

SKIN CANCER (OTHER THAN MELANOMA)

THE LANDSCAPE OF VISMODEGIB VERSATILITY - EXPERIENCE OF A PORTUGUESE CENTRE

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Background: Multiples, recurring or advanced basal cell carcinomas (BCCs) can be difficult to manage. Vismodegib, an oral hedgehog pathway inhibitor, is approved for the treatment of advanced and metastatic BCCs which are inappropriate for surgery or radiotherapy.

Observation: We describe 12 patients who underwent vismodegib in our institution. Four patients with advanced BCC's of the face started vismodegib(V-150mg/daily): two patients had the treatment scheme(TS) changed to "every other day" due to the side effects (SEs) at 15 and 21 weeks respectively, obtaining a complete clinical response (CCR) 9 weeks after; one patient obtained CCR at 41 weeks, however 8 months after it recurred and vismodegib was re-started "every other day" with CCR 8 weeks after; the last patient achieved PCR at 12 weeks still under treatment.

Three patients with advanced BCC's of the eyelid started V-150mg/daily achieving a partial clinical response (PCR) at a mean average of 15 weeks. A biopsy of the remaining lesions revealed "absence of neoplasia", even so it was performed local excision of the suspected residual lesion. The histopathology of one case showed a superficial BCC. There was no recurrence after 1 year of follow-up.

Five patients with multiple BCC's started V-150mg/daily: three patients had the TS changed to "every other day" due to SEs obtaining a CCR at an average of 27 weeks; two patients obtained a CCR at 20 and 51 weeks, respectively. No recurrence was observed after 6 months.

Key-message: Our cases demonstrate the utility and versatility of vismodegib. As neoadjuvant treatment, the clinical appearance of tumors was variable and did not predict histologic cure, herein the importance of techniques to identify residual tumor nests. The use of a "every other day" scheme permitted a downgrading of the SEs with CCRs. Furthermore, we can interrupt and re-start vismodegib with no risk of resistance.