

## SYSTEMIC TREATMENT ALGORITHM FOR MELANOMA

### ADJUVANT THERAPY

Consider entry into clinical trial  
For stage 3 or resected stage 4 offer adjuvant therapy with dabrafenib/tremetinib, Nivolumab or Pembrolizumab.  
Treatment will depend on BRAF status, patient comorbidities and patient choice.

### LOCALLY ADVANCED/RECURRENT INOPERABLE DISEASE AFFECTING SINGLE LIMB

Treat as metastatic disease or consider referral for isolated limb perfusion, ECT with Bleomycin or T-VEC.

### METASTATIC DISEASE

#### BRAF positive

##### 1st line options:

- Consider entry into clinical trial
- Combination BRAF/MEK inhibitors (Dabrafenib + Trametinib OR Encorafenib + Binimetinib)
- Ipilimumab + Nivolumab
- Single agent Pembrolizumab OR Nivolumab

##### 2nd line options:

- Consider entry into clinical trial
- BRAF/MEK inhibitors if given immunotherapy first line
- Ipilimumab + Nivolumab OR SA Pembrolizumab if given BRAF/MEK inhibitors first line

##### 3rd line options:

- Consider entry into clinical trial
- Chemotherapy with Dacarbazine or Carboplatin/Paclitaxel
- Ipilimumab if given previous single agent Pembrolizumab OR Nivolumab

#### BRAF negative

##### 1st line options:

- Consider entry into clinical trial
- Ipilimumab + Nivolumab
- Single agent Pembrolizumab OR Nivolumab

##### 2nd line options:

- Consider entry into clinical trial
- Ipilimumab if give first line single agent Pembrolizumab OR Nivolumab
- Chemotherapy with Dacarbazine or Carboplatin/Paclitaxel for selected patients

##### 3rd line options:

- Consider entry into clinical trial
- Chemotherapy with Dacarbazine or Carboplatin/Paclitaxel if not previously received