



IMMUNOTHERAPY IN METASTATIC MELANOMA: A MIRACLE OR POISON

H. ATTJIOUI¹, A. CHEIKH², M.A. EL WARTITI³, Z. ALIAT¹, J. BENNANI¹, A. BENOMAR¹, H. MEFETAH⁴, M. BOUATIA⁵.

¹MOHAMMED V UNIVERSITY-FACULTY OF MEDICINE AND PHARMACY OF RABAT, CHIS, RABAT, MOROCCO.

²ABULCASIS UNIVERSITY OF HEALTH SCIENCES, PHARMACY -CHEIKH ZAID HOSPITAL, RABAT, MOROCCO.

³MOHAMMED V UNIVERSITY-FACULTY OF MEDICINE AND PHARMACY OF RABAT, HOPITAL MILITAIRE

D'INSTRUCTION MOHAMED V, RABAT, MOROCCO.

⁴PEDIATRICS HOSPITAL, PHARMACY, RABAT, MOROCCO.

⁵MOHAMMED V UNIVERSITY-FACULTY OF MEDICINE AND PHARMACY OF RABAT, PHARMACY - PEDIATRICS HOSPITAL, RABAT, MOROCCO.



❖ Background

Attjioui.houda@gmail.com

- Very significant therapeutic advances have been made by immunotherapy in the treatment of metastatic melanoma.
- The use of monoclonal antibodies, particularly pembrolizumab, has shown encouraging results in terms of efficacy and survival in cancer patients, but some patients develop adverse reactions that can sometimes be fatal, their management may require temporary or permanent interruption of treatment.

Purpose : We report a case of a patient who had immunologically caused adverse reactions to Pembrolizumab in metastatic melanoma

❖ Materiels and methods

This is a 59-year-old patient managed for lower limb melanoma in advanced locoregional evolutionary pursuit classified as T3b N3 M0. The absence of a BRAF mutation led to the introduction of immunotherapy with the anti-PD1 antigen Pembrolizumab. Two weeks after the second injection, an initial and transient increase in tumor size with the appearance of new small lesions, associated with intense fatigue, taste alteration with loss of appetite and constipation. After the third injection, a false progression of the tumor was noticed, requiring discontinuation of treatment, The patient was hospitalized for undernutrition with sudden weight loss, asthenia and general deterioration. Biological examinations revealed anemia with severe undernutrition. Fatigue and altered condition did not allow the patient to undergo scheduled chemotherapy. The patient died within 3 months.

The accountability study was carried out in accordance with the French method.



❖ Results

The analysis of the cause-and-effect relation for this case was based on the chronological and semiological criteria of intrinsic imputability and also extrinsic imputability proposed in the French method of imputability. We found the following elements .

- Pembrolizumab was incriminated with an I5 (C3S2) intrinsic imputability score, and the extrinsic imputability is a B4 score (classical) .

Time to appearance of event	Highly suggestive			Compatibility			Incompatibility
	C3	C2	C1	C3	C2	C1	
Evolution when drug is curtailed							
Suggestive	C3	C3	C1	C3	C2	C1	C0
Inconclusive	C3	C2	C1	C3	C1	C1	C0
Non-suggestive		C1	C1	C1	C1	C1	C0
		C1					
	+	0	-	+	0	-	0

Semiology (clinical or para-clinical) : Other explanation not attributable to drug	Evocative of role of drug (and / or highly suggestive factor)			Other semiologic possibilities			
	S3	S3	S1	S3	S2	S1	
Absent (after appropriate work-up)	S3	S3	S1	S3	S2	S1	
Possible (present or not sought)	S3	S2	S1	S3	S1	S1	
+	0	L+	L0	L-	L+	L0	L-

Chronological and semiological scores	Intrinsic imputability score (I)
CO OU S0	10
C1S1	11
C1S2	12
C2S1	12
C2S2	13
C1S3	14
C3S1	14
C2S3	15
C3S2	15
C3S3	16

❖ Conclusion

- New immunotherapy approaches are characterized by a range of new toxicities that must be known not only by medical oncologists and all those involved in the management of oncology patients. Early detection of immunological toxicities and early application of available algorithms allow for the complete resolution of symptoms in the majority of cases. However, if these symptoms are neglected, the evolution can lead to serious toxicities that can lead to the patient's death.