



ADVERSE DRUG REACTIONS, INCLUDING SJS, TEN

CUTANEOUS ADVERSE EVENTS AFTER ANTI-PD-1 AND ANTI-PDL-1 THERAPY

Dk Yoon⁽¹⁾ - Je Lee⁽¹⁾ - Yh Choi⁽¹⁾ - Hj Byun⁽¹⁾ - Cs Park⁽¹⁾ - Sj Oh⁽¹⁾ - Sw Park⁽¹⁾ - Jh Park⁽¹⁾ - Jh Lee⁽¹⁾ - Dy Lee⁽¹⁾ - Jh Lee⁽¹⁾ - Jm Yang⁽¹⁾

Sungkyunkwan University School Of Medicine/samsung Medical Center, Department Of Dermatology, Seoul, Republic Of Korea⁽¹⁾

Introduction: Anti-PD-1 and anti-PDL-1 therapy have been growing widely used as an effective treatment for various types of cancer by enhancing pre-existing immune responses to tumor cell.

Objectives: We reviewed cutaneous adverse events (AEs) caused by anti-PD-1 and anti-PDL-1 therapy for facilitating dermatologists to immediate diagnosis and proper management.

Materials and Methods: A retrospective study was conducted on patients referred to dermatology for skin lesion after treated with pembrolizumab, nivolumab, or atezolizumab from January 1st, 2015 to June 30th, 2018.

Results: Of 1286 patients screened for the study, 33 patients (2.57%) were referred to dermatology with cutaneous AEs. 16 out of 675 patients (2.37%) showed cutaneous AEs after pembrolizumab therapy, 14 out of 562 patients (2.49%) did the same after nivolumab, and 3 out of 72 patients (4.17%) did the same after atezolizumab. 648 patients (50.43%) were treated for lung cancer, followed by 132 patients (10.27%) for melanoma. Of 33 patients with cutaneous AEs, 11 patients (33.33%) were with melanoma, followed by 10 patients (30.30%) were with lung cancer. In 12 types of cutaneous AEs observed, pruritic eruption (10 patients, 28.57%) was the most common cutaneous AE. The average onset was 21.79 weeks. Erythema multiforme, the earliest, took 7 weeks and nail change, the latest, took 52.33 weeks.

Conclusion: Anti PD-1 and PDL-1 therapy can cause various cutaneous AEs that dermatologists are supposed to be aware of.

