

SUPPLEMENTARY MATERIALS to the original article**Immune checkpoint inhibition therapy for advanced skin cancer in patients with concomitant hematologic malignancy: a retrospective multicenter DeCOG study of 84 patients**

Ulrike Leiter¹, Carmen Loquai², Lydia Reinhardt³, David Rafei-Shamsabadi⁴, Ralf Gutzmer⁵, Katharina Kähler⁶, Lucie Heinzerling⁷, Jessica C. Hassel⁸, Valerie Glutsch⁹, Judith Sirokay¹⁰, Nora Schlecht¹¹, Albert Rübber¹², Thilo Gambichler¹³, Kerstin Schatton¹⁴, Claudia Pföhler¹⁵, Cindy Franklin¹⁶, Patrick Terheyden¹⁷, Sebastian Haferkamp¹⁸, Peter Mohr¹⁹, Lena Bischof²⁰, Elisabeth Livingstone²⁰, Lisa Zimmer²⁰, Michael Weichenthal⁶, Dirk Schadendorf²⁰, Andreas Meiwes¹, Ulrike Keim¹, Claus Garbe¹, Jürgen C. Becker^{20,21,22}, Selma Ugurel²⁰

¹Department of Dermatology, University Hospital Tübingen, Tübingen, Germany

²Department of Dermatology, University Hospital Mainz, Mainz, Germany

³Skin Cancer Center at the National Center for Tumor Diseases Dresden, Department of Dermatology, University Hospital Carl Gustav Carus, Dresden, Germany

⁴Department of Dermatology and Venereology, Medical Center, University of Freiburg, Freiburg, Germany

⁵Skin Cancer Center, Department of Dermatology and Allergy, Hannover Medical School, Hannover, Germany

⁶Department of Dermatology, University Hospital Kiel, Kiel, Germany

⁷Department of Dermatology, University Hospital Erlangen, Erlangen, Germany

⁸Department of Dermatology and National Center for Tumor Diseases, University Hospital Heidelberg, Heidelberg, Germany

⁹Department of Dermatology, University Hospital Würzburg, Würzburg, Germany

¹⁰Department of Dermatology, University Hospital Bonn, Bonn, Germany

¹¹Department of Dermatology, Hospital Dortmund, Dortmund, Germany

¹²Department of Dermatology, University Hospital Aachen, Aachen, Germany

¹³Department of Dermatology, Ruhr-University Bochum, Bochum, Germany

¹⁴Department of Dermatology, Heinrich-Heine-University Medical Faculty, Düsseldorf, Germany

¹⁵Department of Dermatology, Saarland University Medical Center, Homburg/Saar, Germany

¹⁶Department of Dermatology, University Hospital Cologne, Cologne, Germany

¹⁷Department of Dermatology, University Hospital Lübeck, Lübeck, Germany

¹⁸Department of Dermatology, University Hospital Regensburg, Regensburg, Germany

¹⁹Department of Dermatology, Elbe-Klinikum Buxtehude, Buxtehude, Germany

²⁰Department of Dermatology, University Hospital Essen, University of Duisburg-Essen, Essen, Germany

²¹German Cancer Research Center, Heidelberg, Germany

²²Translational Skin Cancer Research, Deutsches Konsortium für Translationale Krebsforschung (DKTK), Essen, Germany

TABLE S1. Comparison of characteristics in patients with concomitant hematologic malignancy

	MM N (%)	cSCC N (%)	MCC N (%)	P-value
Total	52 (100%)	15 (100%)	17 (100%)	
Gender				0.78
male	37 (71.2%)	12 (80%)	12 (70.6%)	
female	15 (28.8%)	3 (20%)	5 (29.4%)	
Age at diagnosis of skin cancer				0.28
Median (IQR)	72.5 years (59.0;76.0)	76.0 years (70.0;78.0)	70.0 years (63.0;78.5)	
Primary site of skin cancer				0.006
head and neck	13 (23.1%)	13 (86.7%)	5 (29.4%)	
trunk	21 (40.4%)	2 (13.3%)	4 (23.5%)	
extremities	12 (23.1%)	0 (0.0%)	7 (41.2%)	
mucosa	2 (3.8%)	0 (0.0%)	0 (0.0%)	
unknown primary	4 (7.6%)	0 (0.0%)	1 (5.9%)	
Hematologic malignancy				0.30
CLL	16 (30.2%)	8 (53.3%)	8 (47.1%)	
NHL	28 (53.8%)	5 (33.3%)	5 (29.4%)	
other	8 (15.4%)	2 (13.3%)	4 (23.5%)	
Age at diagnosis of hematologic malignancy				0.81
Median (IQR)	68.0 years (58.7;76.0)	66.0 years (59.2;73.0)	68.0 years (46.7;73.0)	

Characteristics of the total n=84 patient cohort. Percentages are given per column. MM, malignant melanoma; cSCC, cutaneous squamous cell carcinoma; MCC, Merkel cell carcinoma. Hematologic malignancies were categorized as chronic lymphocytic leukemia (CLL), other non-Hodgkin lymphoma (NHL), and other (comprising all other entities not belonging to the previous two categories). IQR, inter-quartile range.

Table S2: Treatment of hematologic malignancy

	CLL N (%)	NHL N (%)	Other N (%)	P-value
Total	32 (100%)	38 (100%)	14 (100%)	
Treatment of hematologic malignancy				0.008
no	23 (71.9%)	16 (42.1%)	4 (28.6%)	
yes	9 (28.1%)	22 (57.9%)	10 (71.4%)	
Number of therapy lines				0.16
0	23 (71.9%)	16 (42.1%)	4 (28.6%)	
1-3	9 (29.1%)	16 (42.1%)	10 (71.4%)	
4-7	0 (0.0%)	6 (15.7%)	0 (0.0%)	
Chemotherapy				0.047
no	23 (71.9%)	14 (36.8%)	7 (50.0%)	
yes	8 (25.0%)	21 (55.7%)	7 (50.0%)	
unknown	1 (3.1%)	3 (7.9%)	0 (0.0%)	
Corticosteroids				0.044
no	28 (87.5%)	21 (55.3%)	11 (78.6%)	
yes	3 (9.4%)	14 (36.8%)	3 (21.4%)	
unknown	1 (3.1%)	3 (7.9%)	0 (0.0%)	
Rituximab				<0.001
no	27 (84.4%)	18 (47.4%)	14 (100.0%)	
yes	4 (12.5%)	17 (44.7%)	0 (0.0%)	
unknown	1 (3.1%)	3 (7.9%)	0 (0.0%)	
Radiotherapy				0.095
no	30 (94.1%)	27 (71.1%)	13 (92.5%)	
yes	1 (3.1%)	8 (21.1%)	1 (7.1%)	
unknown	1 (3.1%)	3 (7.9%)	0 (0.0%)	
Cell transplantation				0.35
no	31 (94.1%)	32 (84.2%)	13 (92.5%)	
yes	0 (0.0%)	3 (7.9%)	1 (7.1%)	
unknown	1 (3.1%)	3 (7.9%)	0 (0.0%)	
Ongoing treatment at start of ICI therapy				0.19
no	31 (96.9%)	37 (97.4%)	12 (85.7%)	
yes	1 (3.1%)	1 (2.6%)	2 (14.3%)	

Presented are all disease-specific therapies given to the total of n=84 studied patients for hematologic malignancy until the start of ICI treatment for skin cancer. Hematologic malignancies were categorized as chronic lymphocytic leukemia (CLL), other non-Hodgkin lymphoma (NHL), and other (comprising all other entities not belonging to the previous two categories). Percentages are given per column. More than one treatment per patient is possible, therefore numbers do not necessarily add up to 100%. ICI, immune checkpoint inhibition.

TABLE S3: Characteristics of skin cancer disease at start of ICI therapy

	MM N (%)	cSCC N (%)	MCC N (%)	P-value
Total	52 (100%)	15 (100%)	17 (100%)	
Stage of disease and tumor load				0.08
locally advanced, measurable disease	3 (5.8%)	4 (26.7%)	0 (0.0%)	
locally advanced, disease-free after surgery	0 (0.0%)	0 (0.0%)	1 (5.9%)	
metastatic, measurable disease	41 (78.8%)	11 (73.3%)	16 (94.1%)	
metastatic, disease-free after surgery	8 (15.4%)	0 (0.0%)	0 (0.0%)	
Indication of treatment				0.18
adjuvant	8 (15.4%)	0 (0.0%)	1 (5.9%)	
inoperable disease	44 (84.6%)	15 (100%)	16 (94.1%)	
Sites of measurable disease				0.002
skin	3 (5.8%)	3 (20.0%)	0 (0.0%)	
LN	3 (5.8%)	5 (33.3%)	7 (41.2%)	
visceral	38 (73.1%)	7 (46.7%)	9 (52.9%)	
none	8 (15.4%)	0 (0.0%)	1 (5.9%)	
LDH (serum)				0.28
normal (\leq ULN)	34 (65.4%)	8 (53.3%)	7 (41.2%)	
elevated ($>$ ULN)	16 (30.8%)	6 (40.0%)	10 (58.8%)	
unknown	2 (3.8%)	1 (6.7%)	0 (0.0%)	
Systemic pre-treatment of skin cancer				0.29
yes	6 (11.5%)	6 (40.0%)	3 (17.6%)	
no	46 (88.5%)	9 (60.0%)	14 (82.4%)	
Pre-treatment: chemotherapy				0.39
yes	3 (5.7%)	3 (20.0%)	3 (17.6%)	
no	49 (94.2%)	12 (80.0%)	14 (82.4%)	
Pre-treatment: targeted/other				0.3
yes	3 (5.7%)	3 (20.0%)	0 (0.0%)	
no	49 (94.2%)	12 (80.0%)	17 (100.0%)	
Lines of systemic pre-treatment				0.32
1	5 (9.6%)	4 (26.7%)	1 (5.9%)	
≥ 2	1 (1.9%)	2 (13.3%)	2 (11.8%)	
Pre-treatment: radiotherapy				0.031
yes	9 (17.0%)	8 (53.3%)	8 (47.1%)	
no	43 (82.7%)	7 (46.7%)	9 (52.9%)	
Ongoing treatment of hematologic malignancy				0.24
yes	1 (1.9%)	1 (6.7%)	2 (11.8%)	
no	51 (98.1%)	14 (93.3%)	15 (88.2%)	

The presented characteristics of skin cancer disease refer to the start of ICI therapy in the total cohort of n=84 patients. Percentages are given per column. ICI, immune checkpoint inhibition; MM, malignant melanoma; cSCC, cutaneous squamous cell carcinoma; MCC, Merkel cell carcinoma; LN, lymph node; LDH, lactate dehydrogenase; ULN, upper limit of normal.

Table S4: Staging of hematologic malignancy at start of ICI therapy

	CLL		NHL	
	Stage	N (%)	Stage	N (%)
All patients		30		32
Melanoma (MM)				
Total		14 (100%)		23 (100%)
	Binet A	5	Ann Arbor I	3
	Binet B	4	Ann Arbor II	1
	Binet C	4	Ann Arbor III	6
			Ann Arbor IV	2
Missing data		1		11
Cutaneous squamous cell carcinoma (cSCC)				
Total		8 (100%)		5 (100%)
	Binet A	2	Ann Arbor I	1
	Binet B	2	Ann Arbor II	0
	Binet C	3	Ann Arbor III	2
			Ann Arbor IV	0
Missing data		1		2
Merkel cell carcinoma (MCC)				
Total		8 (100%)		4 (100%)
	Binet A	2	Ann Arbor I	0
	Binet B	1	Ann Arbor II	0
	Binet C	5	Ann Arbor III	2
			Ann Arbor IV	1
Missing data		0		1

The stage of the concomitant hematologic malignancy at start of ICI therapy for non-resectable skin cancer is given as available from patient files. Staging is shown for the largest groups chronic lymphocytic leukemia (CLL), and other non-Hodgkin lymphoma (NHL).

TABLE S5: Characteristics of skin cancer disease at start of ICI therapy

	MM		cSCC		MCC	
	Hematologic Malignancy	No Hematologic Malignancy	Hematologic Malignancy	No Hematologic Malignancy	Hematologic Malignancy	No Hematologic Malignancy
	N (%)	N (%)	N (%)	N (%)	N (%)	N (%)
Total	52 (100%)	257 (100%)	15 (100%)	59 (100%)	17 (100%)	76 (100%)
Stage of disease and tumor load						
locally advanced, measurable disease	3 (5.8%)	36 (14%)	4 (26.7%)	23 (39.0%)	0 (0.0%)	0 (0.0%)
locally advanced, disease-free after surgery	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	1 (5.9%)	0 (0.0%)
metastatic, measurable disease	41 (78.8%)	221 (86%)	11 (73.3%)	36 (51.%)	16 (94.1%)	76 (100%)
metastatic, disease-free after surgery	8 (15.4%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	0 (0.0%)
Indication of treatment						
adjuvant	8 (15.4%)	0 (0.0%)	0 (0.0%)	0 (0.0%)	1 (5.9%)	0 (0.0%)
inoperable disease	44 (84.6%)	257 (100%)	15 (100%)	59 (100%)	16 (94.1%)	76 (100%)
Sites of measurable disease						
skin	3 (5.8%)	nr	3 (20.0%)	23 (39.0%)	0 (0.0%)	7 (9.2%)
LN	3 (5.8%)	nr	5 (33.3%)	32 (54.2%)	7 (41.2%)	31 (40.7)
visceral	38 (73.1%)	nr	7 (46.7%)	4 (6.8%)	9 (52.9%)	38 (50.0%)
none	8 (15.4%)	nr	0 (0.0%)	0 (0.0%)	1 (5.9%)	0 (0.0%)
LDH (serum)						
normal (\leq ULN)	34 (65.4%)	226 (87.9%)	8 (53.3%)	44 (74.6%)	7 (41.2%)	31 (40.8%)
elevated ($>$ ULN)	16 (30.8%)	31 (12.1%)	6 (40.0%)	13 (22.0%)	10 (58.8%)	42 (55.3%)
unknown	2 (3.8%)	0 (0.0%)	1 (6.7%)	2 (3.4%)	0 (0.0%)	3 (3.9%)
Systemic pre-treatment of skin cancer						
yes	6 (11.5%)	0 (0.0%)	6 (40.0%)	18 (30.5%)	3 (17.6%)	25 (32.9%)
no	46 (88.5%)	257 (100%)	9 (60.0%)	41 (69.5%)	14 (82.4%)	51 (67.1%)
Pre-treatment: chemotherapy						
yes	3 (5.7%)	0 (0.0%)	3 (20.0%)	18 (30.5%)	3 (17.6%)	25 (32.9%)
no	49 (94.2%)	257 (100%)	12 (80.0%)	41 (69.5%)	14 (82.4%)	51 (67.1%)
Pre-treatment: targeted/other						
yes	3 (5.7%)	0 (0.0%)	3 (20.0%)	8 (13.6%)	0 (0.0%)	4 (5.3%)
no	49 (94.2%)	257 (100%)	12 (80.0%)	51 (86.4%)	17 (100.0%)	72 (94.7%)
Pre-treatment: radiotherapy						
yes	9 (17.0%)	9 (3.5%)	8 (53.3%)	23 (39.0%)	8 (47.1%)	42 (55.3%)
no	43 (82.7%)	248 (96.5%)	7 (46.7%)	36 (61.0%)	9 (52.9%)	34 (44.7%)

The presented characteristics of skin cancer disease refer to the start of ICI therapy in the cohort of n=84 patients with concomitant hematologic malignancy as well as n=392 patients without concomitant hematologic malignancy. Percentages are given per column. ICI, immune checkpoint inhibition; MM, malignant melanoma; cSCC, cutaneous squamous cell carcinoma; MCC, Merkel cell carcinoma; LN, lymph node; LDH, lactate dehydrogenase; ULN, upper limit of normal; nr, not reported.

Table S6: Best response to ICI therapy for non-resectable skin cancer

	CLL	NHL	other	P-value
	N (%)	N (%)	N (%)	
All patients	30	32	13	
Melanoma (MM)				0.48
Total	14 (100%)	23 (100%)	7 (100%)	
CR	1 (7.1%)	1 (7.1%)	0 (0.0%)	
PR	3 (21.4%)	6 (21.4%)	3 (42.9%)	
SD	5 (35.7%)	4 (14.2%)	2 (28.6%)	
PD	5 (35.7%)	7 (35.7%)	2 (28.6%)	
NE	0 (0.0%)	5 (21.4%)	0 (0.0%)	
objective response (CR+PR)	4 (28.6%)	7 (28.6%)	3 (42.8%)	
disease control (CR+PR+SD)	9 (64.2%)	11 (42.8%)	5 (71.4%)	
Cutaneous squamous cell carcinoma (cSCC)				0.29
Total	8 (100%)	5 (100%)	2 (100%)	
CR	1 (12.5%)	0 (0.0%)	0 (0.0%)	
PR	1 (12.5%)	2 (40.0%)	0 (0.0%)	
SD	2 (25.0%)	1 (20.0%)	1 (50.0%)	
PD	4 (50.0%)	2 (40.0%)	1 (50.0%)	
NE	0 (0.0%)	0 (0.0%)	0 (0.0%)	
objective response (CR+PR)	2 (25.0%)	2 (40.0%)	0 (0.0%)	
disease control (CR+PR+SD)	4 (50.0%)	3 (60.0%)	1 (50.0%)	
Merkel cell carcinoma (MCC)				0.28
Total	8 (100%)	4 (100%)	4 (100%)	
CR	0 (0.0%)	0 (0.0%)	0 (0.0%)	
PR	1 (12.5%)	0 (0.0%)	2 (50.0%)	
SD	3 (37.5%)	1 (25.0%)	0 (0.0%)	
PD	4 (50.0%)	2 (50.0%)	2 (50.0%)	
NE	0 (0.0%)	1 (25.0%)	0 (0.0%)	
objective response (CR+PR)	1 (12.5%)	0 (0.0%)	2 (50.0%)	
disease control (CR+PR+SD)	4 (50.0%)	1 (25.0%)	2 (50.0%)	

Response to ICI therapy is presented for n=75 patients treated for non-resectable skin cancer disease, subdivided by skin cancer entity and categorized concomitant hematologic malignancy. Hematologic malignancies were categorized as chronic lymphocytic leukemia (CLL), other non-Hodgkin lymphoma (NHL), and other (comprising all other entities not belonging to the previous two categories). Treatment response is presented as best overall response recorded from start of ICI until disease progression. ICI, immune checkpoint inhibition; CR, complete response; PR, partial response; SD, stable disease; PD, progressive disease; NE, not evaluable.

TABLE S7. Blood counts of skin cancer patients with concomitant hematologic malignancy at start of ICI therapy

	CLL	NHL	other	P-value
	N (%)	N (%)	N (%)	
Total	30 (100%)	32 (100%)	13 (100%)	
Leukocytes				0.003
normal	15 (50.0%)	24 (75.0%)	5 (38.5%)	
elevated	14 (46.7%)	3 (9.4%)	7 (53.8%)	
decreased	1 (3.1%)	5 (15.6%)	1 (7.7%)	
Lymphocytes				<0.0001
normal	8 (26.7%)	12 (37.5%)	6 (46.2%)	
elevated	18 (60.0%)	5 (15.6%)	1 (7.7%)	
decreased	4 (13.3%)	15 (46.9%)	6 (46.2%)	
Thrombocytes				0.01
normal	20 (66.7%)	23 (71.8%)	6 (46.2%)	
elevated	1 (3.1%)	3 (9.4%)	6 (46.2%)	
decreased	9 (30.0%)	6 (18.7%)	1 (7.7%)	

Blood counts at baseline of immune checkpoint inhibition (ICI) therapy are provided for n=75 patients treated for non-resectable skin cancer disease.