

EPIDEMIOLOGY

THE RISK OF MELANOMA IN PATIENTS WITH IMMUNE-MEDIATED INFLAMMATORY DISEASES (IMIDS) EXPOSED TO BIOLOGIC THERAPIES: SYSTEMATIC REVIEW AND META-ANALYSIS.

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Background: Biologic therapies are used in the treatment of IMIDs, including moderatesevere psoriasis, rheumatoid arthritis (RA), psoriatic arthritis (PsA) and inflammatory bowel disease (IBD). There are concerns that biologics could increase the long-term risk of melanoma due to their immunosuppressive mechanisms.

Objective: To determine whether biologic-exposed psoriasis, RA, PsA, and IBD patients have an increased risk of melanoma compared to biologic-naive patients with the same disease.

Materials and Methods: A literature search was conducted using the Medline, Embase and the Cochrane library for cohort and nested case-case control studies published between January 1995 and February 2019. Studies were deemed eligible for inclusion if the risk of melanoma was investigated in biologic-exposed – versus – biologic-naïve patients with at least 1 year of follow-up.

Results: In total, ten studies comprising of 76,331 biologic-exposed patients and 151,278 biologic-naïve patients were included in the analysis. An increased risk of melanoma was observed for biologic-exposed IBD patients (3 studies; pooled relative risk [pRR] 1.58, 95% confidence interval [CI] 1.02 – 2.43), but not for psoriasis (2 studies; pRR 1.03, 95% CI 0.54 – 1.94), PsA (1 study; pRR 1.70, 95% CI 0.69 – 4.16) or RA (4 studies; pRR 1.05, 95% CI 0.75 – 1.47) when compared to biologic-naïve patients.

Conclusions: The risk of melanoma was elevated in all the biologic-exposed populations when compared to biologic-naïve patients. While these results were only statistically significant for the IBD populations, the wide CI's suggest that biologic-exposed Pso, RA and PsA patients could still be at an increased risk. Due to the small number of disease-specific





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studies, variability in adjustment for confounders (particularly cumulative UV exposure), and limited patient follow-up, further studies are required to determine if biologic therapies do increase the risk of melanoma.



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