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Immunotherapy in advanced melanoma: crossing borders

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Immunotherapy in advanced melanoma – crossing borders

Monique Krystyna van der Kooij

- 1 The combination of adoptive T cell transfer, anti-PD-1 and interferon-alpha can safely be administered to patients with advanced melanoma – *This thesis*
- 2 Anti-CTLA-4 and anti-PD-1 can safely be prescribed to patients with common autoimmune diseases of rheumatologic and endocrine origin – *This thesis*
- 3 Registry data holds great promise for exploring potential new fundamental research questions – *This thesis*
- 4 Immune checkpoint inhibitor monotherapy does not lead to clinical benefit for patients with metastatic uveal melanoma – *This thesis*
- 5 A systemic characterization of the tumor microenvironment is critical for understanding response following immunotherapies – *De Ruijter, Nature (2022)*
- 6 The coming decade of melanoma treatment will be dominated by “pathologic response-directed treatment” – *Reijers, Nature Medicine (2022)*
- 7 Registry databases containing e-health records offer an exciting opportunity to improve external validation research – *Nelson, BMJ (2016)*
- 8 In order to be a good medical oncologist, one should first become an internal medicine specialist – *NVMO*
- 9 In order to perform multidisciplinary research, one should not be afraid to cross borders
- 10 It is better to find a good cure for many patients, than to find an excellent cure for a lucky few
- 11 The world is one big cohort
- 12 A dream does not become reality by magic; it takes time, determination, hard work and good music – *Adapted from Colin Powell*