Vienna 29 September 2016

New drug combination could improve skin cancer therapies

Study results reveal that the effect of immunotherapy on malignant melanoma can be enhanced by combining it with other cancer treatments. Research is also looking at ways to reduce the strong side effects. These and other findings are being presented at the European Academy of Dermatology and Venereology (EADV) Congress at the Austria Center Vienna from 28 September to 2 October.

- Each year **1,500 Austrians** develop **invasive melanoma**
- Study shows: **immunotherapy** with **drug combination improves outcomes** in the treatment of metastasising black skin cancer
- **New combinations** of antibodies could improve treatment outcomes while **reducing side effects**.

In Austria each year around **1,500 people** develop **invasive melanoma**, i.e. metastasising black skin cancer. However, experts believe that the real total could be significantly higher. Thanks to the **use of immunotherapy**, success rates have **significantly improved** compared to outcomes for conventional (chemo) therapy over the past few years - in this method the **body's own immune system** is used to **attack cancer cells**. However, researchers at the MedUni Vienna and Vienna General Hospital Comprehensive Cancer Center (CCC) are working on ways to improve results still further. Christoph Höller of the MedUni Vienna Department of Dermatology and Venereology explains: "New data show that **50 percent** of patients with metastasising melanoma who are treated with immunotherapy are **still alive after three years** – and enjoy a **good quality of life**. But that still means that the therapy works less well in the other 50% of cases. As a result, we are looking for **new ways** to **improve** the **success rate** still further."

New substance combinations for fewer side effects
According to an update from a study involving CCC cancer researchers, although drug combination of two immune checkpoint inhibitors – the antibodies against the PD-1 and LAG-3 proteins, which slow the immune response to tumour cells – **improves the treatment outcome**, it is also associated with **greater side effects** such as severe fatigue, troublesome skin rashes and diarrhoea.

Höller continues: "This is where our concepts come in and we will be testing them over the coming years. One **study** has **just started**. It is being conducted in collaboration with the MedUni Vienna and Vienna General Hospital Department of Medicine I and we are testing a **new combination of two immune checkpoint inhibitors**." The antibodies against PD-1

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and LAG-3 are used to supress the signals sent by immune checkpoint receptors to the white blood cells. PD-1 and LAG-3 are formed on the surface of T-cells. If specific signalling substances bind to them, the T-cells become inactive, which restricts the activity of the immune system. The antibodies that are used to suppress these signalling pathways reactivate the T-cells, triggering an immune response directed against the tumour cells.

“The other study which is due to start shortly is investigating whether **combination of the PD-1 antibody** with a **specially modified virus** delivers **better results**,” Höller notes. “The aim of the study is to improve treatment outcomes while reducing side effects or bringing them under closer control.”
The hope for the long term is to cure **skin cancer** in the majority of patients or at least downgrade it to a **chronic disease**.

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