

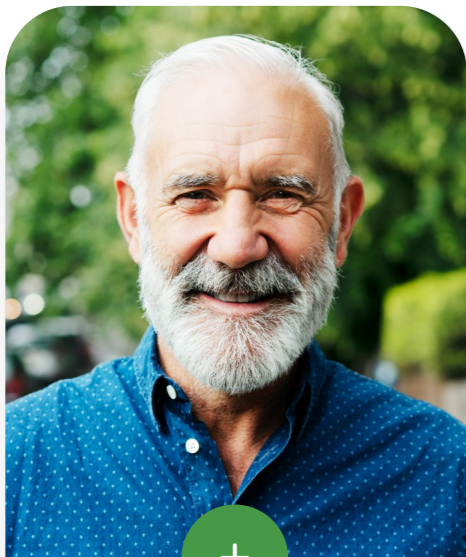
CONSIDER KEYTRUDA[®] FOR YOUR PATIENTS

WITH MELANOMA IN YOUR PRACTICE

KEYTRUDA[®] is indicated for:

- Treatment of adult patients with unresectable or metastatic melanoma who have not received prior treatment with ipilimumab. Subjects with BRAF V600 mutant melanoma may have received prior BRAF inhibitor therapy.
- Treatment of adult patients with unresectable or metastatic melanoma and disease progression following ipilimumab therapy and, if BRAF V600 mutation positive, following a BRAF or MEK inhibitor.
- Adjuvant treatment of adult and pediatric (12 years and older) patients with Stage IIB or IIC melanoma following complete resection.
- Adjuvant treatment of adult patients with Stage III melanoma with lymph node involvement who have undergone complete resection.

Do you have a patient like:



+

James*

who has Stage IIB
melanoma?



+

Kristina*

who has Stage IIC
melanoma?



+

Lim*

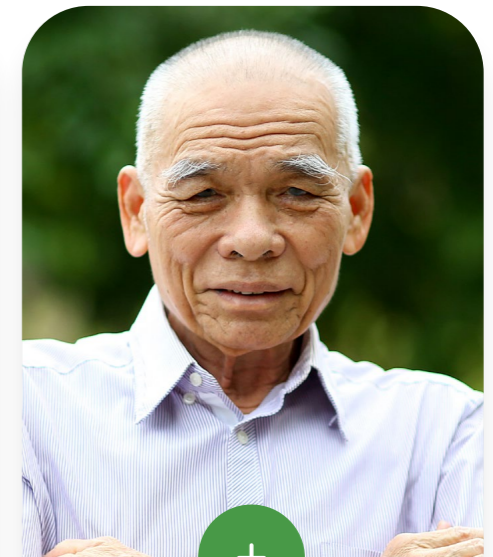
who has Stage III
melanoma?



+

Pranav*

who has metastatic
melanoma?



+

Jun*

who has Stage IV
melanoma?

DO YOU HAVE A PATIENT LIKE

JAMES*

WITH STAGE IIB MELANOMA?

James*

61 years old

- Archeologist

Clinical presentation



JAMES'S* CLINICAL PRESENTATION

1

INITIAL PRESENTATION & DIAGNOSIS

- Patient visited his family doctor as he noticed a large, rapidly growing plaque on his shoulder blade
- Diagnosed with asthma managed with inhaled therapy
- Diagnosis of melanoma confirmed with biopsy
- Computed tomography (CT) revealed no lymph nodes involvement

2

TREATMENT

- 2 surgeries were performed: the first one local by plastic surgery and the second one wider under general anesthesia
- Split-thickness skin graft was applied to cover the defect
- Successful graft and recovery

3

CLINICAL NOTES

- ECOG PS: 0
- N0 disease revealed with biopsy
- No evidence of rapidly progressive disease
- No brain metastases
- Stage IIB

Would you consider KEYTRUDA® for a patient like James*?



Patient background

Take a look at the published KN-716 study



DO YOU HAVE A PATIENT LIKE

KRISTINA*

WITH STAGE IIC MELANOMA?

Kristina*

70 years old

- Director at an investment firm
- Diagnosed with type 2 diabetes mellitus 4 years ago controlled on treatment for non-insulin dependent

Clinical presentation



KRISTINA'S* CLINICAL PRESENTATION

1

INITIAL PRESENTATION & DIAGNOSIS

- Patient observed a slowly growing plantar lesion that she neglected to treat as associated to shoe rubbing
- Diagnosis of melanoma 6 months later, when referred to a dermatologist
- Paraffin sections stained with Haematoxylin – and Eosin and Masson's Fontana showed features of malignant melanoma
- Complete resection
- Mohs surgery performed by surgeon to remove epidermal lesion

2

CLINICAL NOTES

- ECOG PS: 0
- Normal baseline LDH
- Stage IIC

Would you consider **KEYTRUDA**[®] for a patient like Kristina*?



Patient background

Take a look at the published KN-716 study



DO YOU HAVE A PATIENT LIKE

LIM*

**WITH COMPLETELY RESECTED
STAGE III MELANOMA WITH
LYMPH NODE INVOLVEMENT?**

Lim*

54 years old

- Retired, former landscaper
- Widowed with 3 children and 6 granddaughters
- Currently taking anxiolytics to manage her anxiety

Clinical presentation



LIM'S* CLINICAL PRESENTATION

1

INITIAL PRESENTATION & DIAGNOSIS

- Patient noticed dark-brown ulcerated nodules on the palms that she confused with warts
- Diagnosed with melanoma 2 years after the appearance of the first lesion during a routine exam
- Extensive palmar lesions

2

TREATMENT

- Lymphadenectomy performed

3

CLINICAL NOTES

- ECOG PS: 0
- Stage III melanoma
- PD-L1 positive
- BRAF V600E detected

Would you consider KEYTRUDA[®] for a patient like Lim*?



Patient background

Take a look at the published KN-054 study



DO YOU HAVE A PATIENT LIKE

PRANAV*

WHO HAS STAGE IV MELANOMA
WITH METASTASES?

Pranav*

62 years old

- Former athlete and photographer
- Single
- Taking vitamins, proteins and collagen supplements

Clinical presentation



PRANAV'S* CLINICAL PRESENTATION

1

INITIAL PRESENTATION & DIAGNOSIS

- Consulted his family doctor when his hairstylist noted his rapidly growing mole with irregular borders on his scalp
- Additional lesions were detected during a subsequent visit to his dermatologist
- Axillary lymph nodes detected with routine exam
- Computed tomography (CT) revealed metastases in the lungs and lymph nodes

2

CLINICAL NOTES

- ECOG PS: 1
- No BRAF mutation detected
- M stage: M1c
- Unresectable stage IV

Would you consider KEYTRUDA® for a patient like Pranav*?



Patient background

Take a look at the published KN-006 study



DO YOU HAVE A PATIENT LIKE

JUN*

WITH UNRESECTABLE
METASTATIC MELANOMA?

Jun*

72 years old

- Retired physical education teacher
- Married, 4 children and 7 grandchildren
- Currently taking an antihypertensive and a statin

Clinical presentation



JUN'S* CLINICAL PRESENTATION

1

CLINICAL NOTES

- BRAF status: V600E mutation confirmed
- ECOG PS: 1
- M stage: M1c
- Previous melanoma treatment included ipilimumab and a BRAF inhibitor

Would you consider KEYTRUDA® for a patient like Jun*?

← Patient background

Take a look at the published KN-002 study +



IMPORTANT SAFETY INFORMATION

Clinical use:

Pediatrics: KEYTRUDA® as monotherapy is indicated for the treatment of pediatric patients 12 years and older with Stage IIB or IIC melanoma who have undergone complete resection.

The safety and efficacy of KEYTRUDA® has not been established for pediatric patients with conditions other than melanoma (Stage IIB or IIC).

Relevant warnings and precautions:

- Immune-mediated adverse reactions, including severe and fatal cases:
 - Pneumonitis
 - Colitis
 - Hepatitis
 - Nephritis and renal dysfunction
 - Endocrinopathies including adrenal insufficiency, hypophysitis, type 1 diabetes mellitus and thyroid disorders
 - Severe skin reactions, including Stevens-Johnson syndrome and toxic epidermal necrolysis
- Other immune-mediated adverse events including uveitis, arthritis, myositis, encephalitis, sarcoidosis, myasthenic syndrome/myasthenia gravis, vasculitis, Guillain-Barré syndrome, hemolytic anemia, pancreatitis, myelitis, hypoparathyroidism, myocarditis, sclerosing cholangitis
- Solid organ transplant rejection
- Allogeneic stem cell transplant after and before treatment
- Severe infusion-related reactions
- Teratogenic toxicity
- Women should avoid pregnancy and breastfeeding during treatment and for at least 4 months after it
- Patients with hepatic impairment
- Renal impairment
- Driving and operating machinery
- Monitoring requirements
- Pediatrics
- Geriatrics

For more information:

Please consult the Product Monograph at www.merck.ca/static/pdf/KEYTRUDA-PM_E.pdf for important information regarding adverse reactions, drug interactions, and dosing information which have not been discussed in this piece.

The Product Monograph is also available by calling us at 1-800-567-2594 or by email at medinfocanada@merck.com.

Reference: KEYTRUDA® Product Monograph. Merck Canada Inc. December 29, 2022.



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