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The Netherlands

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Suijkerbuijk, K.P.M.; Haanen, J.B.A.G.; Boers-Sonderen, M.J.; Hospers, G.A.P.; Blank, C.U.; vanden Berkmortel, F.W.P.J.; ... ; vanden Eertwegh, A.J.M.

Citation
Suijkerbuijk, K. P. M., Haanen, J. B. A. G., Boers-Sonderen, M. J., Hospers, G. A. P., Blank, C. U., Vanden Berkmortel, F. W. P. J., ... Vanden Eertwegh, A. J. M. (2021). Survival of stage IV melanoma in Belgium and the Netherlands, *36*(2), E118-E119. doi:10.1111/jdv.17668

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Note: To cite this publication please use the final published version (if applicable).

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Reviewed and approved by Wake Forest University Health Sciences IRB00071154.
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DOI: 10.1111/jdv.17663

Survival of stage IV melanoma in Belgium and the Netherlands

With interest, we read the paper by Reyn *et al.*[1] in which the authors describe striking differences in melanoma incidence and survival between Belgium and The Netherlands.

When trying to interpret the data, we were surprised to notice that during twelve years, only 610 stage IV melanoma patients were included (i.e. 50 patients/year).

Since 2013, the nationwide Dutch Melanoma Treatment Registry (DMTR) has prospectively registered all stage IV melanoma patients treated in the Netherlands.[2] In the DMTR, over 700 patients diagnosed with stage IV melanoma are registered each year,[3] which means that <10% of Dutch stage IV melanoma patients were included in the analyses by Reyn et al. Furthermore, the higher relative incidence of stage IV melanoma patients in Belgium suggests a selection bias.

Altogether, we think that it is very important to discuss the selection process of stage IV melanoma patients with its potential biases and the representativeness of these patients for the whole stage IV melanoma population in the Netherlands. We recommend caution when interpreting these data and think that conclusions about differences in survival cannot not be made.

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Funding sources

No funding was received for this work.

Conflict of interest

Prof vd Eertwegh has advisory relationships with Amgen, Bristol Myers Squibb, Roche, Novartis, MSD, Pierre Fabre, Sanofi, Pfizer, Ipsen, Merck and has received research study grants not related to this paper from Sanofi, Roche, Bristol Myers Squibb, Idera and TEVA and has received travel expenses from MSD Oncology, Roche, Pfizer and Sanofi and has received speaker honoraria from BMS and Novartis. Dr Boers-Sonderen has consultancy/advisory relationships with Pierre Fabre, MSD and Novartis. Dr de Groot has consultancy/advisory relationships with Bristol Myers Squibb, Pierre Fabre, Servier, MSD, Novartis. Prof Hospers consultancy/advisory relationships with Amgen, Bristol Myers Squibb, Roche, MSD, Pfizer, Novartis, Pierre Fabre and has received research grants not related to this paper from Bristol Myers Squibb, Seerave. Dr Kapiteijn has consultancy/advisory relationships with Bristol Myers Squibb, Novartis, Merck, Pierre Fabre, and received research grants not related to this paper from Bristol Myers Squibb. Dr Suijkerbuijk has advisory relationships with Bristol Myers Squibb, Novartis, MSD, Pierre Fabre, Abbvie and received honoraria from Novartis, MSD and Roche. All paid to institution. Dr vd Veldt has consultancy relationships with Bristol Myers Squibb, MSD, Roche, Novartis, Pierre Fabre, Pfizer, Sanofi, Ipsen, Eisai, Merck. Prof Haanen has advisory relationships with Aimm, Achilles Therapeutics, Amgen, AstraZeneca, Bayer, Bristol Myers Squibb BioNTech,, GSK, Immunocore, Ipsen, MSD, Merck Serono, Molecular Partners, Novartis, Neogene Therapeutics,, Pfizer, Roche/Genentech, Sanofi, Seattle Genetics, Third Rock Ventures, Vaximm and has received research grants not related to this paper from Amgen, Bristol Myers Squibb, MSD, BioNTech, Neogene Therapeutics and Novartis. All grants were paid to the institutions. Dr Aarts has advisory board / consultancy honoraria from Amgen, Bristol Myers Squibb, Novartis, MSD-Merck, Merck-Pfizer, Pierre Fabre, Sanofi, Astellas, Bayer. Research grants Merck-Pfizer. Not related to current work and paid to institute. Dr v Rijn has no disclosures. Dr vd Berkmortel has no disclosures. Dr Vreugdenhil has no disclosures. Prof. Blank reports personal fees from BMS, MSD, Roche, Novartis, GSK, AZ, Pfizer, Lilly, GenMab, Pierre Fabre, Third Rock Ventures, grants from BMS, Novartis, NanoString, other from Uniti Cars, Forty Seven, Neon Therapeutics, Verastem, other from Immagene B.V. Dr. Piersma reports personal fees from Pierre Fabre, Amgen, BMS. Dr Westgeest reports Travel expenses

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from Ipsen, Astellas and received honoraria from Roche, Astellas.

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DOI: 10.1111/jdv.17668

Response to the Comment by Suijkerbuijk *et al*. 'Survival of stage IV melanoma in Belgium and the Netherlands'

Editor

With interest, we read the letter by K.P.M Suijkerbuijk et al., giving their comments and opinion on our findings concerning differences in melanoma incidence and survival between Belgium and the Netherlands.[1] More specifically, in their interpretation of the data, they stated a remarkable difference between the 610 stage IV melanoma patients during 12 years included in our study (i.e. 50 patients/year) and 700 stage IV patients registered each year by the Dutch Melanoma Treatment Registry (DMTR).[2]

Most likely, the authors of the letter to the Editor used a different interpretation of 'cancer incidence'. They presumably considered all patients with metastatic melanoma (stage IV) per year regardless of whether this was the initial diagnosis or a relapse after initial diagnosis or progressive disease during therapy. However, in the international definition of 'cancer incidence' 'relapse' is not included in the statistics, i.e. only the initial diagnosis with the stage determined at that time is counted one time in the given year. In our materials and method, we made it very clear that the study was elaborated based on 'cancer incidence', i.e. TNM stage at the time of primary diagnosis. This explains the difference between the number of stage IV melanoma patients in our study (stage IV at the time of primary diagnosis) and the registration of all stage IV per year by DMTR.

Funding source

Stichting tegen Kanker.

Conflict of interest

None declared.

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DOI: 10.1111/jdv.17666

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