4) in the immunotherapy group, 23 months (3,8-36,9) in targeted therapy group, and 9,5 months (0,5-36,9) in the chemotherapy group. The overall OS of patients without cerebral metastases were 16 months (0,4-36,9).



The one-year overall survival rate was 70 % in the immunotherapy group, 42% in the targeted therapy group and 30% in the chemotherapy group. The one year survival of the whole patient group was 50%.

Conclusions:

Patients who received innovative therapies showed significantly better PFS and OS compared to the chemotherapy group ($p=0,0013$). Although 39% of patients had cerebral metastasis at the beginning of treatment and 9% of patients had ocular melanoma causing a therapeutic challenge, the median PFS was still 7,2 months and the median OS was 12,2 months, which shows an important progress in the treatment of melanoma patients, in this heterogeneous real life patients analysis.