



No Overall Survival Difference in the Immunotherapy Era for Rare Subtypes of Melanoma

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We read with interest the article by Uprety et al. on the melanoma survival between contemporary periods depending on the approval time of immunotherapy [1]. I want to congratulate the authors for this fruitful article and make some contributions.

In the study, it has been indicated that the immunotherapy era was significantly added benefits to overall survival (OS) for melanoma patients; however, the rare sites of melanoma should be included in these two contemporary groups. Unluckily, the patients with these relatively rare melanoma subtypes (acral lentiginous, uveal, and mucosal melanomas) which typically do not respond to the emerging immunotherapy that has been approved for the more common type of melanoma, and thus have worse overall survival rates [2] and attempting to reach enduring safe and effective responses in these high-risk subtypes of melanoma is one of the field's main challenges [3].

We searched for the distant rare subtypes of melanoma (Stage - 6th edition. Derived AJCC M, 6th ed (2004-2015) from Epidemiology, and End Results (SEER) Program (www.seer.cancer.gov) SEER*Stat Database 3.8.9 version: Incidence - SEER Research Data, 18 Registries, Nov 2019 Sub (2000-2017), and follow-up. We revealed that there was no significant difference in survival between immunotherapy and non-immunotherapy era $p = 0.31$. **Figure 1** Our findings give more attention to the clinician in practice with the rare melanoma subtypes in the era of immunotherapy.

We strongly highlight effective clinical and preclinical studies toward these rare subtypes of melanoma, including the combination of immunotherapy and anti-vascular agents (NCT03955354, NCT03991975, NCT03602547), new immune checkpoint inhibitors (NCT02071940 with an anti-CSF1) and cell-based approaches (NCT01983748) [3, 4].

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AUTHOR CONTRIBUTIONS

These authors have contributed equally to this work and share the first authorship.

CONFLICT OF INTEREST

The authors declare that the research was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.

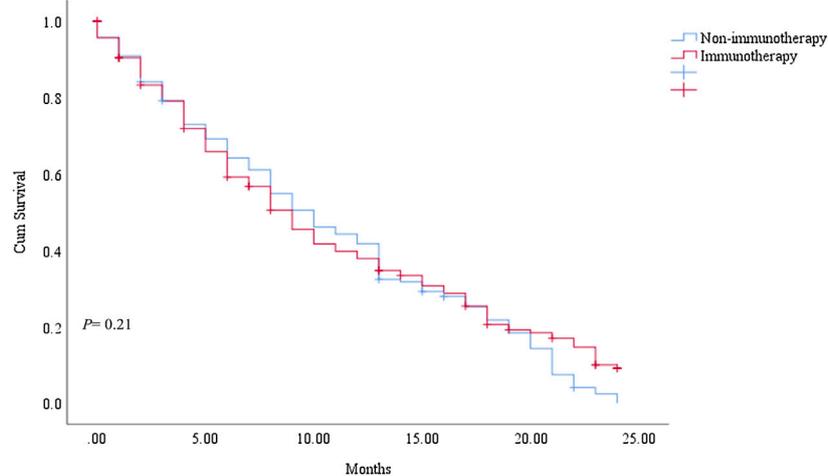


FIGURE 1 | Kaplan Meier–OS difference between rare subtypes of melanoma ($p = 0.31$). 1- Immunotherapy era. 2- non-immunotherapy era.

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