

Melanoma risk from biologic therapy remains uncertain

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percent confidence interval, 0.60 to 2.40), [rheumatoid arthritis](#) (pooled relative risk, 1.20; 95 percent confidence interval, 0.83 to 1.74), or psoriasis (hazard ratio, 1.57; 95 percent confidence interval, 0.61 to 4.09) versus those who received conventional systemic therapy. Most studies did not adjust for other [risk factors](#).

"Further studies with large patient numbers that adjust for key risk factors are needed to resolve the issue of long-term safety of biologic therapy," the authors write.

Several authors disclosed financial ties to the pharmaceutical industry.

More information: [Abstract/Full Text \(subscription or payment may be required\)](#)

(HealthDay)—Clinically important increases in melanoma risk in patients treated with biologic therapy for common inflammatory diseases cannot be ruled out based on current evidence, according to a review published online May 20 in *JAMA Dermatology*.

Shamarke Esse, from the University of Manchester in the United Kingdom, and colleagues conducted a systematic literature search to identify studies quantifying the risk for melanoma in biologic-treated patients with inflammatory bowel disease, rheumatoid arthritis, and psoriasis compared to patients treated with conventional systemic therapy.

Based on seven studies (34,029 biologic-treated patients and 135,370 biologic-naive patients treated with conventional systemic therapy), the researchers found that biologic treatment was positively associated with nonsignificant increases in melanoma among patients with [inflammatory bowel disease](#) (pooled relative risk, 1.20; 95

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