

American Cancer Society and Melanoma Research Alliance Partner to Improve Immunotherapy Outcomes

Grants will fund research aimed at decreasing rare but serious side effects associated with checkpoint inhibitors



A new partnership between the American Cancer Society (ACS) and the Melanoma Research Alliance (MRA) will fund much-needed research aimed at decreasing rare but serious, and at times even life-threatening, side effects associated with checkpoint inhibitors in hopes of increasing further cancer immunotherapy benefit to patients.

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Some of the most promising immunotherapy drugs are called checkpoint inhibitors, which essentially lift the immune system’s brake pedal, allowing white blood cells known as T-cells to attack cancer cells.

“Melanoma has served as the proving ground for several immunotherapies,” said Michael Kaplan, president & CEO of the Melanoma Research Alliance. “The first checkpoint immunotherapy approved by the FDA in 2011 was to treat melanoma, the deadliest form of skin cancer.”

Since then, the Food and Drug Administration (FDA) has approved use of checkpoint drugs to combat seven additional cancer types including lung, head and neck, kidney cancer, bladder cancer, Merkel cell carcinoma, classical Hodgkin lymphoma and MSI-H cancers. They are now being tested in more than 30 other malignancies. Last month, the FDA approved the first immunotherapy to treat any solid tumor based on a specific genetic marker, rather than where the cancer occurs in the body.

While safe and well tolerated for many, patients on checkpoint immunotherapy may experience a range of side effects from mild to potentially lethal. By releasing the brakes on the immune system, the body can in some instances, launch an attack on itself, creating potentially life-altering or life-threatening issues.

The new research partnership will create a joint grant-making program with the goal of maximizing the overall outcomes for treated patients by preserving checkpoint inhibitor activity and minimizing toxicity by finding ways to better predict, prevent and/or minimize the side effects of checkpoint inhibitor therapy.

“The partnership with MRA is timely and important for patients getting new immunotherapy drugs,” said William Chambers, senior vice president for Extramural Research at the American Cancer Society. “Together we believe we can really move the field forward and more rapidly improve outcomes for patients.”

MRA and ACS have each committed \$1 million for the grant awards. The combined \$2 million will be used to fund at least one team at \$1 million and to support five pilot projects at \$200,000 each. The research will include some aspect of melanoma research, but may include other cancers.

A request for proposals will be issued on July 1, 2017, and open to researchers at academic institutions in the United States with the first grants expected to be awarded in April 2018. More information about submitting proposal requests can be found at:

<https://www.cancer.org/immunotherapyRFA>. MRA and ACS are also exploring the potential for bringing in industry partners to support this research.
