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**Groundbreaking Consensus Statement Provides a Road Map for  
Treating Melanoma Patients with Cancer Immunotherapy**

MILWAUKEE, WI – The first evidence-based consensus statement on tumor immunotherapy for the treatment of patients with melanoma has been released by the Society for Immunotherapy of Cancer (SITC) and published online by *Nature Reviews Clinical Oncology*. Essentially a roadmap for using immunotherapy to treat patients with melanoma, this consensus statement known as the “Society for Immunotherapy of Cancer Consensus Statement on Tumor Immunotherapy for the Treatment of Cutaneous Melanoma,” provides patients and physicians alike with expert evidence-based recommendations for the use of different immunotherapies including interferon- $\alpha$ 2, pegylated interferon, interleukin-2 (IL-2) and ipilimumab. Recommendations for patient selection, toxicity management, clinical end points, and sequencing or combination of therapy, are also provided in this statement.

“Cancer immunotherapy is a rapidly advancing form of cancer treatment that has induced durable therapeutic responses in a subset of patients with advanced melanoma,” Michael Atkins, MD, Georgetown-Lombardi Comprehensive Cancer Center and a co-author on the paper said. “Current data suggests that cancer immunotherapy is being underutilized and many patients who might benefit from immunotherapy are not given the opportunity in the optimal setting. The goal of these guidelines is to change that and to provide a readily available and comprehensive resource about how and when to consider immunotherapy for patients with melanoma.”

Prior to the consensus statement’s publication, the lack of evidence-based guidelines in the field created obstacles and discord for practicing oncologists in the treatment of patients with melanoma. Now, this statement provides the best available evidence and consensus thinking for those interested in pursuing treatment with immunotherapy.

“The ‘SITC Consensus Statement on Tumor Immunotherapy for the Treatment of Cutaneous Melanoma’ addresses the knowledge gaps and creates a standard set of guiding principles for oncologists set forth for the effective and efficient application of cancer immunotherapy for patients with melanoma,” Howard L. Kaufman, MD, FACS, Rush University Medical Center and corresponding author on the paper said. “The group of authors who developed this statement considered the strength of the evidence for key issues in the field and provided consensus recommendations in these areas; especially where data was weak or missing.”

This consensus statement was created from work done by the SITC Cancer Immunotherapy Guidelines (CIG) Task Force established in 2010 and made up of more than 30 experts in the field of melanoma. The task force utilized the 2011 Institute of Medicine’s “Standards for Developing

Trustworthy Clinical Practice Guidelines” to assure a fair, transparent and balanced process for the consensus statement. However, as cancer immunotherapy continues to rapidly develop, the SITC Melanoma CIG Task Force will update the consensus statement as new findings and results from on-going clinical trials or as the approval of drugs from the FDA for the treatment of melanoma are released.

To read “The Society for Immunotherapy of Cancer Consensus Statement on Tumor Immunotherapy for the Treatment of Cutaneous Melanoma,” visit:  
<http://www.nature.com/nrclinonc/journal/vaop/ncurrent/full/nrclinonc.2013.153.html>.

For more information on the consensus statement and the Society for Immunotherapy of Cancer, visit: <http://www.sitcancer.org/about-sitc/initiatives/cancer-immunotherapy-guidelines>.