

YOUR PATH WITH ADVANCED MELANOMA

SPEAK UP AND TAKE CONTROL OF YOUR STORY
WHEREVER YOU'RE GOING.

Melanoma Path

MARY,
LIVING WITH
ADVANCED MELANOMA
& JEFF, HER CAREGIVER





**“ WE THOUGHT, ‘OKAY, I CAN BREATHE.
WE’RE GOING TO TRY TO DO EVERYTHING
WE CAN TO DEAL WITH THIS DISEASE.’”**

**– PATRICIA, LIVING WITH ADVANCED MELANOMA
& BYRON, HER CAREGIVER**



LIVING WITH ADVANCED MELANOMA

What is Advanced Melanoma?

Melanoma is diagnosed based on stage: I, II, III, or IV. Advanced melanoma is melanoma with **metastasis*** (Stage IV, also called metastatic melanoma) or **unresectable** Stage III melanoma.

Stage IV melanoma is also known as metastatic melanoma and may or may not have spread to lymph nodes. Most patients diagnosed as Stage IV have unresectable melanoma.

- If you have Stage IV melanoma, your care team will consider location of the metastases, the number and size of tumors, as well as **lactate dehydrogenase (LDH)** levels.
- You may see a letter after an “M1”. The letter tells your care team where the metastases (“M”) are in your body. The number one means there is metastasis, as is the case for all Stage IV melanoma.
 - M1a means it has only spread to distant skin, other tissue such as muscle, and/or distant lymph nodes
 - M1b means the tumor had spread to the lungs
 - M1c means tumor spread to internal organs, not including brain and/or spinal cord
 - M1d means it spread to the brain and/or spinal cord



Visit **MelanomaPath.com** to see more stories about real people living with advanced melanoma.

*All **bolded** terms can be found in the glossary on page 22

LIVING WITH ADVANCED MELANOMA

What is Advanced Melanoma?

Stage III melanoma has not spread to **distant** parts of the body (no metastasis) but may have spread to nearby lymph nodes.

- There are subgroups of Stage III melanoma: IIIa, IIIb, IIIc, IIIc. Your care team knows how to determine this based on tumor size and which lymph nodes are affected.
- Some Stage III melanomas may be completely removed with surgery (resectable). **Unresectable** Stage III melanoma cannot be completely removed with surgery and may be treated similarly to Stage IV.

Advanced melanoma may be your first diagnosis, or it can happen later on, if an earlier stage spreads. It is common to feel sadness, grief, fear, guilt, loneliness, fatigue, or pain.



YOUR PATH

Know Where You May Go

Each body is different, and everybody reacts differently to each therapy. Advanced melanoma is complicated. It is important to be educated, stay informed, and keep in contact with your doctor as you develop a path forward.

Your treatment path or plan maps out the next steps for you.

- Surgery may be an option to remove the original tumor or lymph nodes for resectable disease. If eligible, patients may also have **neoadjuvant** and/or **adjuvant therapy**.

As examples, patients may receive surgery alone, surgery in combination with just neoadjuvant or just adjuvant therapy, or a combination of surgery with neoadjuvant and adjuvant therapy.

- **Systemic therapy** is often recommended for patients with advanced melanoma. In advanced melanoma, initial therapy can be called **first-line**, and the following treatment **second-line therapy**.

“I BRUSHED ALL OF THESE THOUGHTS AND FEELINGS ASIDE, KNOWING THE MOST IMPORTANT THING TO DO IN THE MOMENT WAS FIGURE OUT MY NEXT STEPS.”

– HILLARY, LIVING WITH ADVANCED MELANOMA



YOUR PATH



Know Where You May Go

Immunotherapy is the most common first-line therapy for advanced melanoma (about 62% of patients^{1,*}), more specifically, a regimen that includes one or more **immune checkpoint inhibitors** (a type of immunotherapy that targets specific “checkpoints” in your immune system).

Targeted therapies have also improved lives for patients with specific gene changes such as BRAF, MEK, and KIT. About half of patients with melanoma have a BRAF mutation.[†]

The first approved treatment for advanced melanoma was a **chemotherapy** medicine called dacarbazine and is sometimes still used for some patients with advanced melanoma.

1. Lamba N, Ott PA, Iorgulescu JB. JAMA Netw Open. 2022;5(8):e2225459.

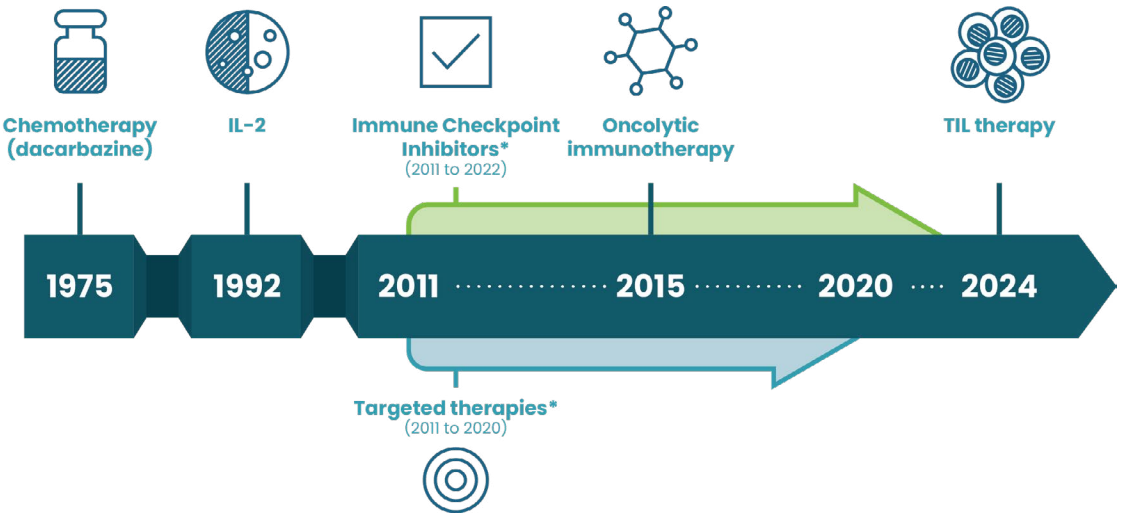
*Patients in the study had Stage IV (metastatic) melanoma.

†You can learn more at <https://www.aimatmelanoma.org/how-melanoma-is-treated/targeted-therapy/>.



EVOLUTION OF THERAPIES FOR ADVANCED MELANOMA

The following picture demonstrates how the number of available therapy options for patients with advanced melanoma has grown over time. It can also help organize the types of therapies, shown based on the years they became available in the US.



TIL=tumor infiltrating lymphocyte

*The areas shown represents many kinds of therapies that were introduced during this time period.

While not shown, there are also many types of therapies in clinical trials for patients with advanced melanoma who progress on current therapies.



WHAT'S AFTER PROGRESSION?

Be Prepared for What is Next

Progression occurs for most patients taking therapy for advanced melanoma, even if it may have worked for a period of time. Your care team will monitor for progression during any line of therapy with special tests, including surveillance imaging such as computed tomography (CT) scans or magnetic resonance imaging (MRI).

The time it takes to experience progression cannot be easily predicted for each patient, and estimates vary depending on many factors such as the person being treated and the type of first-line **immune checkpoint inhibitor** regimen used for patients with advanced melanoma. It is common to feel sadness, grief, fear, guilt, loneliness, fatigue, or pain.

Up to 65% of patients with advanced melanoma may experience progression on immune checkpoint inhibitor(s) at 6 months or earlier.^{1,2,3,*}


And some patients (up to 36%) are still responding to treatment or have not had tumor growth after 5 years.^{1,2,*}

1. van Not OJ, van den Eertwegh AJM, Jalving H, et al. JAMA Netw Open.2024;7(8):e2426641.

2. Larkin J, Chiarion-Sileni V, Gonzalez R, et al. N Engl J Med. 2019;381(16):1535-1546.

3. Robert C, Schachter J, Long GV, et al. N Engl J Med. 2015;372(26):2521-2532.

*Patients had advanced melanoma and were on immune-checkpoint inhibitor therapy.



“I JUST DECIDED THAT I WAS GOING TO ROLL UP MY SLEEVES, BACK INTO A CORNER AND FIGHT WITH EVERYTHING THAT I HAVE.”

– PATRICIA, LIVING WITH ADVANCED MELANOMA

HOPE AFTER PROGRESSION

It is important to be prepared and understand your options for the next step in your treatment path. Talk to your doctor to learn more.



Feel empowered to talk with your care team about your potential options after progression

EXPAND YOUR COMMUNITY



Make Your Own Path with a Community of Support

Whether you are living with advanced melanoma, or care about someone who is living with advanced melanoma, building and connecting with your own community of support can provide:

- inspiration from others with advanced melanoma
- tips for self-care and coping with overwhelming feelings
- education for planning future treatments
- the latest research on advanced melanoma
- a social network of others who understand

STAY CONNECTED

Follow us on Facebook and Instagram or sign up for inspiring stories, the latest updates, and support.

Join our community today!



EXPAND YOUR COMMUNITY



Here are a few advocacy groups that may help you build and connect with a community:

Melanoma Research Foundation (MRF)

<https://melanoma.org>

The MRF is dedicated to advancing melanoma research, providing education, and supporting patients.

Melanoma Research Alliance (MRA)

<https://www.curemelanoma.org>

The MRA focuses on accelerating medical research and advancing treatments for melanoma, aiming to enhance understanding and find cures for aggressive skin cancer.

AIM at Melanoma Foundation

<https://www.aimatmelanoma.org>

AIM at Melanoma is committed to increasing awareness of melanoma and funding research for better treatments. It offers educational resources and support for patients and their families.

Cancer Support Community (CSC)

<https://www.cancersupportcommunity.org>

The CSC provides emotional support, education, and resources for cancer patients and their families. It offers programs that focus on wellness, emotional health, and coping strategies.

American Cancer Society (ACS): Caregivers and Family

<https://www.cancer.org/cancer/caregivers.html>

The ACS supports caregivers and families affected by cancer through education, resources, and community programs that offer guidance on navigating the cancer journey.

KNOW THE QUESTIONS TO ASK



**Life is not simple.
Advanced melanoma is not simple.
Educate yourself.**

While your care team understands management options and can help you make decisions, you know your body best. Help your care team and loved ones understand how you feel, what you need, what is working or not working, and your goals to make shared decisions.

You are the most important part of your care team. It is important you know when you need more information and that you feel comfortable asking questions to your care team.

The following questions were co-created with the Replimune Patient Steering Committee, a group of patients and caregivers impacted by advanced melanoma.



For people living with advanced melanoma

Progression

What should I consider if I experience progression?

- It is important to be ready and plan ahead before progression to know your possible options. Stay motivated to educate yourself and loved ones on what you learn, to speak up and bring questions to your care team.
- Each option has a different way that they work and may even have different ways they are given to your body.
- Clinical trials may also be a consideration. Talk to your care team if you'd like to learn more.
- Building and connecting with your own community of support may give you inspiration and courage, as well as keep you educated on the latest information on advanced melanoma.

How long do treatments generally work?

- Each body is different, and everybody reacts differently to each therapy. Advanced melanoma is complicated. It is important to be educated about your options.
- Your care team can provide resources on what to expect. However, the time it takes to experience progression cannot be easily predicted for each patient, and estimates vary depending on many factors such as the person being treated and the type of immune checkpoint inhibitor regimen used.
- It is important to ask your care team about what to expect for your current and next treatment.

How do I stay educated about the future of advanced melanoma?

- Building and connecting with your own community of support may give you inspiration and courage, as well as keep you educated on the latest information on advanced melanoma.

For people living with advanced melanoma

Emotion and how to cope

How do I balance work, family, and not feeling well?

- There are many emotional points during a treatment path, and it's important to communicate how you feel with your family and loved ones.
- Building and connecting with your own community of support may give you inspiration and courage, as well as keep you educated on the latest information on advanced melanoma.

What if I feel guilt for not being as available for my family or other responsibilities?

- You are not alone. Guilt is a common feeling for people with advanced melanoma and can happen for many reasons. It's important you take care of yourself and talk to your loved ones about your feelings.
- If you feel you cannot talk openly about your feelings to those around you, a counseling or support groups may be able to help you. Talk to your care team if you would like to find someone to talk to about your feelings.

How do I allow myself to rest when I need it?

- Fatigue (tiredness) is a common symptom for people with advanced melanoma. It can lead to exhaustion. You may not be able to do the same activities you used to do. Even for patients who have been taking immunotherapy for years, fatigue can still interfere with everyday activities.
- It is important to rest to help you feel less tired such as sitting or lying down.
- Sometimes, even exercise can help with fatigue. You can try taking a walk, making more gentle movements in bed, or standing up.
- Talk to your family and friends to help them understand that you are more tired than before.
- Talk to your care team about feeling tired and ask if they can help.

For people living with advanced melanoma

Emotion and how to cope (Continued)

How can I advocate / fight for myself?

- There are many emotional points during a treatment path, and it's important to communicate how you feel with your family and loved ones.
- Building and connecting with your own community of support may give you inspiration and courage, as well as keep you educated on the latest information on advanced melanoma.

Terms to understand for informed discussions with your care team

What do “no evidence of disease” (NED) or “complete remission (CR)” mean?

- NED and CR mean the same thing. They mean that the signs and symptoms of cancer are gone. However, some cancer cells may still be present at a very low level, meaning current tests cannot detect them.

What does partial response (PR) or stable disease (SD) mean?

- PR stands for partial response, also called partial remission, which means the tumor(s) shrunk.
- SD stands for stable disease, which means the tumor(s) did not grow and did not shrink.

What does “duration of response” mean?

- Duration of response means the time that a patient has a response to treatment, meaning how long the treatment worked.

What do toxicity and adverse events mean?

- These terms basically mean side effects, or the signs/symptoms that you may experience while taking therapy. They describe how a medication adversely affects your body.

For people caring for someone living with advanced melanoma

Being an advocate for my loved one

What does being an advocate mean?

- As an advocate for your loved one, you may go to their appointments and should have a relationship with their care team. It's important you help in getting accurate information about your loved one's treatment path.
- Ask questions when you have them. Stay educated and connected to the advanced melanoma community to know what to ask and what to expect.
- Building and connecting with the advanced melanoma community of support can keep you educated on the latest information on advanced melanoma. There are also support groups just for caregivers of people with cancer.

How do I stay educated about the future of advanced melanoma?

- Learn everything you can about advanced melanoma. Make sure to also learn about the specific stage and type of melanoma your loved one has. You can help get their medical records and even organize them.
- Building and connecting with the advanced melanoma community of support can keep you educated on the latest information on advanced melanoma. There are also many organizations with resources dedicated to you: caregivers of people with cancer.

How involved should I be in the discussions with the care team?


- You are an important part of the care team.
- When going to doctor appointments with your loved one, its important you help get a clear and accurate information about the treatment path such as treatment options and what to expect. You can also help organize the information by taking notes during the appointment and asking questions.
- Your role may change as the needs of your loved one changes.
- Talk to your loved one, family, and friends about your role to better understand the details of how involved you could be.

For people caring for someone living with advanced melanoma

Being an advocate for my loved one (Continued)

Where can I find resources that help caregivers?

- Building and connecting with the advanced melanoma community of support can keep you educated on the latest information on advanced melanoma. There are also many organizations with resources dedicated to you: caregivers of people with cancer.



“FIND A COMMUNITY AND REACH OUT TO PEOPLE THAT HAVE GONE THROUGH SIMILAR SITUATIONS, BUT ALSO KNOW THAT YOU CAN REACH OUT TO YOUR DOCTORS.”

– HILLARY, LIVING WITH ADVANCED MELANOMA

For people caring for someone living with advanced melanoma

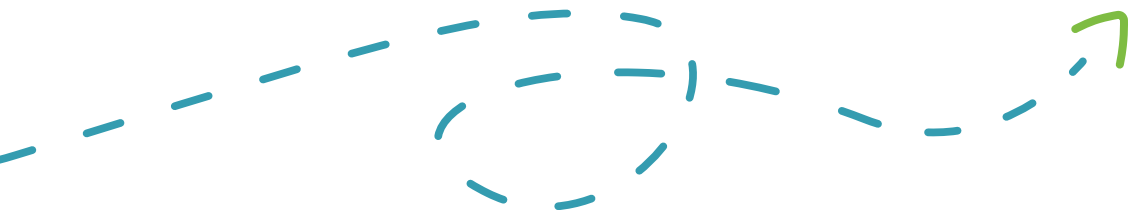
Staying strong

What if I am feeling overwhelmed in my role as a caregiver?

- It's normal to feel overwhelmed and even unprepared. You are helping make decisions about medical care and taking care of someone. This can feel like a lot.
- You may want to talk to your loved one, family members, and friends about what your role should be. Make sure to decide what your limits are and communicate them.
- Delegating tasks and deciding how others can help is important: for example, shopping for groceries or taking care of the mail.
- You need to take care of yourself, too. Plan things that you like to do. Ask for help. Try to eat healthy, exercise, and meet with friends. No one can do it all. No one can be a caregiver every hour of every day for months and months.
- If things seem too overwhelming and feel like a constant problem, it's important to talk to your own healthcare team to get professional help.

What are tips to help keep track of all the information?

- Carrying a notebook or having a device with you at medical appointments can help you jot down important details or questions you may have. You can also keep track of any side effects your loved one has when you are not at appointments.
- If you are trying to send out updates or requests to a group of people, you may want to try an online tool to help schedule support.





References

1. Lamba N, Ott PA, Iorgulescu JB. JAMA Netw Open. 2022;5(8):e2225459.
2. van Not OJ, van den Eertwegh AJM, Jalving H, et al. JAMA Netw Open. 2024;7(8):e2426641.
3. Larkin J, Chiarion-Sileni V, Gonzalez R, et al. N Engl J Med. 2019;381(16):1535-1546.
4. Robert C, Schachter J, Long GV, et al. N Engl J Med. 2015;372(26):2521-2532.

SPEAK UP AND ASK QUESTIONS



You can try to be one step ahead of advanced melanoma. Whether you are living with advanced melanoma, or someone you love has advanced melanoma, there are ways to take an active role in care.

Planning ahead may help better prepare everyone for the future, including:

- Mapping out a possible treatment path with your healthcare team
- Managing expectations on what to expect
- Staying up-to-date on advanced melanoma research
- Knowing how to help yourself or others within your advanced melanoma community





CREATED IN PARTNERSHIP WITH THE REPLIMUNE PATIENT STEERING COMMITTEE

This site was inspired and formed by the insights of the Replimune Patient Steering Committee, a group of patients and caregivers impacted by advanced melanoma. These members are committed to sharing their perspectives and advancing the path ahead for others affected by advanced melanoma.

WHO WE ARE

Replimune Group, Inc., is a biotechnology company pioneering the development of a novel class of oncolytic immunotherapies

GLOSSARY

There are many words that you may hear from your care team, or while searching online. If you need help to better understand them, the National Cancer Institute (NCI) has a Dictionary of Cancer Terms that can quickly define complex words.

Adjuvant Therapy

Adjuvant therapy is treatment that may be given after surgery.

Chemotherapy

Chemotherapy uses medicine(s) to stop the growth of cancer cells and can be given alone or in combination with other treatments such as surgery or radiation.

Distant

Distant means that melanoma has spread from the original (primary) tumor location to distant (farther away) organs or distant lymph nodes.

First-line Therapy

For patients with advanced melanoma, first-line or initial therapy is given first. It may be a set of treatments (combination therapy), or one treatment.

Immune Checkpoint Inhibitors

Checkpoints are proteins that keep the body's immune response from harming healthy cells, but some of these proteins can be on cancer cells, preventing your immune system from attacking these cancer cells. Drugs that block checkpoint proteins are called immune checkpoint inhibitors and can help the body's immune system find and destroy cancer cells.

Immunotherapy

Immunotherapy for cancer, also called immuno-oncology, is a type of systemic therapy that uses a patient's own immune system to fight cancer, while leaving normal cells alone. Your immune system is what your body relies on to help fight infections or diseases.

GLOSSARY

Lactate dehydrogenase (LDH)

LDH levels can be checked with a simple blood test. Knowing LDH levels can help your care team make decisions about your individual plan.

Metastasis

Metastasis happens when cancer spreads from the first place it formed to another part or other parts of the body.

Neoadjuvant Therapy

Neoadjuvant therapy is treatment that may be given before surgery.

Progression

Progression means that the cancer continues to grow despite treatment, or starts to grow again even after treatment was working.

Second-line Therapy

For patients with advanced melanoma, second-line therapy may be given after first-line therapy does not work, or stops working. There are other lines that may be given after second-line, as well.

Systemic Therapy

Systemic therapy is a treatment that travels through your bloodstream to reach cells throughout your body.

Targeted Therapy

Targeted therapy targets specific molecules that help cancer cells survive. These are often because of mutated genes that can cause the tumor to grow. Care teams can identify these changes based on genetic testing.

Unresectable Melanoma

Melanoma that is not able to be completely removed with surgery.



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