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## Abstract

# Melanoma

### INTEGRATED REGIMEN THERAPEUTIC (POLYBIOLOGIC-CHEMOTHERAPY) FOR MELANOMA ADVANCED

S. Vitello<sup>a</sup>, E. Triglia<sup>a</sup>, G. Scuderi<sup>b</sup>, M. Mangione<sup>a</sup>. <sup>a</sup>U.O. Oncologia Medica, Osp. S.Elia Caltanissetta, Italy. <sup>b</sup>U.O. Dermatologia, Osp. S.Elia Caltanissetta, Italy

The systemic therapy of advanced melanoma is one the most frustrating task for the medical oncologist, in fact the treatment yields few durable remission and minimal impact on survival (<6 months). The response rate to 50–60% with integrated treatment, but with more toxicity than chemotherapy regimen alone. In our structure we have adopted an integrated regimen therapeutic (polybiologic-chemotherapy), repeated every 28 d:

Fotemustine	100 mg/m <sup>2</sup>	e.v.	days 1,8
Cisplatin	40 mg/m <sup>2</sup>	e.v.	days 1,2
Interleukin-2	6,000,000	s.c.	days 4,5,6,16,17,18
Interferon-alfa	6,000,000	i.m.	days 8,10,12,14
Interferon-alfa	3,000,000	i.m.	days 4,6,16,18

We treated, consecutively from February 2006 to november 2007, 14 pts: 8 men/6 women, median age 61, range 32–68; 6 pts with metastases to sites visceral, 4 without, 2 pts with unresectable brain metastases, 2 pts with metastases visceral and brain.

After 4 cycle of therapy the results are encouraging: 7 R.O., equal to 50% of total the pts treated. In the pts we are continued therapy for 4 cycle still.

The most common side effects were vague symptoms, such as malaise, fatigue, chills and fever. All of which were limited to WHO grades 1 and 2. None of the pts required an interruption in treatment or was hospitalised during the treatment period.

The duration of response has been >7 months, with range 5–14+.

doi:10.1016/j.ejcsup.2008.06.067