

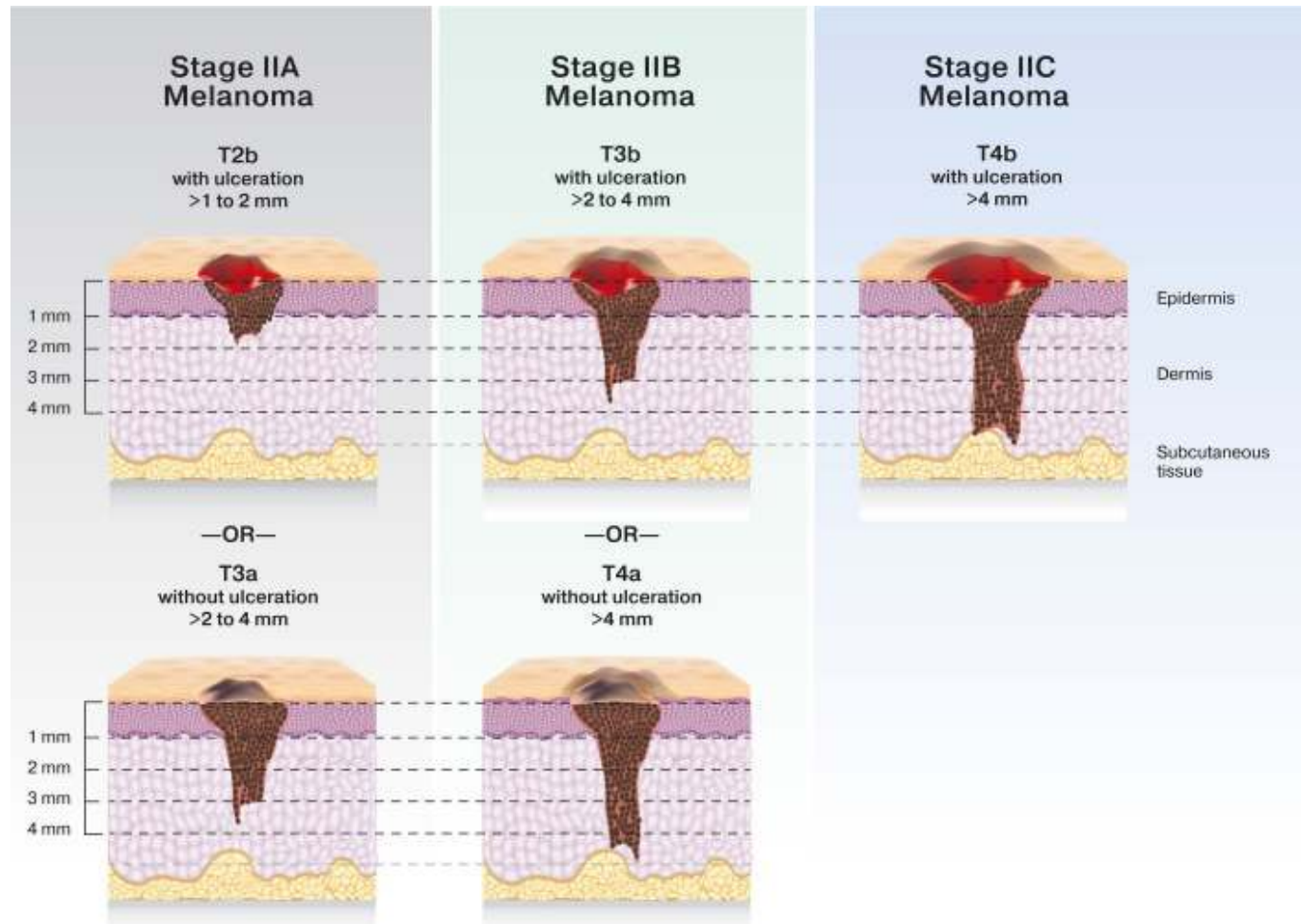
Adjuvant Therapy for Stage II Melanoma: Yes

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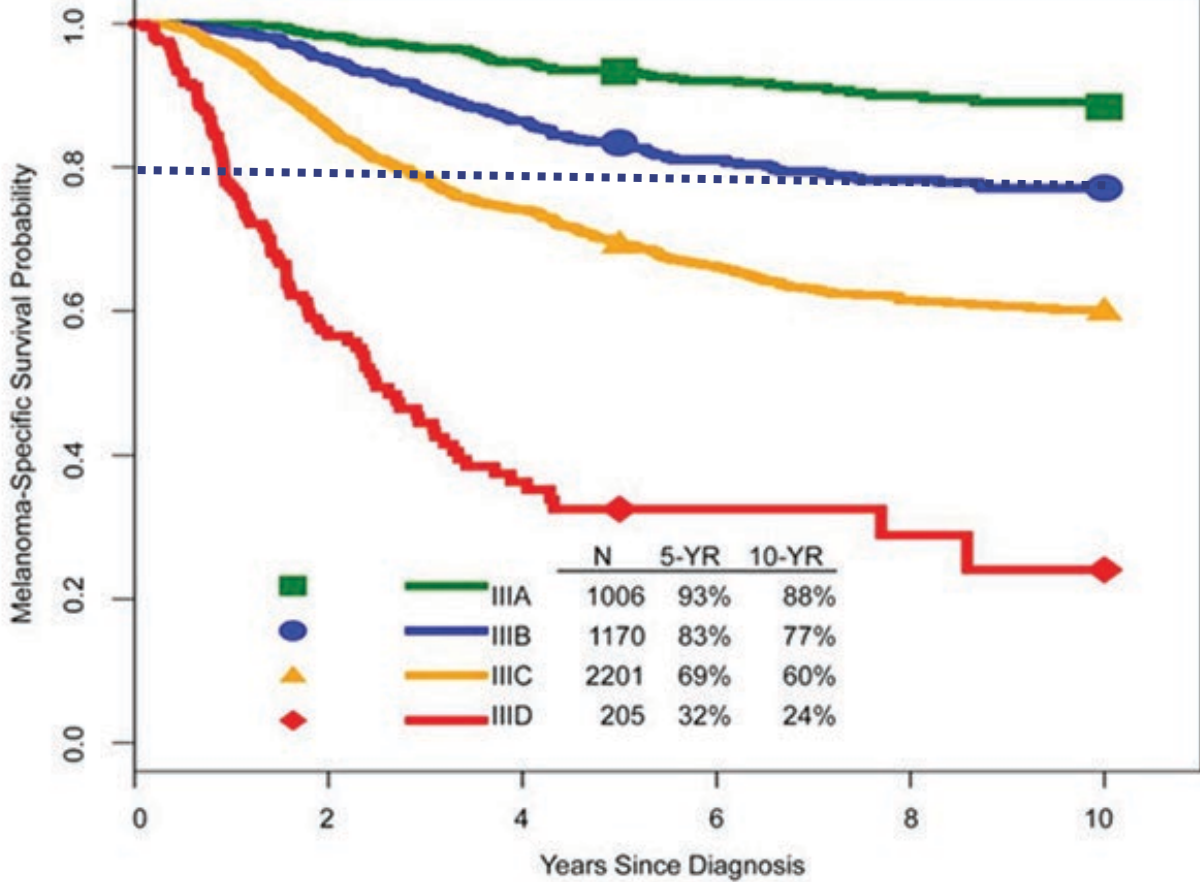
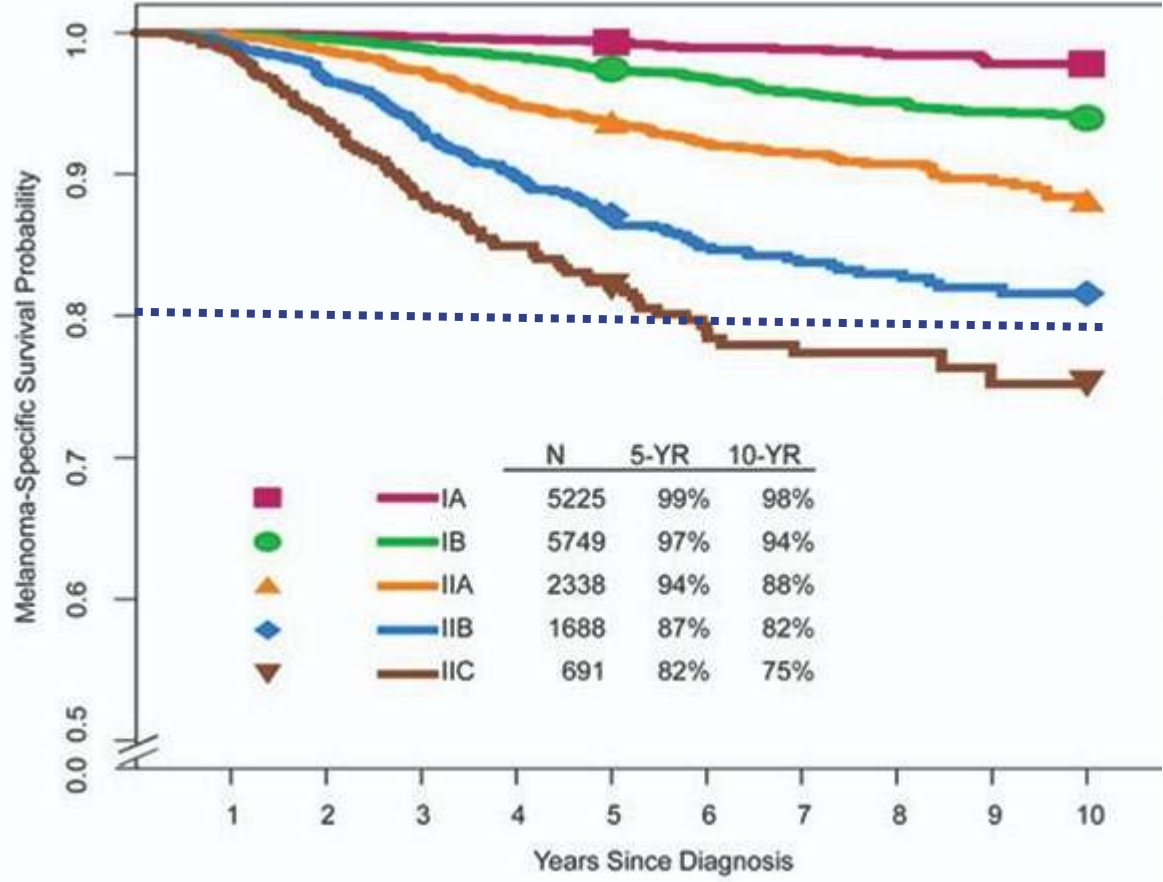
Adjuvant Therapy

- In high risk stage II patients adjuvant therapy can be beneficial.
- Adjuvant therapy should not be used for all stage II patients as the risk of recurrence is much lower in some stage II patients than potential for toxicity of approved therapeutics.

Stage II Melanoma



Survival Curves



Recurrence

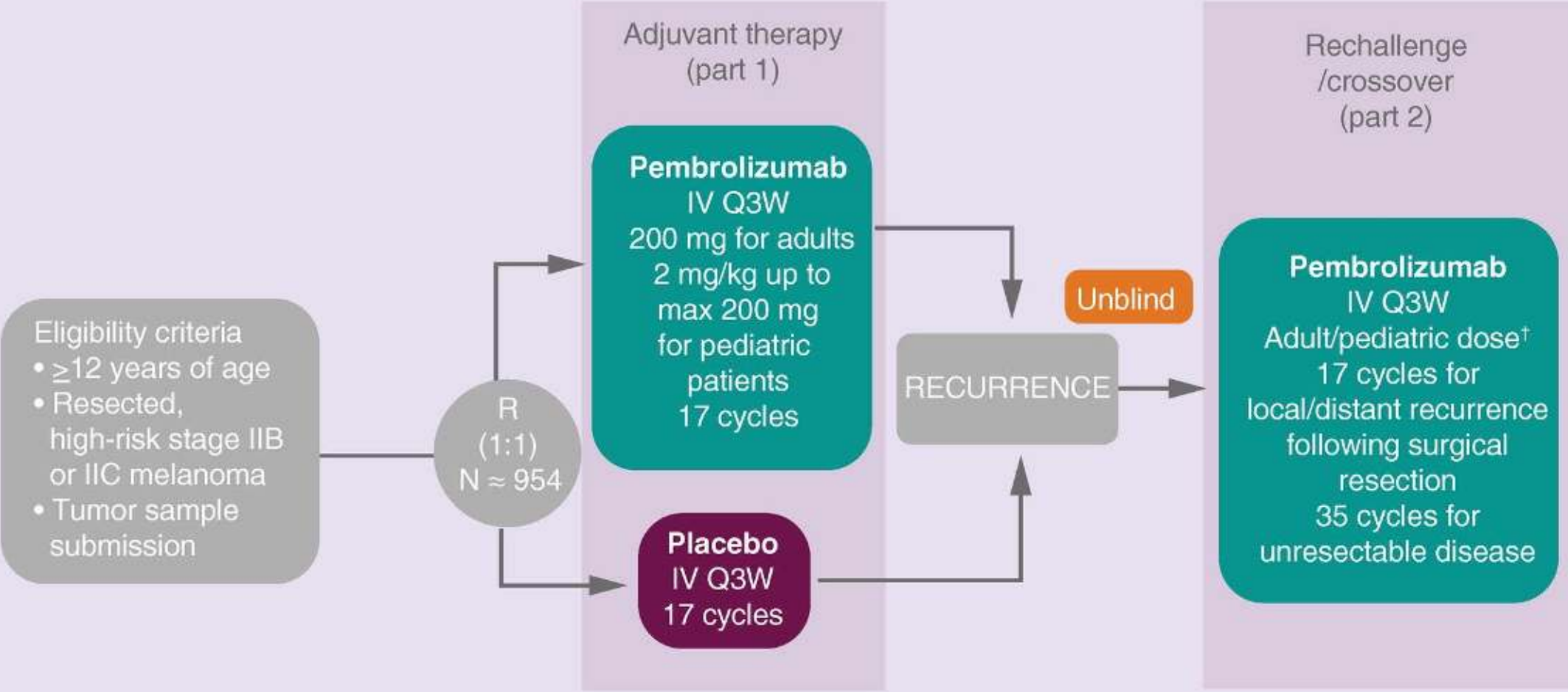
Stage IIB

- Local Recurrence
 - 19%
- Regional Recurrence
 - 45%
- Distant Recurrence
 - 44%

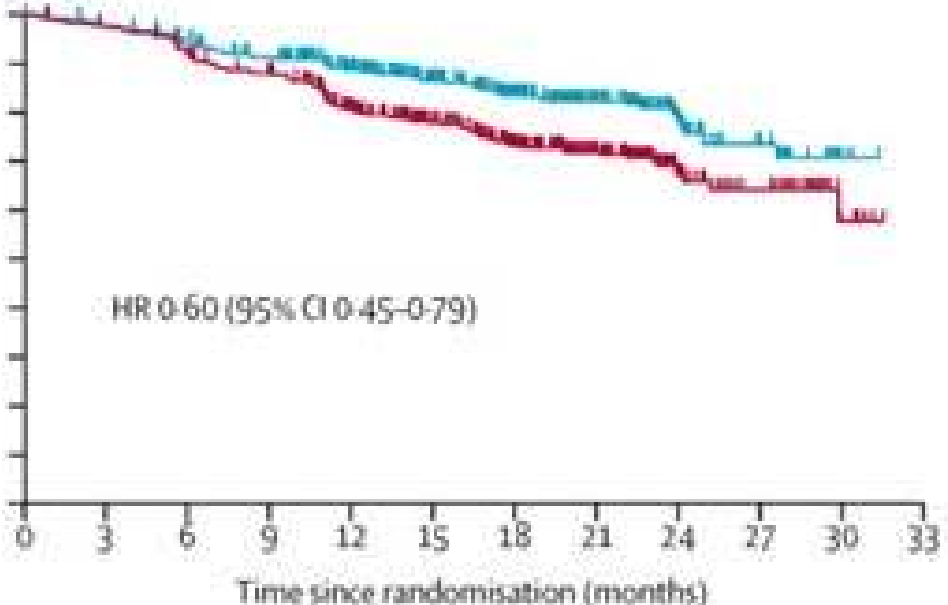
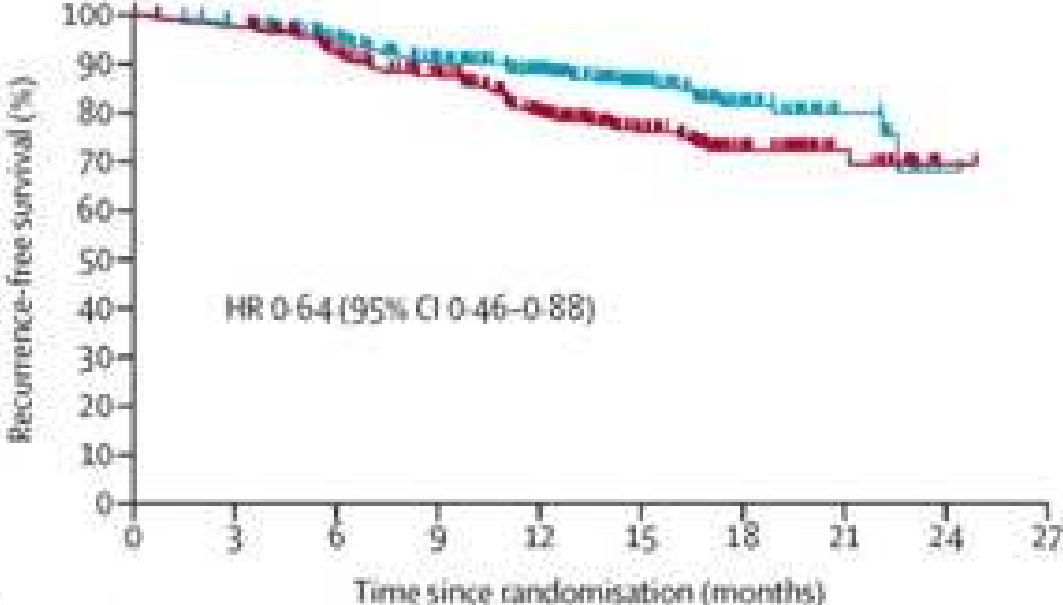
Stage IIC

- Local Recurrence
 - 11%
- Regional Recurrence
 - 58%
- Distant Recurrence
 - 39%

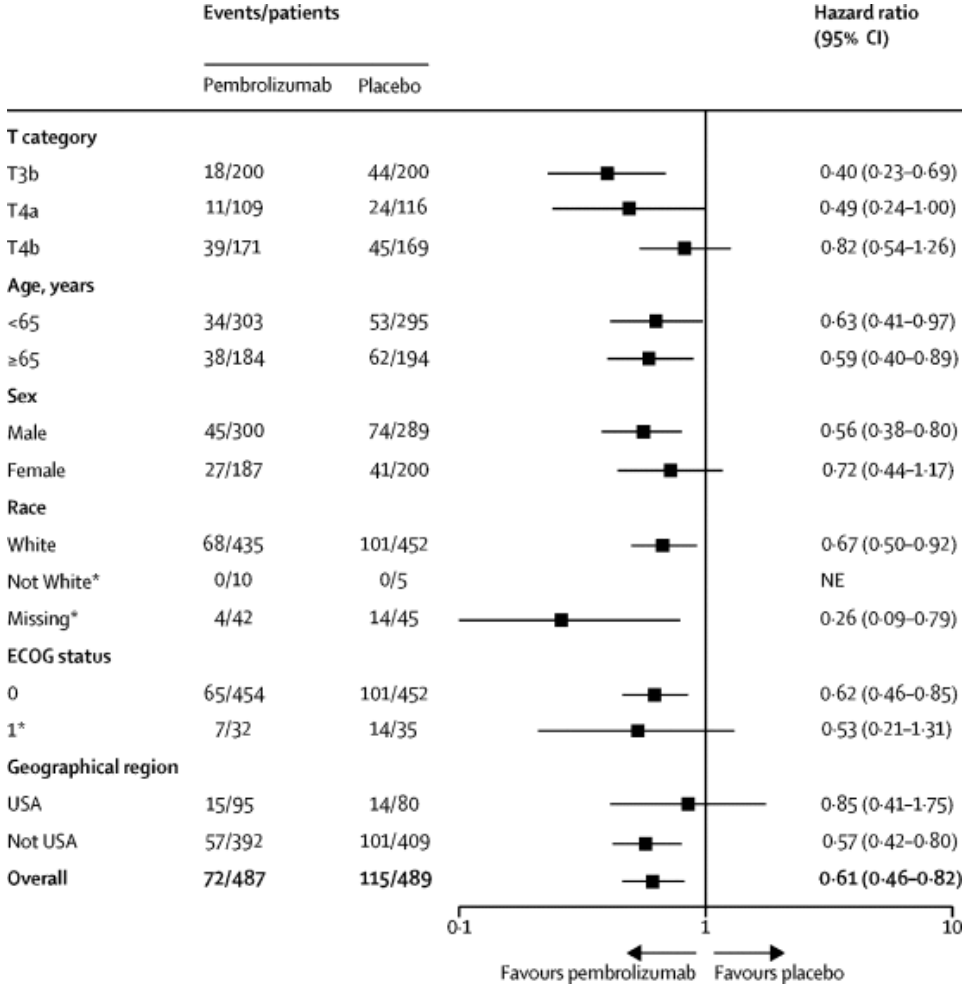
Keynote-716



Keynote-716



Keynote-716



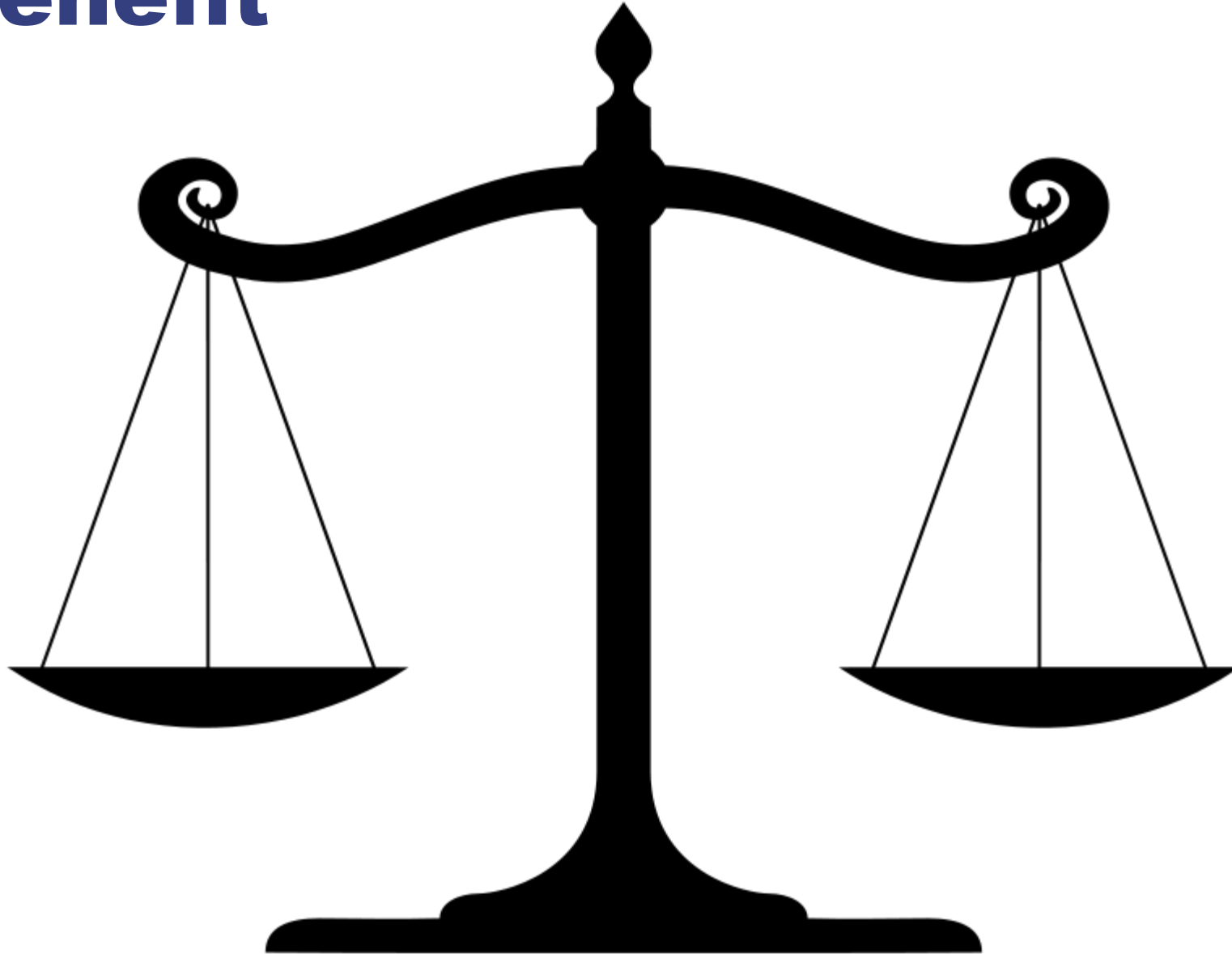
Patterns of Disease Recurrence

	Pembrolizumab group (n=487)	Placebo group (n=489)
Patients with an event	72 (15%)	115 (24%)
Local, regional, or locoregional	38 (8%)	50 (10%)
Distant recurrence	31 (6%)	60 (12%)
Death	3 (1%)	5 (1%)

Why not do adjuvant therapy?

- Toxicity
 - Similar toxicity profile as previously known
- More data needed
 - Limited followup
 - Overall survival

Risk/Benefit



Risk/Benefit



Recurrence/Death

Toxicity

Waiting for additional data

Adjuvant therapy is a good option in selected stage II melanoma patients.