Background

Melanoma

In South Africa, melanoma is the eighth most common cancer in men, with a lifetime risk of one in 112 men; in women, in cancer, in women, the risk is in the ninth most common cancer, with a lifetime risk of one in 115 women. 

According to the South African National Cancer Registry (2011), whites are at higher risk; melanoma is the third most common cancer in whites. 

Survival for stage IV disease, in particular, is poor with median overall survival ranging from 6 to approximately 12 months. 

Due to the limited data reported on the use of ipilimumab in metastatic malignant melanoma in developing countries, this current retrospective study was conducted to evaluate the long-term outcomes of patients administered within the SA-EAP in treatment-naive advanced melanoma patients.

Inclusion Criteria:

- Histologically confirmed stage III (melanoma-in-transit) or stage IV (metastatic) cutaneous, ocular or mucosal melanoma
- Patient unable to tolerate immunotherapies
- Aged ≥18 years of age
- Failure or intolerance to at least 1 prior systemic treatment
- Aged ≥18 years of age
- In 2015, a retrospective, multi-center, non-interventional analysis was performed on data collected from the South-African Expanded Access Program (SA-EAP), with last follow-up date (or death) in December 2014.

The current study extends this analysis by follow-up on the long-term survival of pre-treated metastatic patients up to September 2016.

There were 108 patients, 84 (78%) had cutaneous melanoma and 24 patients (22%) had non-cutaneous melanoma,

In the group of cutaneous melanoma patients, the 4- and 5-year survival was 17% (95% CI 9% - 25%) while in the non-cutaneous group the 4- and 5-year survival was 6% (95% CI 0% - 16%). 

Corresponding author:

Bernardo L. Rapoport, Daniel A. Vorobiof, Lydия M. Dreosti, Adam Nosworthy, Georgina McAdam, Johan P. Jordaan, Helen Miller-Jansön, Margreet de Necker, Janine de Beer

The Medical Oncology Centre of Rosebank, Johannesburg, Sandton Oncology Centre, Johannesburg, Department of Medical Oncology, University of Pretoria, Pretoria, Wits Oncology Donald Gordon Medical Centre, Johannesburg, GVI Rondebosch Oncology Medical Centre, Cape Town, Westridge Oncology Centre, KwaZulu-Natal, TCD Tumour Diagnostics Research, Pretoria

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