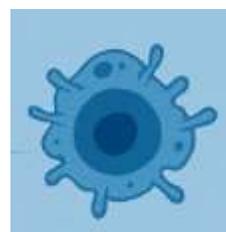


5PSQ-056

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Background and importance

Encorafenib/binimetinib is a standard treatment for BRAF-mutated metastatic melanoma but requires careful management due to class-related toxicities. Pharmaceutical care may support early detection of adverse effects, treatment adjustments, and improved patient safety.

Aim and objective

To describe pharmaceutical interventions performed during treatment with encorafenib/binimetinib and assess their association with toxicities, treatment duration, and clinical outcomes.

Material and methods

Multicenter retrospective study including all patients with unresectable or metastatic melanoma treated with encorafenib/binimetinib. Data collected: demographics, treatment duration, clinical outcomes, toxicities (hepatic, muscular, renal, cutaneous), and pharmacist interventions.

Results

Patients included: 38
Median age: 63 years (IQR 47–73)
Sex: 84% male
BRAF V600E: 89.4%
Median treatment duration: 22.5 months

Clinical outcomes:

Complete response 42.1%
Partial response 36.8%
Stable disease 10.5%

Common toxicities

Muscular (57.8%), cutaneous (31.5%), renal (26.3%), hepatic (26.3%), ophthalmologic (26.3%)

Prior treatments (subset): Nivolumab 92.1%, Dabrafenib/Trametinib 7.9%

Pharmaceutical interventions (73.6% of patients):

- Adverse-effect monitoring (63.1%)
- Patient education (31.5%)
- Dose adjustment recommendations (26.3%)
- Drug–drug interaction management (21.1%)
- Medication-error prevention (21.1%)
- Medication reconciliation (10.5%)

Acceptance rate: 89.4%.

Impact:

Improvement of adverse effects (**36.8%**)
Optimized dosing (**21%**)
Better patient understanding/adherence and care coordination (**26.3%**)
Dose adjustments required in **31%**, treatment discontinuation in **21%** (only one due to toxicity).

Conclusions and relevance

Pharmaceutical interventions were frequent and clinically relevant. Their contribution to toxicity monitoring and treatment optimization supports the integration of pharmacists into multidisciplinary teams for melanoma management.