Selumetinib for metastatic uveal melanoma – first line
NIHR HSRIC

Record Status
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Citation

Authors' objectives
Selumetinib is an oral, potent selective mitogen activated protein kinase kinase (MEK) inhibitor, which has been shown to be effective against MEK-dependent tumours. It is intended to treat metastatic uveal melanoma, a rare malignancy that affects the eyes. It is the most common adult intraocular tumour; it arises from melanocytes in the uvea and affects mostly those from White ethnic groups, particularly those with light coloured irises. Uveal melanoma tends to be asymptomatic initially, but as it enlarges, it may cause distortion of the pupil, blurred vision or a marked decrease in visual acuity. Between 1995 and 2002, the crude incidence of uveal melanoma in European countries was 5.1 per million person years, with higher rates in those over 65 years of age, with the exception of iris melanoma which usually presents at a younger age. One and five year survival rates were 95.9% and 68.9%, respectively, in 2000-2002. For the same period, the 5 year survival rate in the UK and Ireland was 39.3%. Once metastases to distant sites occur, median survival is 2-12 months with a 1-year survival of 10-15%. Fifty percent of cases metastasise to the liver only, and 90% of metastases to other sites also include liver disease. Liver involvement is the most common cause of death in metastatic uveal melanoma. Treatment for uveal melanoma includes radiotherapy, phototherapy, and surgery. In metastatic disease, treatment options include resection for localised liver disease and intrahepatic therapy with isolated liver perfusion DELCATH and selective internal radiation therapy (SIRT). If miliary hepatic or extra-hepatic metastatic disease is present, patients should be offered dacarbazine or ipilimumab. Currently, selumetinib is in a phase III study in combination with dacarbazine comparing its effect on progression free survival vs placebo. This trial is expected to complete in February 2016.

Final publication URL
http://www.hsric.nihr.ac.uk/topics/selumetinib-for-metastatic-uveal-melanoma-first-line/

Indexing Status
Subject indexing assigned by CRD

MeSH
Humans; Benzimidazoles; Melanoma; Uveal Neoplasms

Language Published
English

Country of organisation
England

English summary
An English language summary is available.

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Accession Number
32016000332

Date abstract record published
03/03/2016