### Cases- sequencing of immune and targeted therapy

Prof Grant McArthur

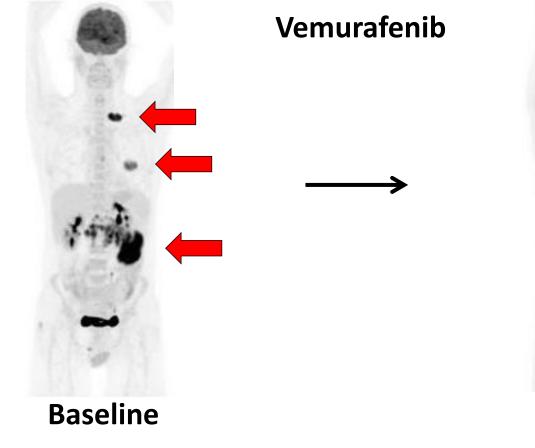
Peter MacCallum Cancer Centre

University of Melbourne

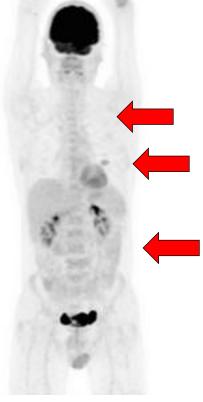


- **2002** 43 yo male 0.67mm thick melanoma with regression on his back (<1 mitoses/mm2, no ulc)
- WT BRAF
- **2010** 0.6mm thick melanoma with regression on his back (0 mitoses/mm2, no ulc)
- BRAF V600E
- 2012 nausea diagnosed with gastric metastases from melanoma
- BRAF V600E

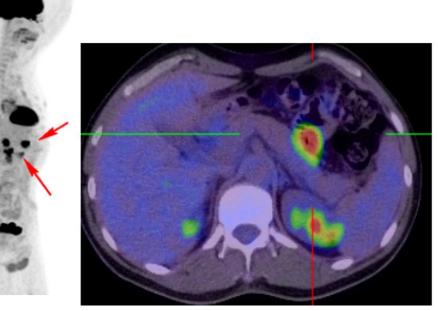








Day 15



### Isolated recurrence in jejenumSwitch to immunotherapy?Surgery?

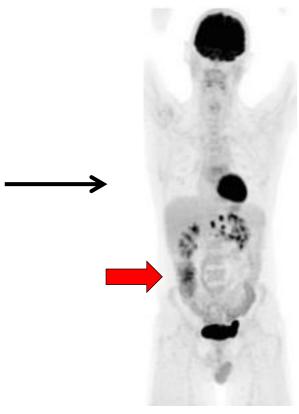


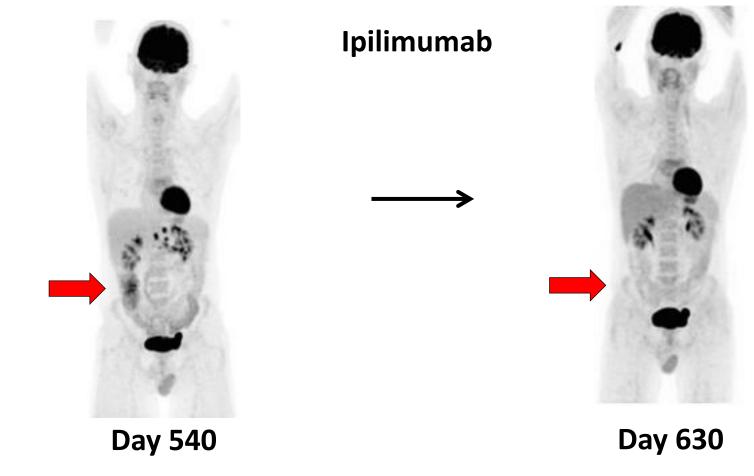
#### Surgery + Vemurafenib continued



#### Day 540





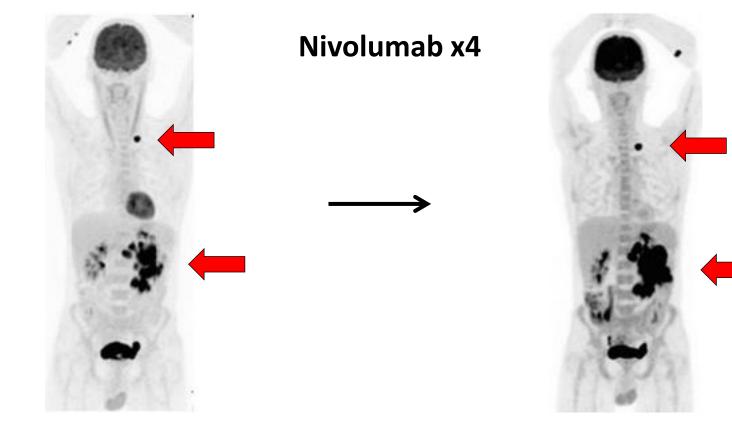






#### Options????

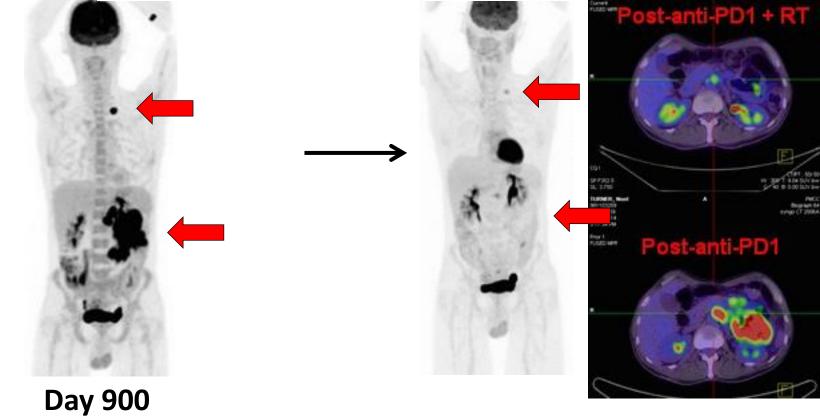








**Radiotherapy & continue nivolumab** 





## Immunotherapy after targeted therapy **Continuing nivolumab**

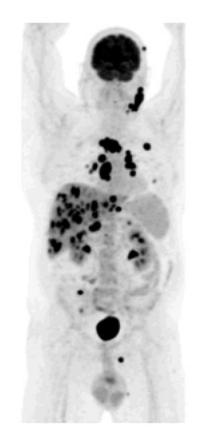


7 Dec 2015



- 2013 61yo male 12mm thick melanoma on his cheek (6 mitoses/mm2, ulc)
- WT BRAF Q61R NRAS
- Sentinel lymph node pos 1LN 8mm deposit
- Completion lymphadenectomy 0/37 Stage 3B
- Imaging Surveillance



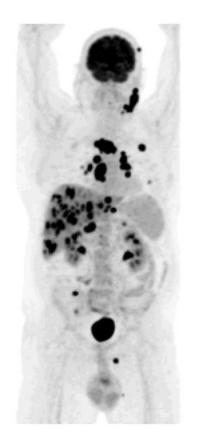


#### **5 months post lymphadenectomy**

Metastases-

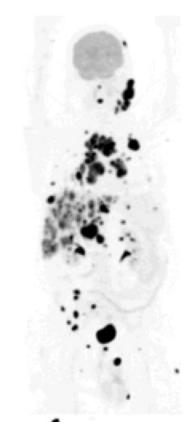
- soft tissue
- bone
- lymph nodes
- lung
- liver



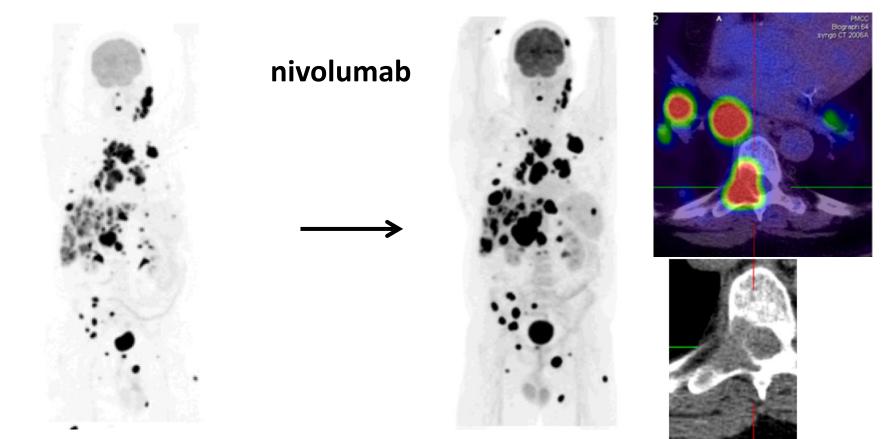


#### Ipilimumab



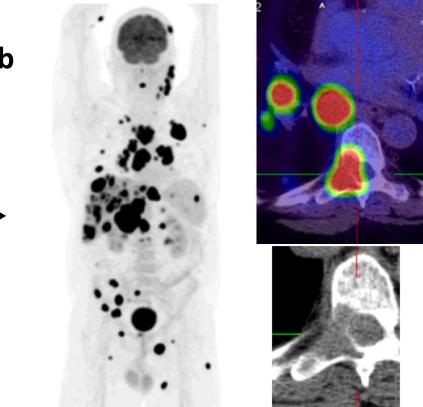












nivolumab

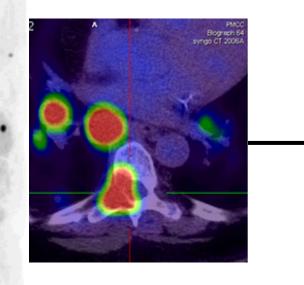
Progression at multiple sites / impending cord compression

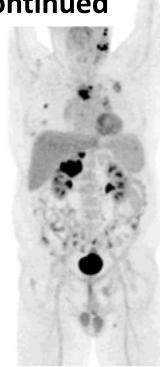
- Radiotherapy?
  - Surgery?
- Followed by clinical trial? (NRAS)
- Followed by continuation of nivolumab?





**Radiotherapy & Nivolumab continued** 









#### **Nivolumab continued**

