SAFETY AND TOLERABILITY OF PROLGOLIMAB IN PRE-TREATED MELANOMA: REAL-WORLD PATIENT DATA

Kesavan Reddiar Lukeerthana,
Mohamed Najeem Mohamed Sabran

Grodno State Medical University
Scientific supervisor: Nogtev V. S.

Relevance. The most dangerous type of skin cancer is malignant melanoma. Immune checkpoint inhibitors targeting PD-1, including nivolumab and pembrolizumab, have become standard-of-care [1]. Prolgolimab is a novel humanized anti-PD-1 antibody that has shown efficacy in clinical trials [2]. However, real-world safety data in patients with prior chemotherapy or targeted therapy remains limited. This gap is significant as prior treatments may influence immunotherapy tolerability.

Target. To analyze the safety and tolerability of Prolgolimab monotherapy in melanoma patients who have previously undergone standard chemotherapy or targeted therapy, using real-world patient-reported data.

Research methods. This retrospective single-center analysis utilized data from a patient questionnaire database. Included patients had confirmed melanoma and received Prolgolimab monotherapy after prior systemic treatment. Data collected included demographics (age group, gender), treatment duration, concomitant medications, and presence of 14 specific side effects. Patients were also asked whether complications affected their daily life. Descriptive statistics (frequencies and percentages) were used for analysis. Formal ethical approval was waived due to anonymized data.

Results and their discussion. Eleven patients were included; the majority were over 60 years (81.8%), with male (n=6, 54.5%) and female (n=5, 45.5%) patients. Treatment duration ranged from 2-18 months (mean 6 months). The most frequent side effects were fatigue and weakness (45.5%) and itchy skin (45.5%), followed by nausea/dry mouth (36.4%) and headache (27.3%). Skin rash occurred in 18.2%, while arthralgia, myalgia, tachycardia, and ocular pruritis each occurred in 9.1%. No cases of pneumonitis, thyroid dysfunction, or hypertension were reported.

Notably, 81.8% of patients reported no negative impact on daily life despite side effects. Qualitative remarks included «difficulty getting up and standing» and transient infusion-related symptoms.

These findings align with the known class effects of PD-1 inhibitors. The absence of serious immune-related adverse events is reassuring but must be interpreted cautiously given the small sample size. The high proportion of patients reporting no life impact suggests good tolerability. Study limitations include small sample size, retrospective design, lack of AE grading, and absence of efficacy data.

Conclusions. Prolgolimab monotherapy demonstrates a manageable safety profile in pre-treated melanoma patients, consistent with other PD-1 inhibitors. Fatigue

and pruritus were most common, and most patients reported no negative impact on daily life. Larger prospective studies are warranted to confirm these findings.

LITERATURE

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BIOCHEMICAL VARIATIONS FOR NON-EPILEPTIC PAROXYSMAL CONDITIONS IN PEDIATRICS

Kodikara Arachchige Ann Sanduni Upeksha Perera, Hamduna Yushrah Khasim

Grodno State Medical University
Scientific supervisor: Zenevich O. V.

Relevance. The diagnostic approach to non-epileptic paroxysmal conditions requires the integration of clinical assessment, electrocardiographic assessment, and biochemical analysis. Biochemical parameters(electrolytes) may trigger arrhythmogenesis [1]. It is still unclear how electrolyte changes affect atrial electrophysiology [2]. To manage paediatric patients well, a grasp of electrolyte pathophysiology is needed [3].

Target. To analyze biochemical changes for non-epileptic paroxysmal conditions by children's age and sex.

Research methods. A cohort study of 73 children (age 1-17) with non-epileptic paroxysmal conditions at Grodno Children Hospital in 2024-2025. Inclusions: age≤17 years showed paroxysmal suspected cardiac origin & available clinical records. Exclusions: confirmed epilepsy with structural heart disease, acute infections with secondary heart involvement & incomplete medical records. Statistical data was processed on a personal computer with the aid of the StatSoft Statistika 10.0 tool. The research involved scientific, theoretical and comparative analysis of medical literature

Results and their discussion. Biochemical analysis was performed in 71.2% of the total cohort. The normal biochemical results were documented in 44.2% of those tested. The distribution by sex was nearly equal (10 females, 13 males). Age group analysis revealed that normal profiles were observed across all developmental stages, with the highest frequencies in school-aged children (6 cases) and adolescents (7 cases). Hyperchloremia were detected in 48.1% of those tested. The distribution by sex was balanced. Age group analysis demonstrated that hyperchloremia affected all