**Guideline Page and Request**

External Submission:
Novartis Pharmaceuticals Corporation request to consider data published in Long, et al. and include dabrafenib and trametinib as an adjuvant treatment option in patients with resected Stage III BRAF V600-mutant melanoma.

Internal Request:
Due to the recent NEJM publication by Long, et al. and reporting results from the COMBI-AD phase III trial consider if changes should be made to the adjuvant treatment recommendations in the NCCN Guidelines for Melanoma.

**Panel Discussion/References**

- Based on a review of data in the noted references, the panel voted on adding dabrafenib trametinib combination therapy as an option for patients with BRAF-V600 activating mutation in the following adjuvant treatment settings:
  1. Resected stage III sentinel node positive melanoma (ME-4)
     - Panel vote supported that the addition of dabrafenib trametinib as a treatment option for patients with SLN metastasis >1 mm is supported by high-level evidence (category 1)
  2. Resected stage III disease with clinically positive node(s) (ME-5)
     - Panel vote supported that the addition of dabrafenib trametinib as a treatment option is supported by high-level evidence (category 1)
  3. Resected stage III clinical satellite or in-transit melanoma (ME-7)
     - Panel vote supported the addition of dabrafenib trametinib as a treatment option
  4. Resected local, satellite, and/or in-transit melanoma (ME-12)
     - Panel vote supported the addition of dabrafenib trametinib as a treatment option
  5. After complete lymph node dissection and/or a complete resection of a nodal recurrence of melanoma (ME-13)
     - Panel vote supported that the addition of dabrafenib trametinib as a treatment option is supported by high-level evidence (category 1)

**Vote**

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