

Background

- Acral (AM) and mucosal melanomas (MM) are rare melanoma subtypes with studies suggesting lower response rates to anti-PD1 therapy and poorer outcomes in those with advanced disease^{1,2}.
- There is limited data on the efficacy of adjuvant therapy in AM and MM.
- Based on this we hypothesise that adjuvant anti-PD1 based therapy may be less efficacious in melanoma of mucosal or acral origin.

Objectives

- Determine risk of recurrence of resected AM and MM following adjuvant anti-PD-1
- Quantify the effect of adjuvant anti-PD-1 in AM and MM compared to a historical matched cohort.

Methods

- Retrospective identification of resected stage III or IV melanoma of AM and MM who had received at least one dose of adjuvant anti-PD1
- Data collected from 20 sites across 10 countries
- Historical matched control from Melanoma Institute of Australia database

Results

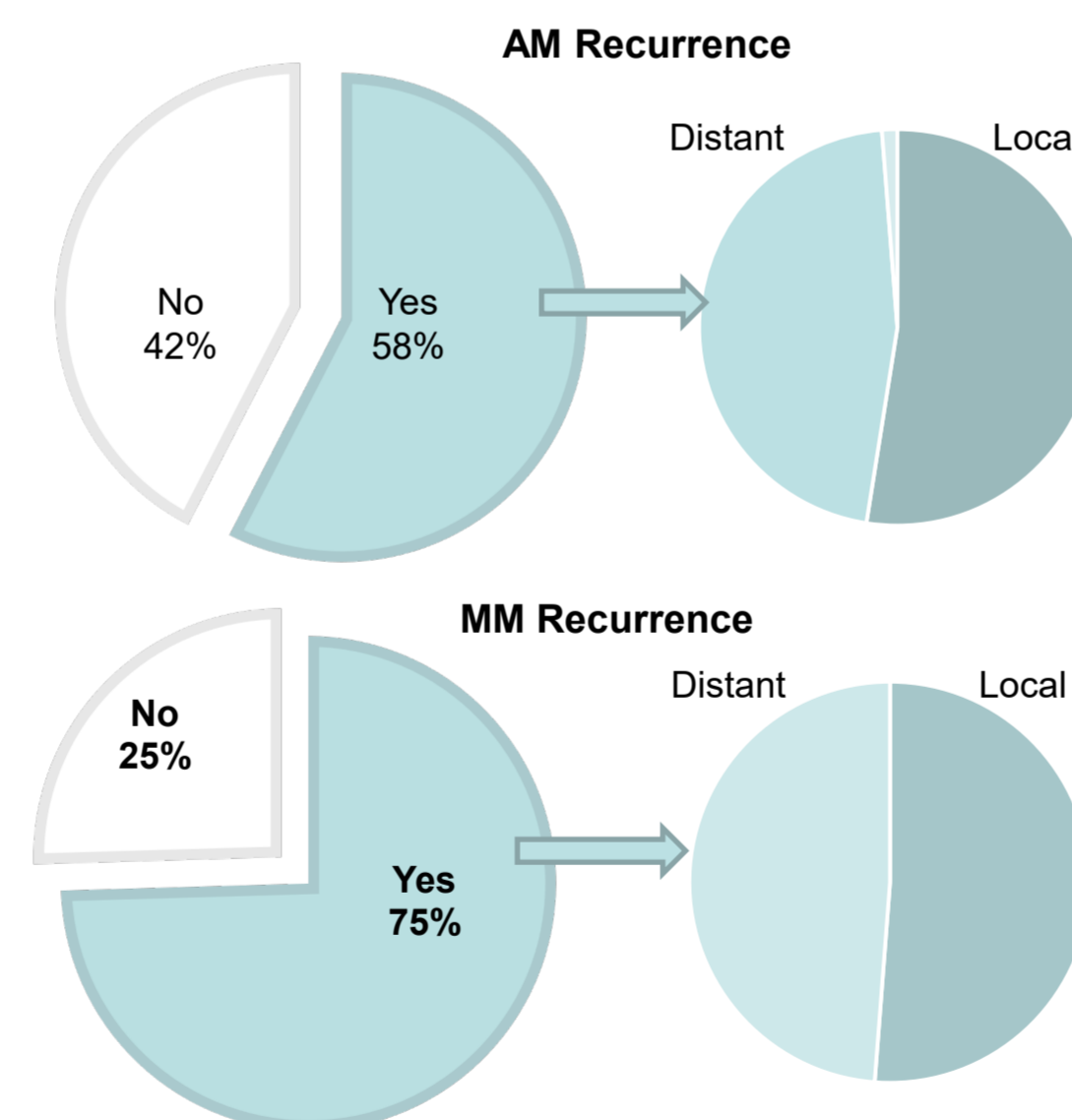
Characteristics	Acral Melanoma (N = 139)	Mucosal Melanoma (N = 55)
Gender		
Male	69 (49.6%)	14 (25.5%)
Female	70 (50.4%)	41 (74.5%)
Age at diagnosis		
Median (IQR)	65 (56.00 , 71.00)	61 (52.00 , 69.00)
Ethnicity		
Caucasian	94 (68%)	36 (65%)
East Asian	19 (14%)	10 (18%)
Southeast Asian	3 (2%)	1 (2%)
Polynesian	1 (1%)	1 (2%)
Hispanic	8 (6%)	1 (2%)
Black	4 (3%)	1 (2%)
Unknown	10 (7%)	5 (9%)
Stage at commencing treatment*		
IIIA	9 (6.5%)	6 (11%)
IIIB	36 (25.9%)	1 (2%)
IIIC	81 (58.3%)	6 (11%)
IIID	12 (8.6%)	38 (70%)
Resected IV	1 (0.7%)	-
Site of melanoma		
Palmar	3 (2.2%)	Urogenital 27 (49.1%)
Plantar	97 (69.8%)	Anorectal 12 (21.8%)
Subungual (fingers)	18 (12.9%)	Naso-oral 16 (29.1%)
Subungual (toes)	20 (14.4%)	-
Unknown	1 (0.7%)	-
Breslow thickness (mm)		
Median (IQR)	4.05(2.30 , 6.70)	6.00(4.20 , 11.00)
Mitoses		
Median (IQR)	4.00(1.00 , 8.00)	13.50(6.00 , 20.00)
Ulceration		
No	46 (33.1%)	14 (25.5%)
Yes	84 (60.4%)	33 (60.0%)
Unknown	9 (6.5%)	8 (14.5%)

*Staging, including for MM as per AJCC 8th edition cutaneous melanoma staging

NOTE: Data and results vary from published abstract based on increased numbers and further analysis

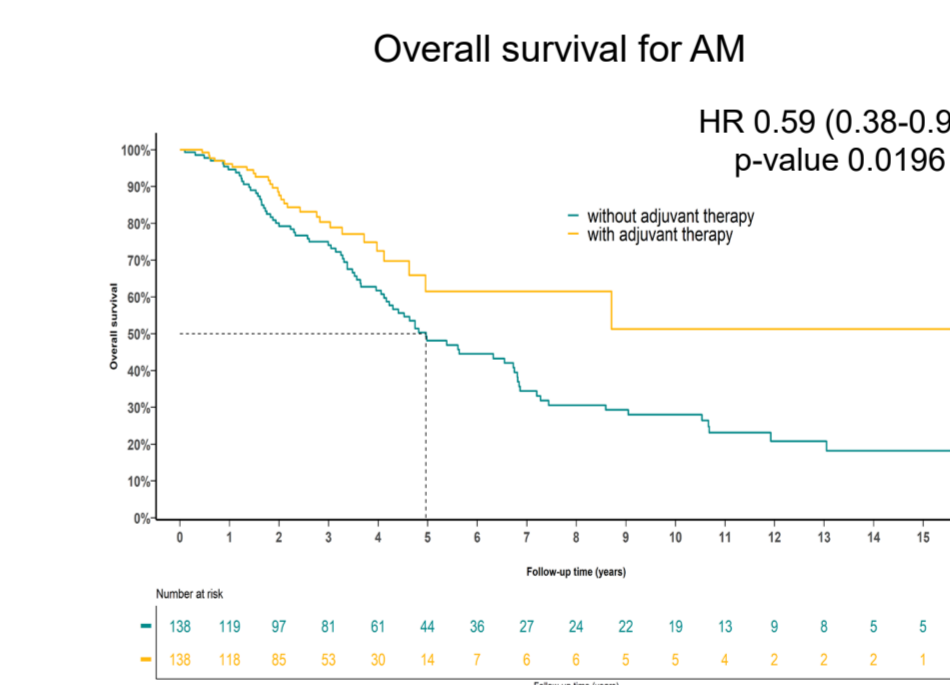
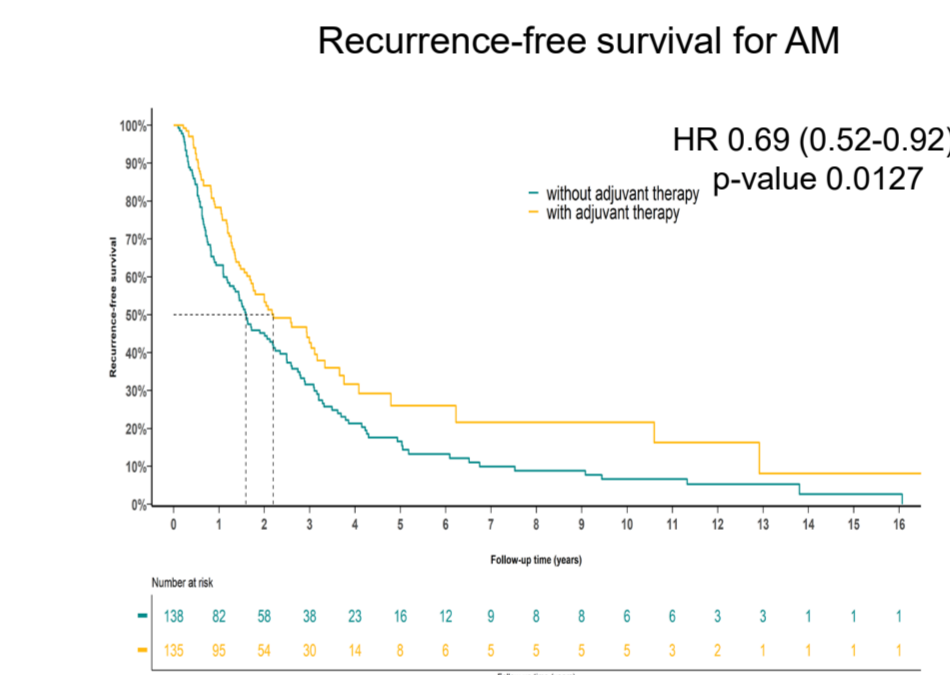
Results

Progress on Adjuvant	Acral Melanoma	Mucosal Melanoma
Median follow up (months)	29.4	21
Length of time on adjuvant (months)		
Mean (SD)	8.1 (4.7)	5.4 (3.7)
Median (range)	9.1 (0.0-32.3)	4.9 (0.0, 12.5)
Missing	18	3
Reason for stopping adjuvant		
Completed rx	45 (32%)	9 (16%)
Recurrence	51 (37%)	30 (55%)
Toxicity	24 (17%)	11 (20%)
Other	6 (5%)	4 (7%)
Unknown	13 (9%)	1 (2%)
Toxicity of adjuvant drug		
No	65 (47%)	27 (49%)
Yes	72 (52%)	26 (47%)
Unknown	1 (1%)	2 (4%)
Worst toxicity grade		
1	24 (32%)	6 (23%)
2	22 (30%)	8 (31%)
3	21 (28%)	10 (38%)
4	6 (8%)	1 (4%)
Unknown	1 (1%)	1 (4%)
Recurrence		
No	59/139 (42.4%)	14/55 (25.5%)
Yes	80/139 (57.6%)	41/55 (74.5%)
Status at last follow-up		
Alive	108/138 (78.3%)	37/55 (67.3%)
Dead	27/138 (19.6%)	18/55 (32.7%)
Lost to follow-up	3/138 (2.2%)	0



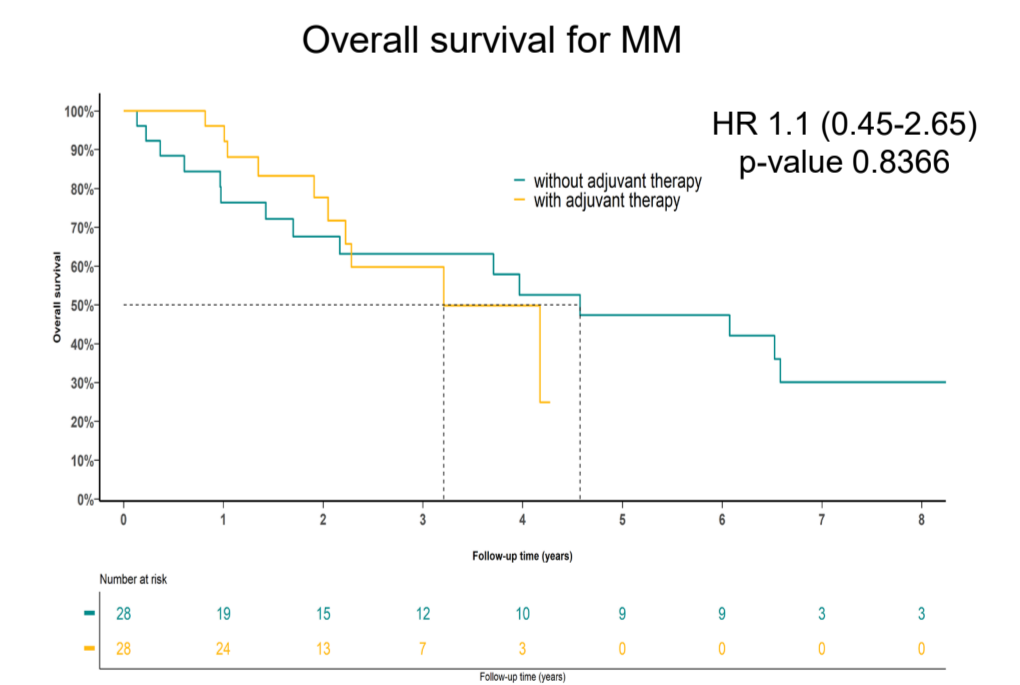
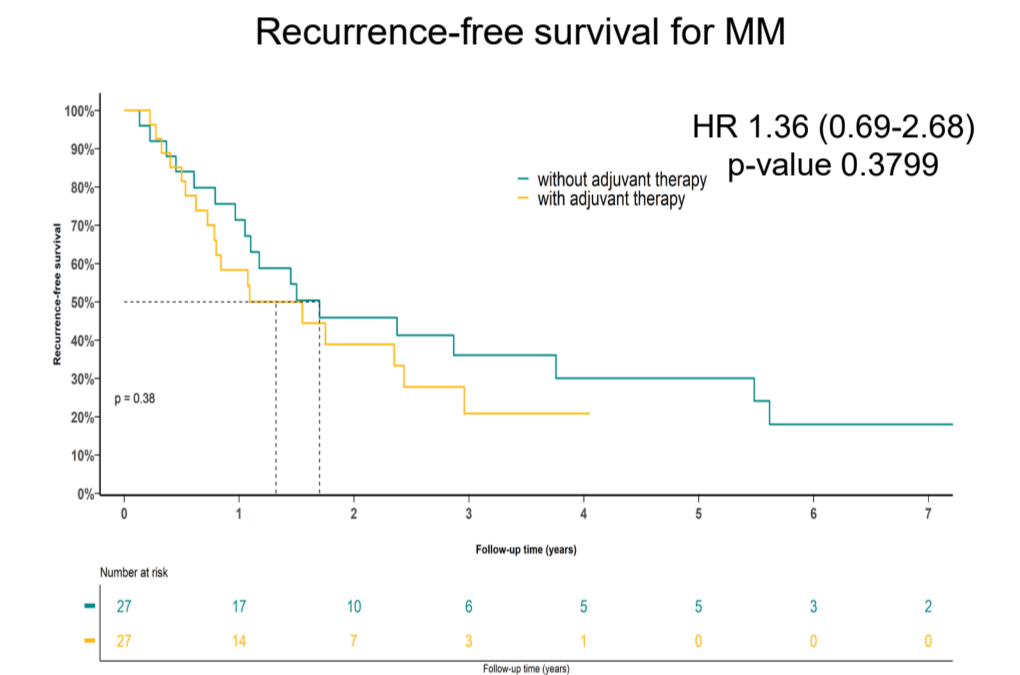
Results: Historical Matching

	With adjuvant	Without adjuvant (matched)#
Acral Melanoma		
N	138	138
% IIIC/D	67.4	54.3
Median RFS (months)	17.7 (7.3-38.4)	17.7 (9.9-35.2)
1yr landmark RFS % (95% CI)	78 (72-86)	63 (55-72)
3yr landmark RFS % (95% CI)	43 (34-53)	32 (24-41)
Median DMFS (months)	35.95 (17.8-60.5)	27.85 (16.2-40.9)
3yr landmark DMFS % (95% CI)	78 (70-87)	67 (59-76)



#AM matched for age, gender, stage
 MM matched for age, gender

	With adjuvant	Without adjuvant (matched)#
Mucosal Melanoma		
N	55	28
% IIIC/D	-	-
Median RFS (months)	12.9 (6.7-28.2)	17.4 (7-34.5)
1yr landmark RFS % (95% CI)	58 (42-81)	71 (56-92)
3yr landmark RFS % (95% CI)	21 (8-51)	36 (21-63)
Median DMFS (months)	17 (13.5-37.8)	12.9 (3.2-33.75)
3yr landmark DMFS % (95% CI)	85 (72-100)	65 (48-88)



Conclusions

- After adjuvant PD1 both AM and MM have a high risk of recurrence
- Our data suggests that there is a benefit to using adjuvant anti-PD-1 therapy in resected acral melanoma
- There is no clear benefit of adjuvant anti-PD-1 in resected mucosal melanoma. The MM numbers in our cohort are small but these findings are consistent with signals in recently published phase II data³.

References

- Dimitriou, F., et al. "1049P Clinical models to predict response in mucosal melanoma (MM) patients (pts) treated with anti-PD-1 (PD1) or combined with ipilimumab (PD1+IPI)." Annals of Oncology 32: S877-S878.
- Bhave, P., et al. "1047P Efficacy of checkpoint inhibitors (CPIs) in acral melanoma (AM)." Annals of Oncology 32: S876-S877.
- Lian B, et al., *Toripalimab (anti-PD-1) versus High-Dose Interferon-α2b as Adjuvant Therapy in Resected Mucosal Melanoma: A Phase II Randomized Trial* Annals of Oncology (2022).

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