

Introduction

- Oncogenic *KIT*-mutations are found in ±3% of melanoma patients, most frequently in mucosal (15-21%), acro-lentiginous (11-23%), and melanoma on chronically sun-damaged skin (CSDS, 16-27%)¹
- Only a minority of patients (14-30%) responds to treatment with small molecule c-*KIT* inhibitors (e.g., imatinib, sunitinib, nilotinib, dasatinib)¹
- Regorafenib** (REGO, Stivarga®) is an oral multikinase inhibitor (targeting *KIT*, *TIE2*, *VEGFR*, *PDGFR*, *RET*, *RAF*, *CSF-1R*)²
- REGO has shown **activity in pretreated melanoma**³
- REGO has shown activity (ORR 30%) in Korean pretreated *KIT*-mutant melanoma patients⁴, but has never been studied in a Caucasian population with *KIT*-mutant melanoma.

Methods

- Dual center, retrospective case series in a Caucasian population
- Prospectively identified cohort of advanced *KIT*-mutant melanoma patients
 - Treated in the prospective REGOMEL phase 2 clinical trial (NCT05370807): n=3
 - Treated on a compassionate use basis: n=7
- Database lock on January 1st, 2025 - median follow-up: 52.9 weeks [range 27-101]
 - All patients evaluable for safety (CTCAE v5.0) and efficacy (RECIST v1.1)
- Responses were evaluated with CT and/or [¹⁸F]FDG-PET/CT
- Total metabolic tumor volume (TMTV) was calculated using [¹⁸F]FDG-PET/CT

Results

Baseline characteristics

Patient	Center	Stage IV	Primary melanoma	Mutation/exon	Prior treatment	LDH° (U/L)	ECOG PS
KIT001* (M, 63)	BEL	M1c	Acral	<i>KIT</i> p.(Val654Ala) (exon 13) <i>BRAF</i> Gly469Ala (class II)	Nivo; ipi/nivo	188	0
KIT002* (M, 40)	BEL	M1c	Mucosal	<i>KIT</i> p.(Leu576Pro) (exon 11)	Pembro; ipi/nivo; imatinib	275	1
KIT003* (F, 59)	BEL	M1c	Cutaneous	<i>KIT</i> p.(Leu576Pro) (exon 11)	Nivo; ipi/nivo	143	0
KIT004 (F, 61)	BEL	M1d	Acral	<i>KIT</i> p.(Lys642Glu) (exon 13)	Pembro; ipi/nivo; imatinib ; dacarbazine	206	1
KIT005 (M, 75)	BEL	M1c	Acral	<i>KIT</i> p.(Asp820Tyr) (exon 17)	Pembro; ipi/nivo	166	0
KIT006 (M, 54)	BEL	M1c	Cutaneous	<i>KIT</i> p.(Val560Asp) (exon 11)	Pembro; ipi/nivo	2258	0
KIT007 (M, 65)	BEL	M1c	Cutaneous	<i>KIT</i> p. (Trp557Arg) (exon 11)	Nivo; ipi/nivo; imatinib ; Amgen20210023	322	0
KIT008 (F, 46)	ITA	M1c	Mucosal	<i>KIT</i> c1724_1726delAAC (exon 11)	IL-2; imatinib, ipi; nivo	342	0
KIT009 (M, 84)	BEL	M1c	Mucosal	<i>KIT</i> p. (Lys642Glu) (exon 13)	None**	274	1
KIT010 (F, 40)	BEL	M1c	Acral	<i>KIT</i> p. (Val654Ala) (exon 13)	Pembro; ipi/nivo, IT ASO1b+ipi	142	0

* Included in REGOMEL clinical trial

** Not eligible for immune checkpoint blockade due to auto-immune disease

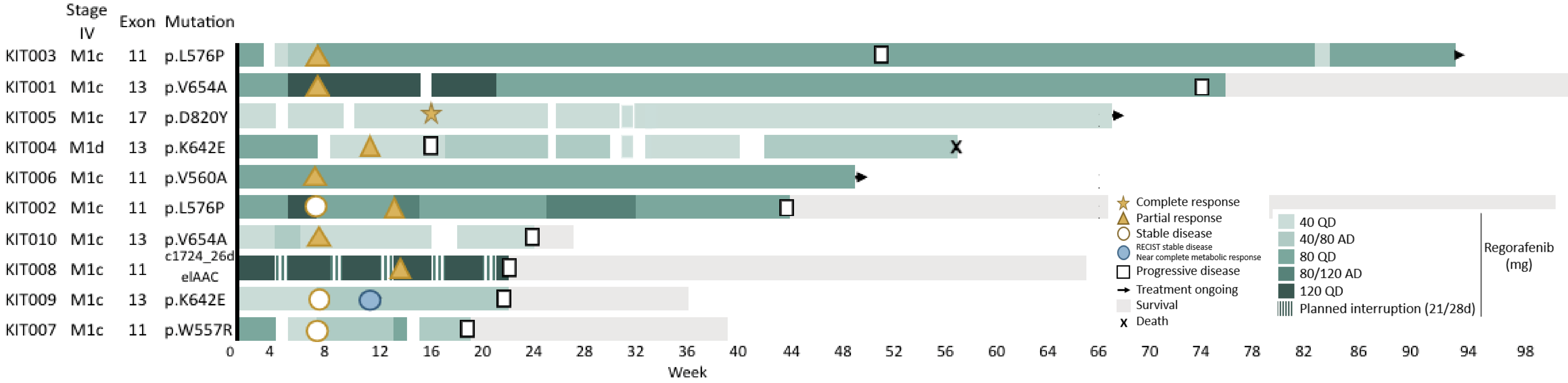
° LDH: upper limit of normal 250 U/L

Treatment related adverse drug reactions

TRAE, n(%)	All grades	Grade 3 ^{°°}	TRAE, n(%)	All grades	Grade 3 ^{°°}
Any TRAE	10 (100%)	4 (40%)	Arthralgia	2 (20%)	
Hoarseness	8 (80%)		AST/ALT increase	2 (20%)	
Hand-foot-skin reaction	7 (70%)		Dry eye	2 (20%)	
Hypophosphatemia	6 (60%)		Nail discoloration	2 (20%)	
Anorexia	6 (60%)		Weight loss	2 (20%)	
Fatigue	5 (50%)		Jejunal ulcer	1 (10%)	1 (10%)
Diarrhea	5 (50%)		Maculopapular rash	1 (10%)	1 (10%)
Hypertension	4 (40%)	2 (20%)	Dose reduction (due to TRAE)	5 (50%)	1 (10%)
Muscle cramp	4 (40%)		Temporary REGO interruption (due to TRAE)	5 (50%)	2 (20%)
Oral dysesthesia	4 (40%)		Permanent REGO discontinuation (due to TRAE)	0	0
Abdominal pain	3 (30%)				
Alopecia	3 (30%)				
Lipase increase	2 (20%)	1 (10%)			

^{°°}No grade 4/5 TRAE

Outcome



Treatment disposition

REGO 40-120 mg QD, continuous
REGO 120 21/28 days
Median time on REGO:
43.4 weeks [95% CI 0-87.5]
Ongoing in 3 patients (30%)

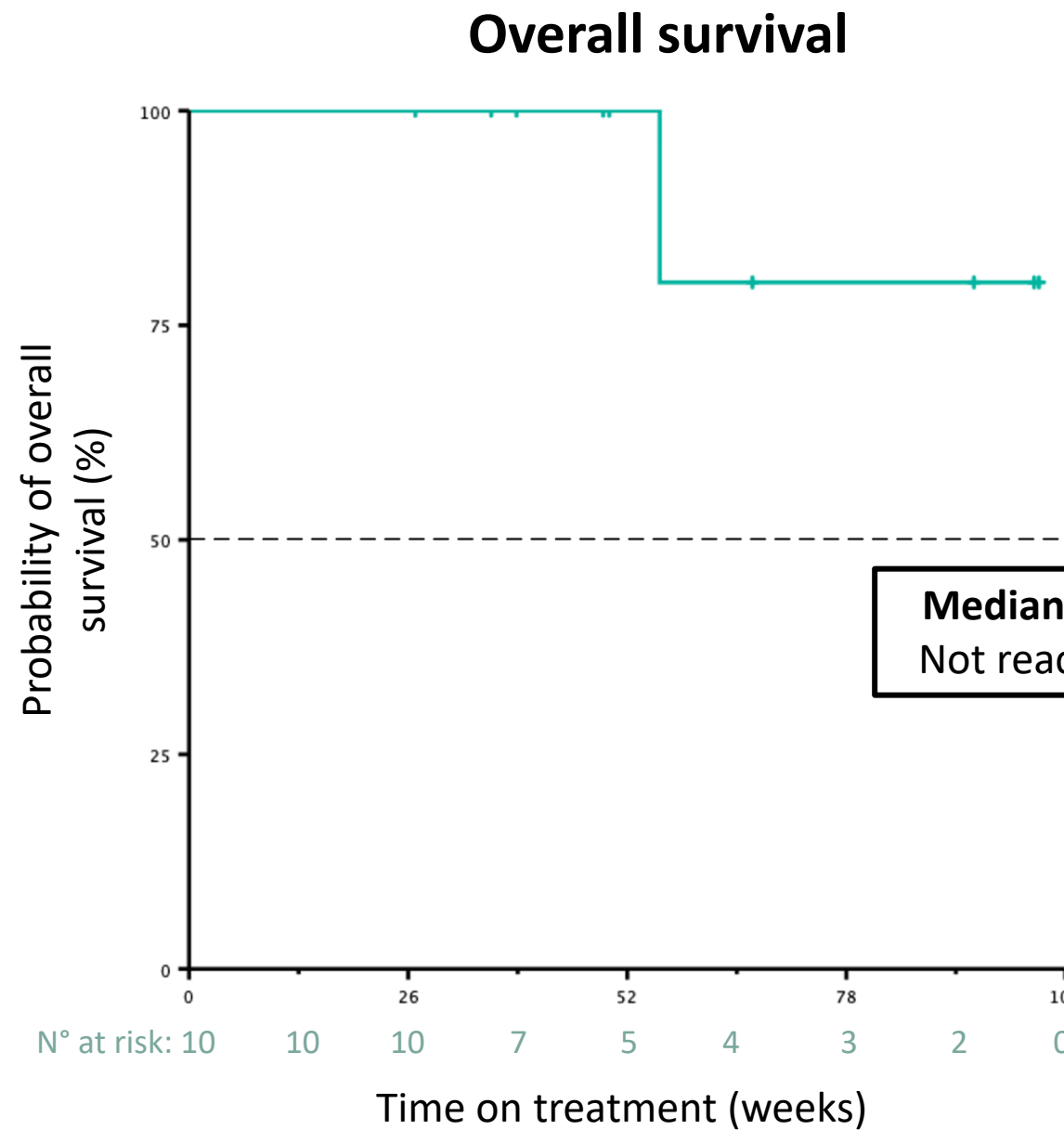
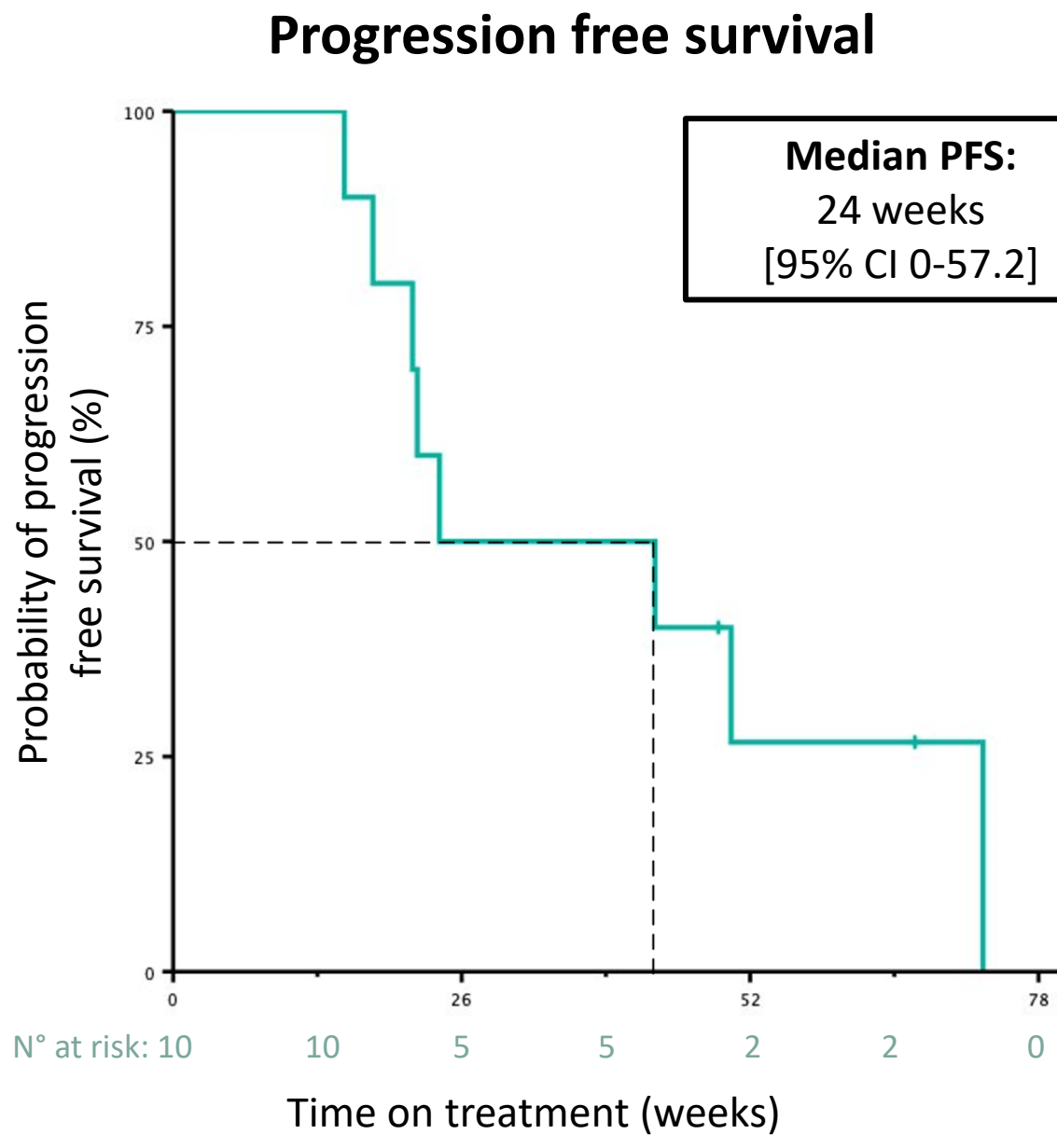
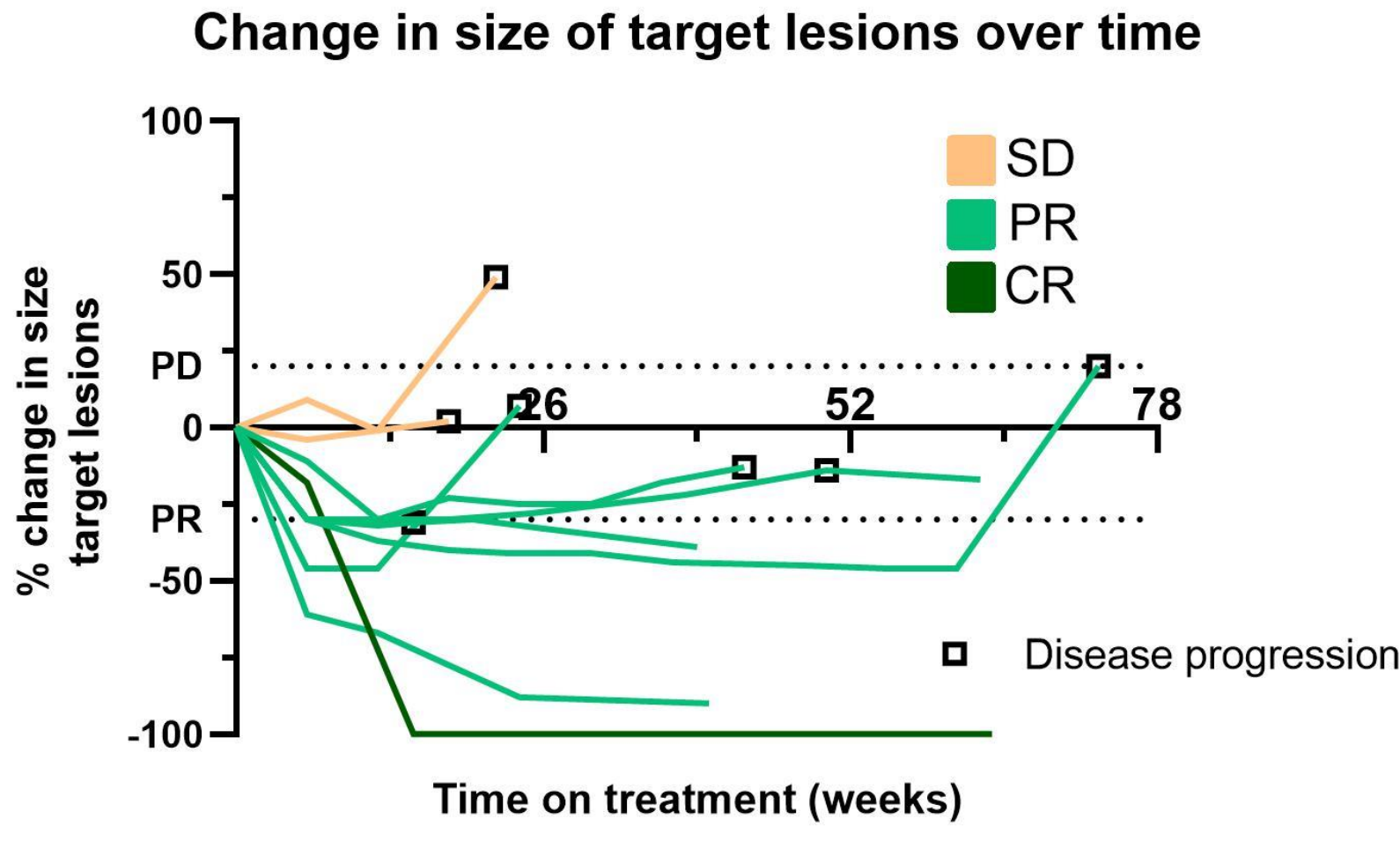
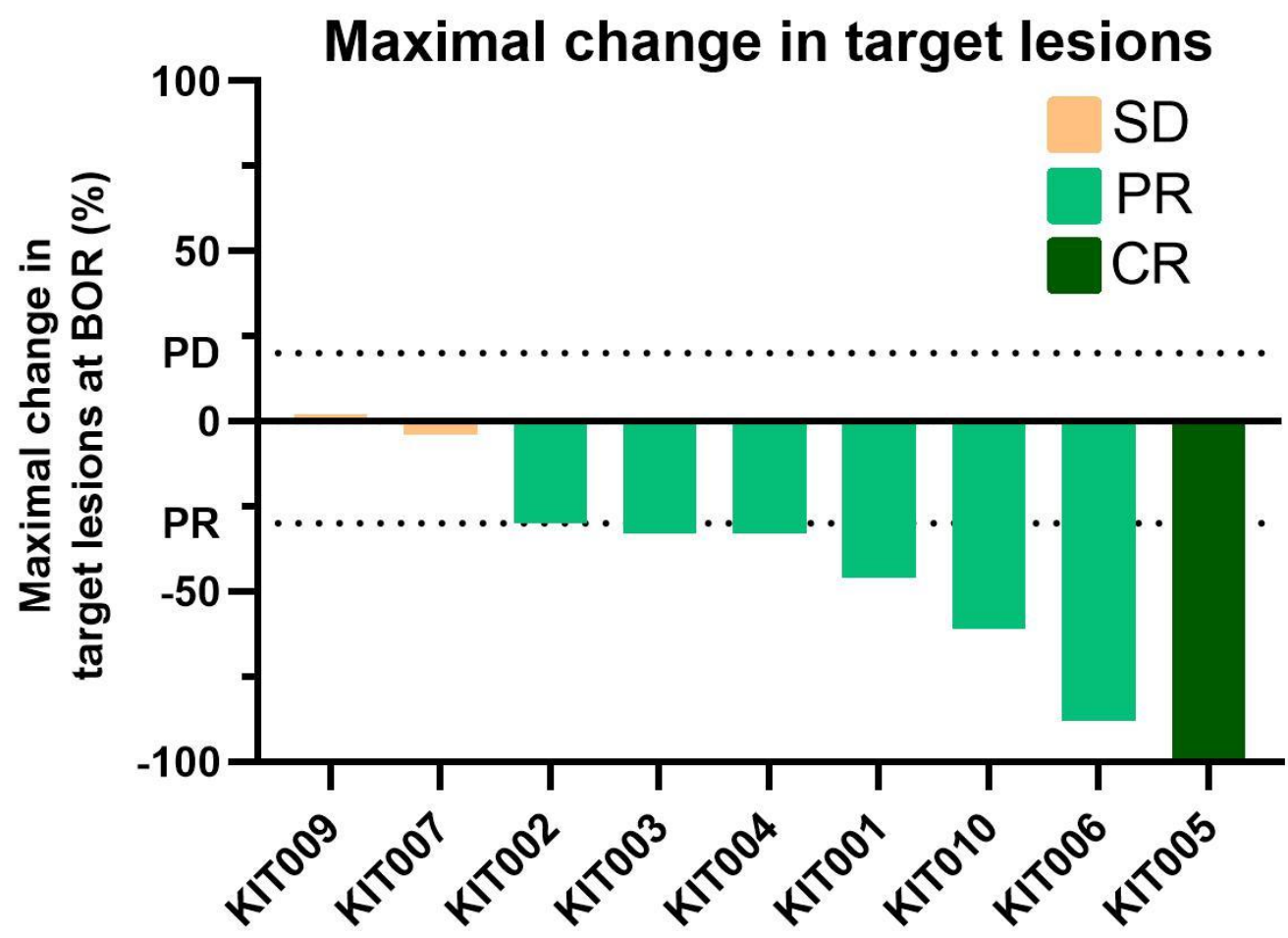
Response assessment

Complete response: n=1
Partial response: n=7
Stable disease: n=2
(incl. one metabolic response)

Objective response rate: 80%
Disease control rate: 100%

Duration of response:

37.4 weeks [CI 9.9-64.9 weeks]
Ongoing in 2 patients (20%)



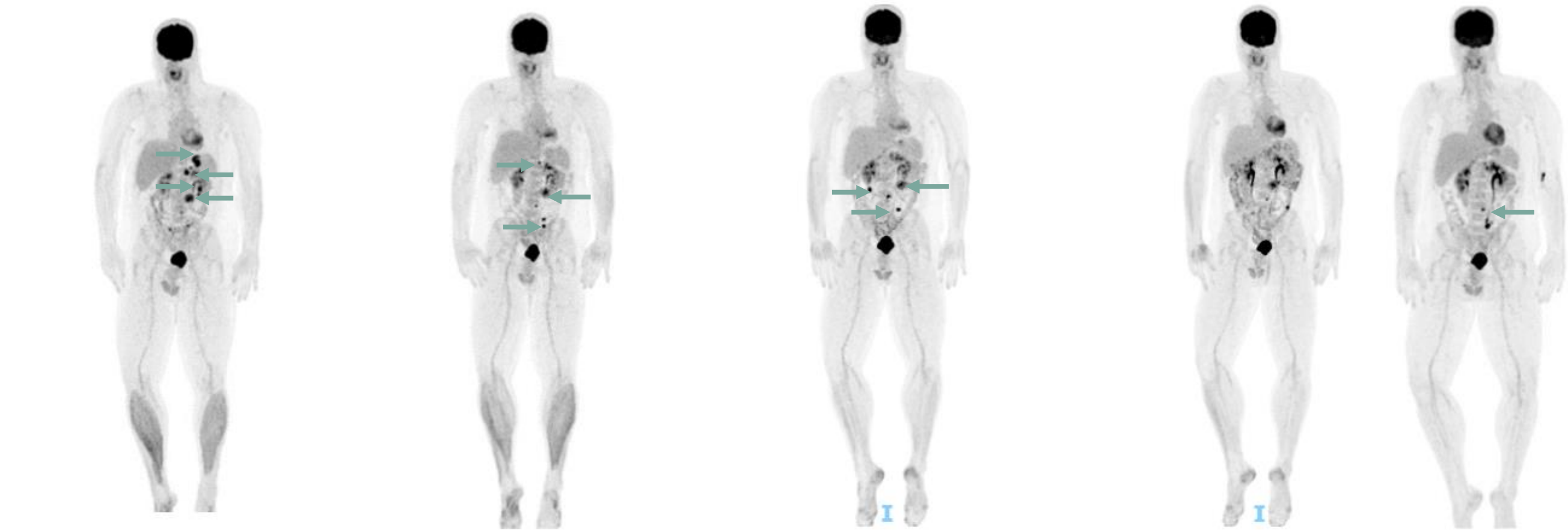
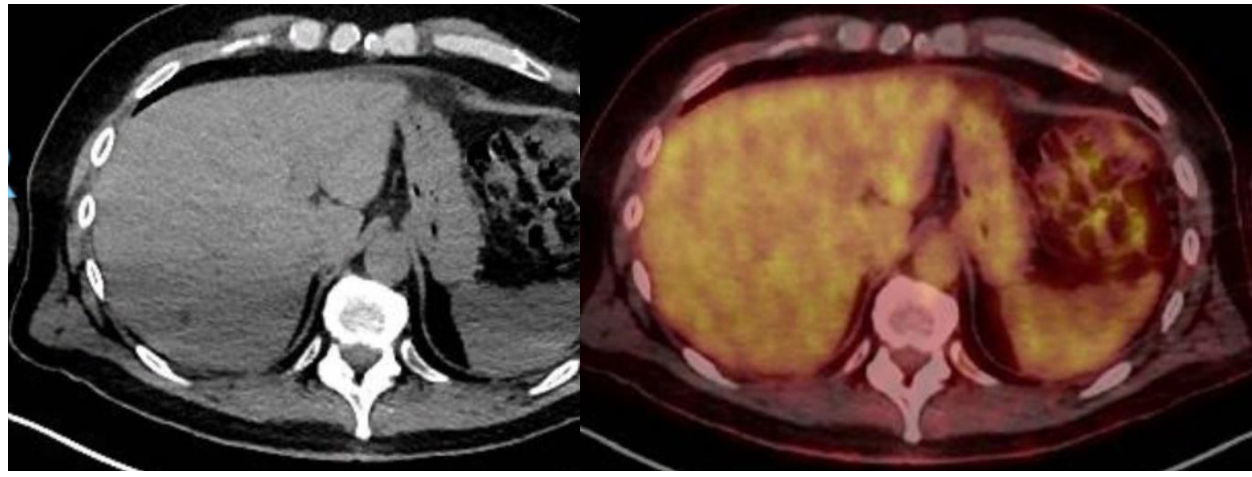
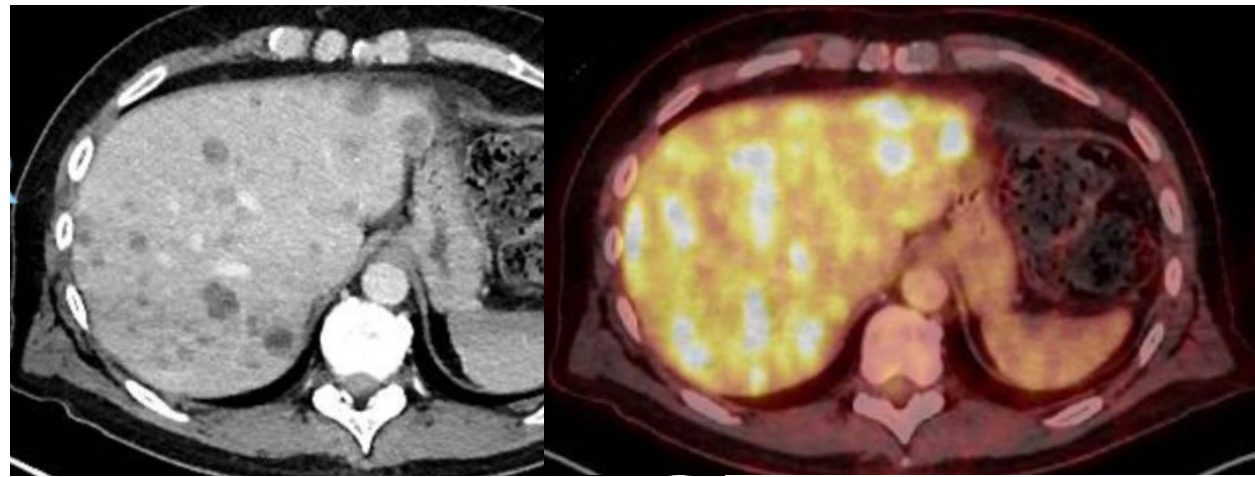
Case illustration KIT006: Male, 54y, Stage IV-M1c cutaneous *KIT*-mutant p.(Val560Asp), exon 11; progressive following pembrolizumab, ipilimumab/nivolumab; baseline LDH 2258 U/L

Baseline

Diffuse liver metastases

24 weeks

Partial response
Complete (metabolic) response in liver



CONCLUSION

Continuous uninterrupted once daily dosing of regorafenib (40-80 mg) demonstrates a **manageable safety profile**.

Regorafenib has unprecedented high anti-tumor activity in this Caucasian population of **advanced *KIT*-mutant melanoma** patients.

A prospective phase II trial has been submitted for regulatory approval.