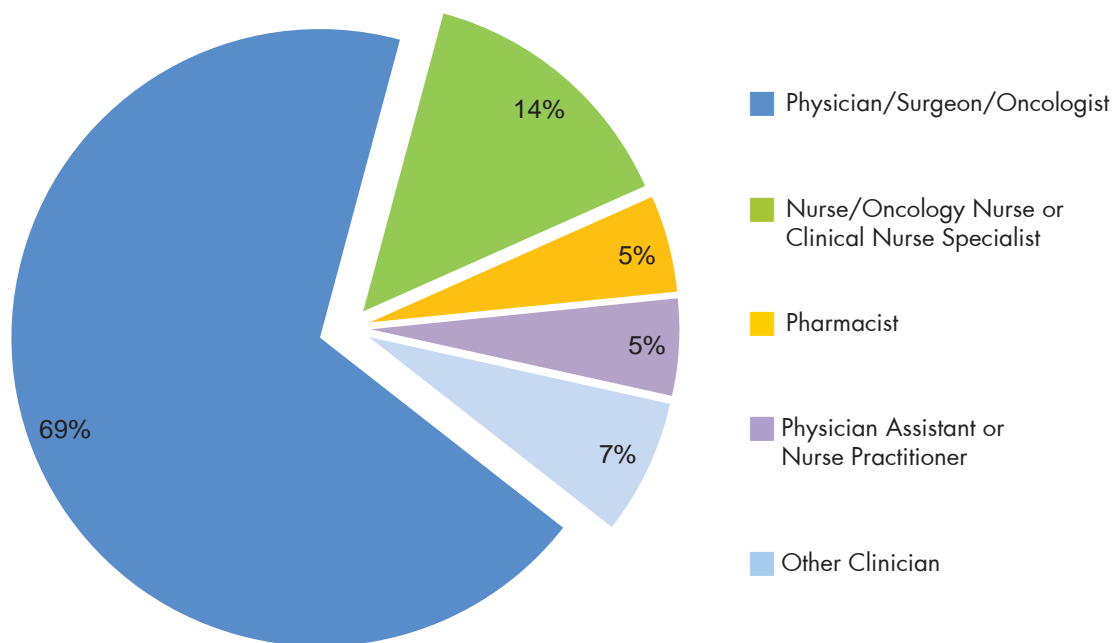


NCCN Trends™ is an analytics tool from the National Comprehensive Cancer Network® (NCCN®) that surveys how clinicians across the U.S. and around the globe are delivering cancer care. This summary includes the results of the May 2013 NCCN Trends™ Survey, which focused on Metastatic Melanoma. This survey was sent to U.S. and International users of NCCN.org.

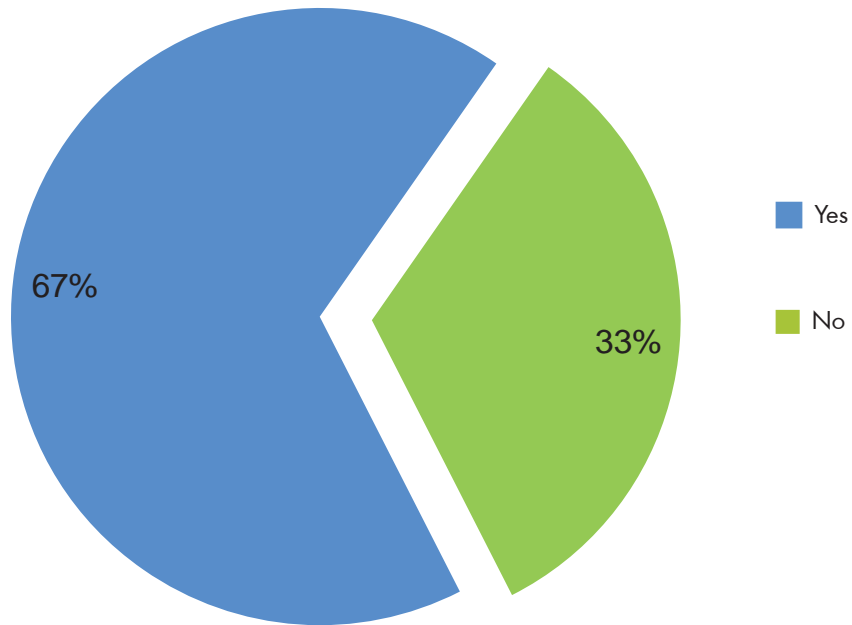
## DEMOGRAPHICS

**Distribution of Respondent Types (n = 1,243)**

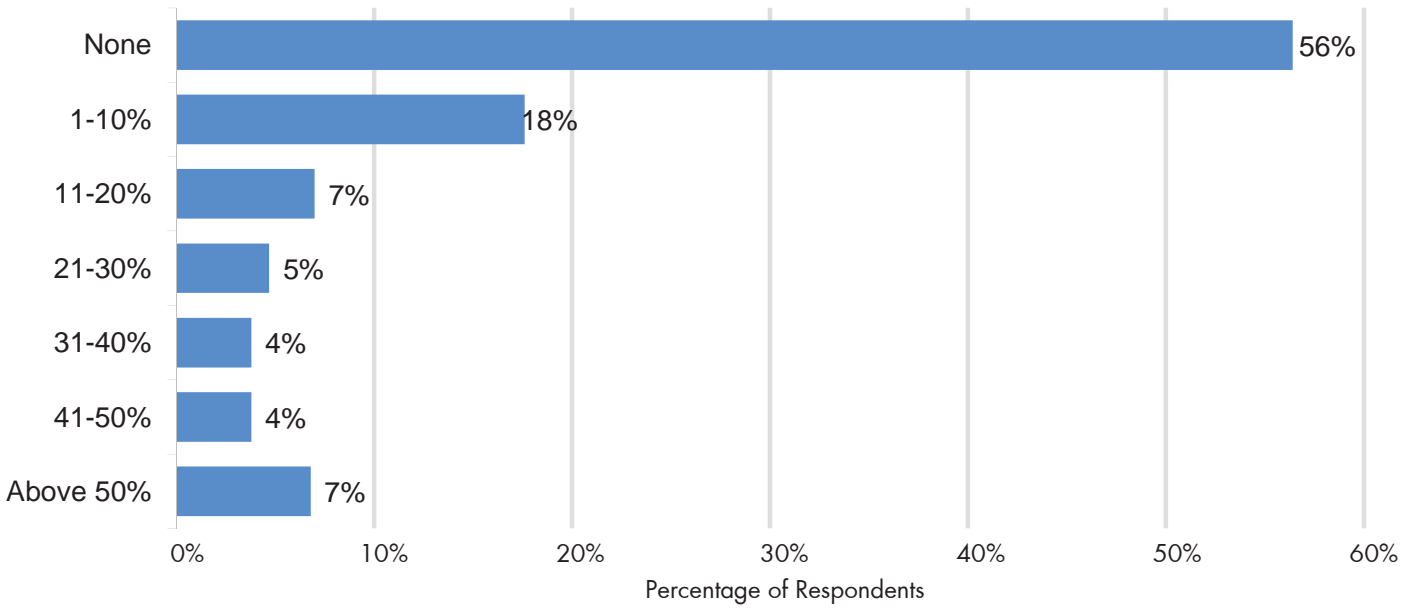


Note: Percentages may not total 100 because of rounding.

**Q1. Do you treat patients with metastatic melanoma? (n = 1,243)**

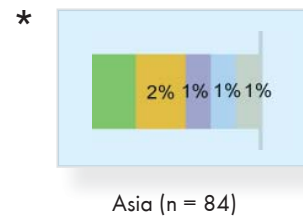
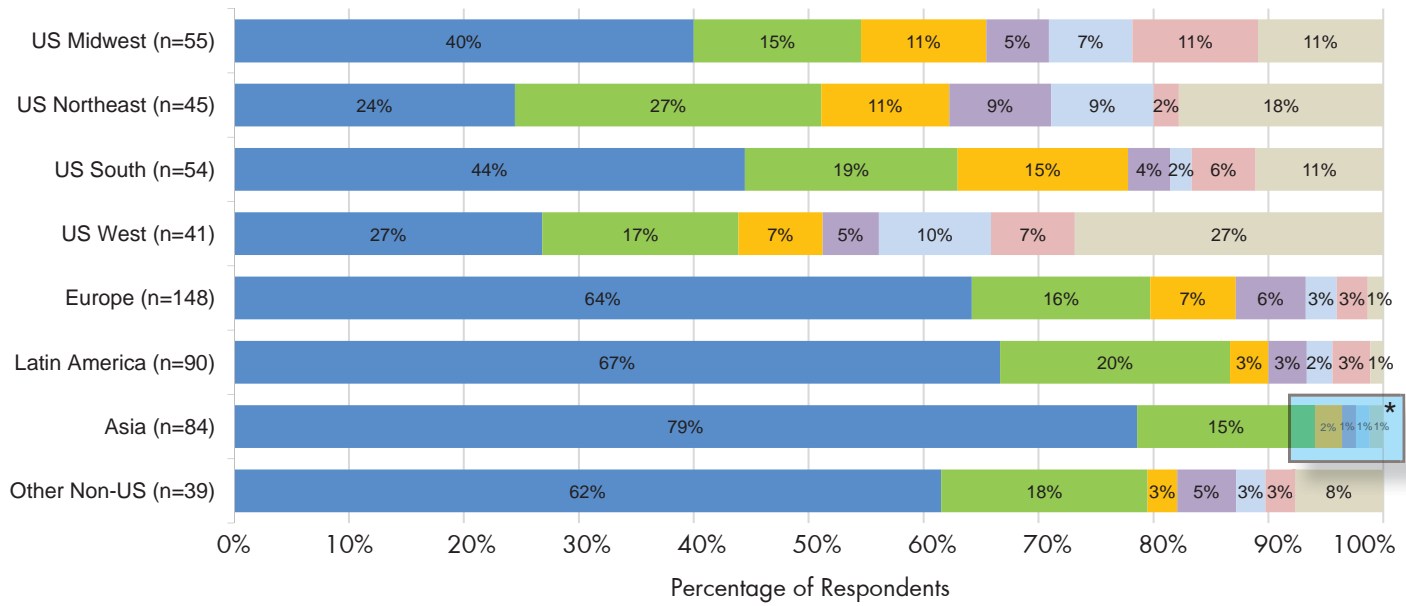
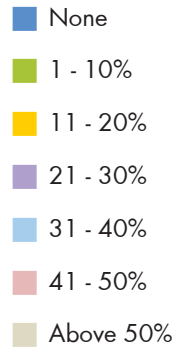


**Q2. What percent of your patients with BRAF mutant, unresectable or metastatic melanoma are you currently using ipilimumab for 1st line therapy? (n = 557)**



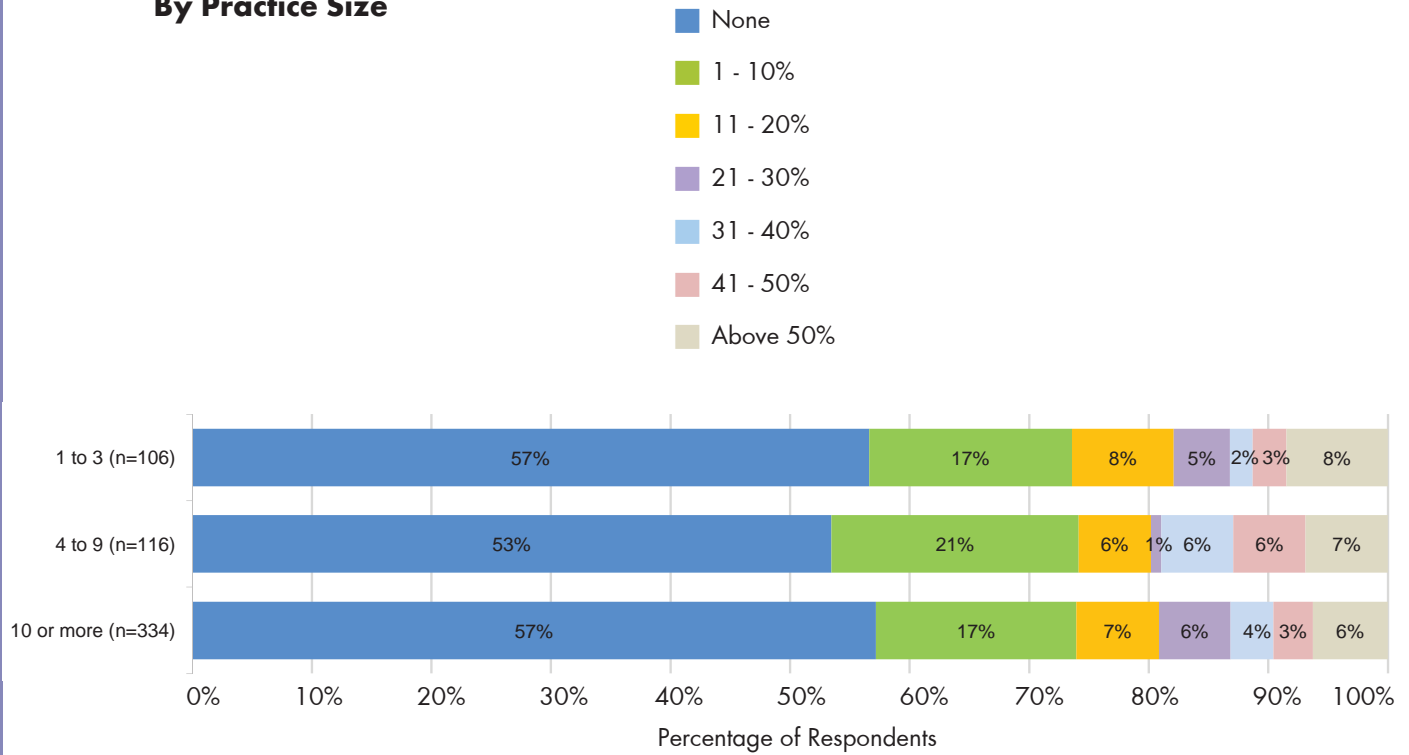
**Q2. What percent of your patients with BRAF mutant, unresectable or metastatic melanoma are you currently using ipilimumab for 1st line therapy?**

**By Geography**



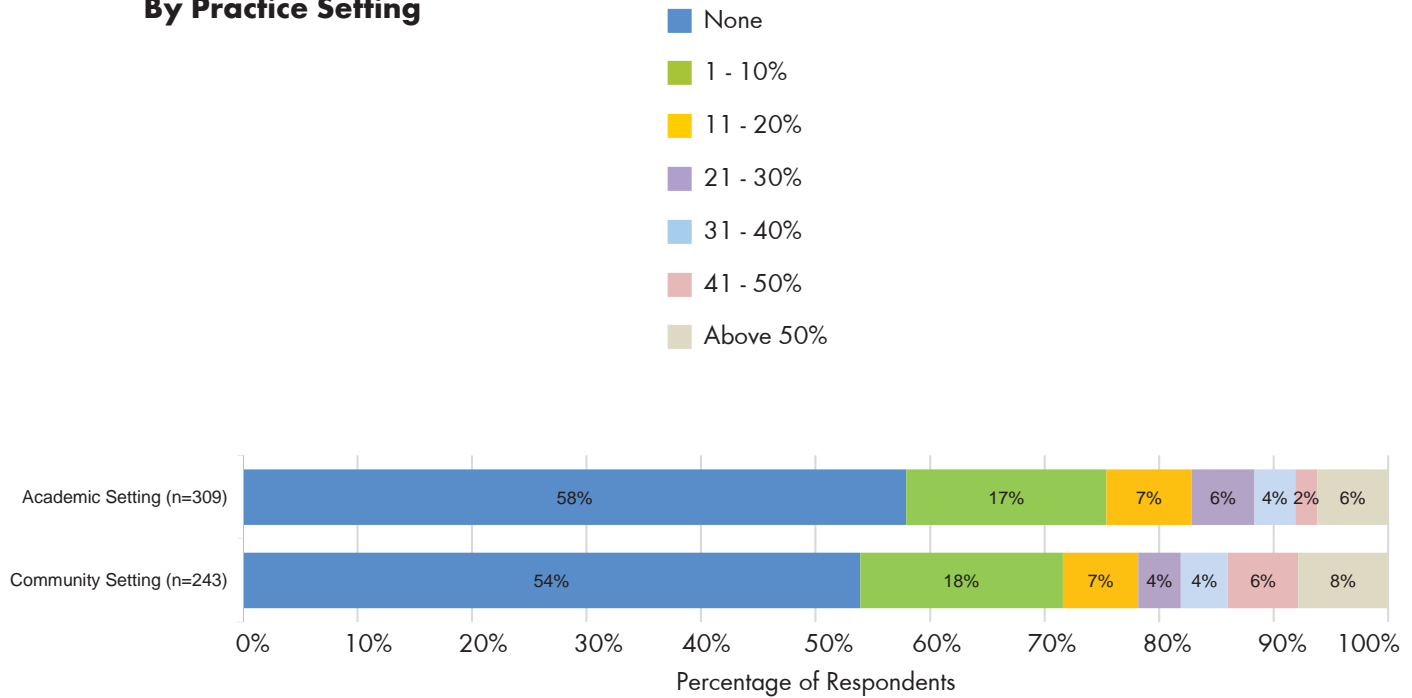
**Q2. What percent of your patients with BRAF mutant, unresectable or metastatic melanoma are you currently using ipilimumab for 1st line therapy?**

**By Practice Size**



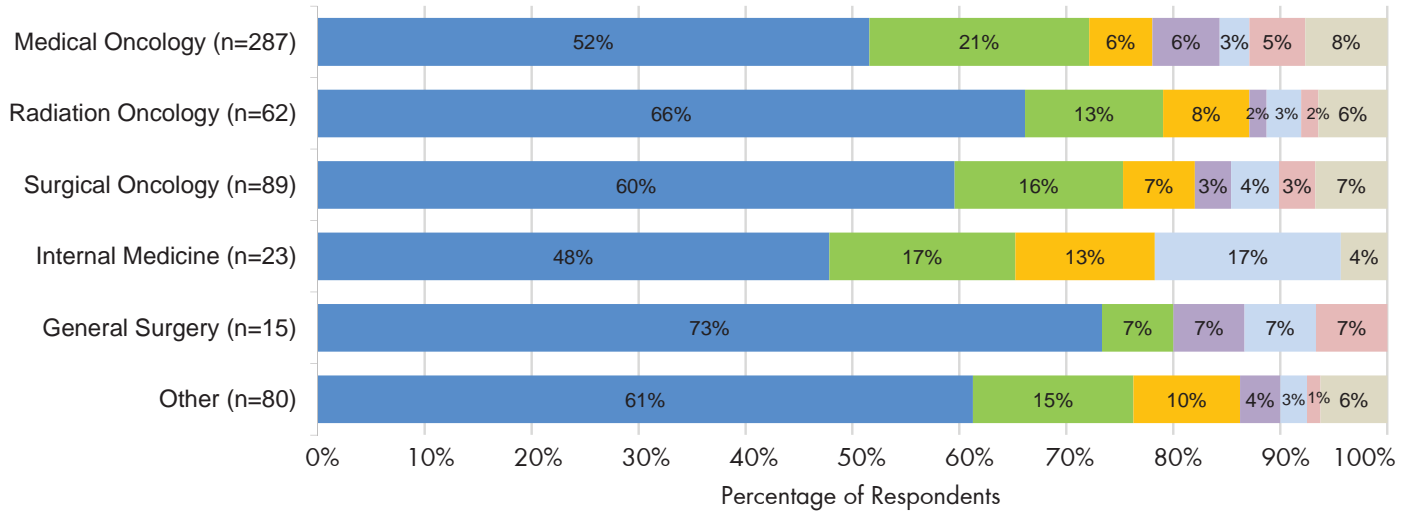
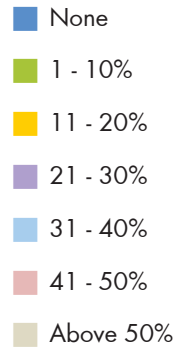
**Q2. What percent of your patients with BRAF mutant, unresectable or metastatic melanoma are you currently using ipilimumab for 1st line therapy?**

**By Practice Setting**

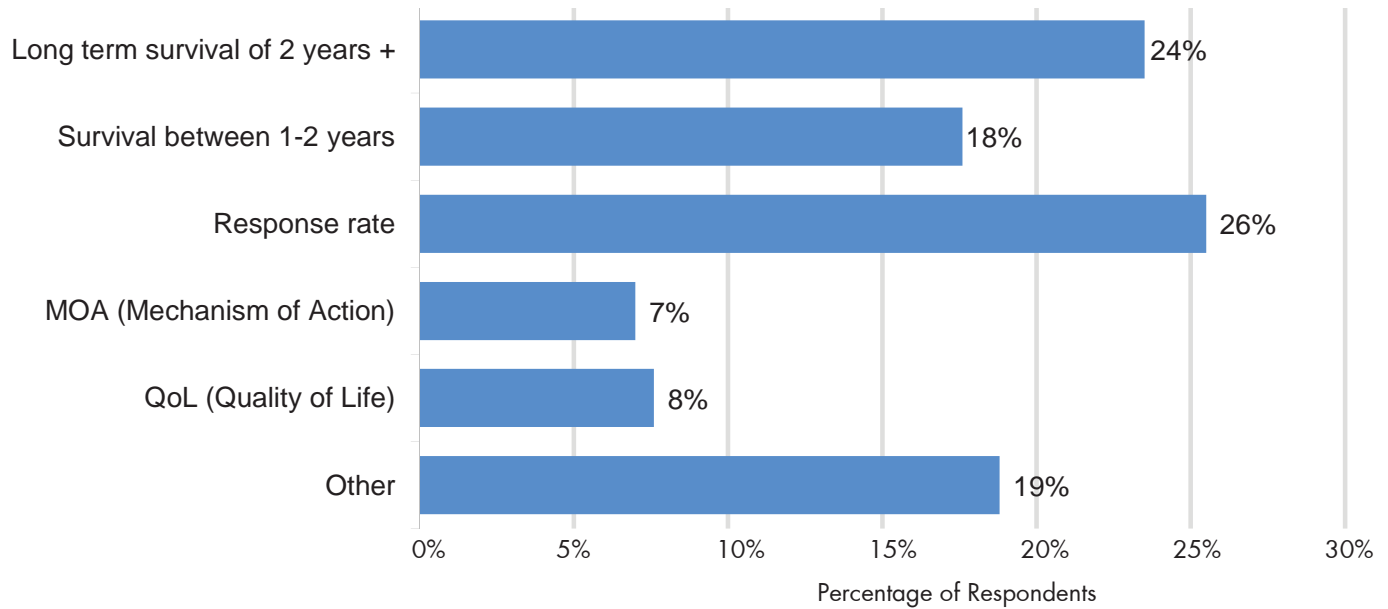


**Q2. What percent of your patients with BRAF mutant, unresectable or metastatic melanoma are you currently using ipilimumab for 1st line therapy?**

**By Specialty**



**Q3. What is your primary reason for choosing ipilimumab in the 1st line unresectable or metastatic melanoma setting (select one)? Please skip if you do not use ipilimumab in the 1st line unresectable or metastatic melanoma setting. (n = 341)**

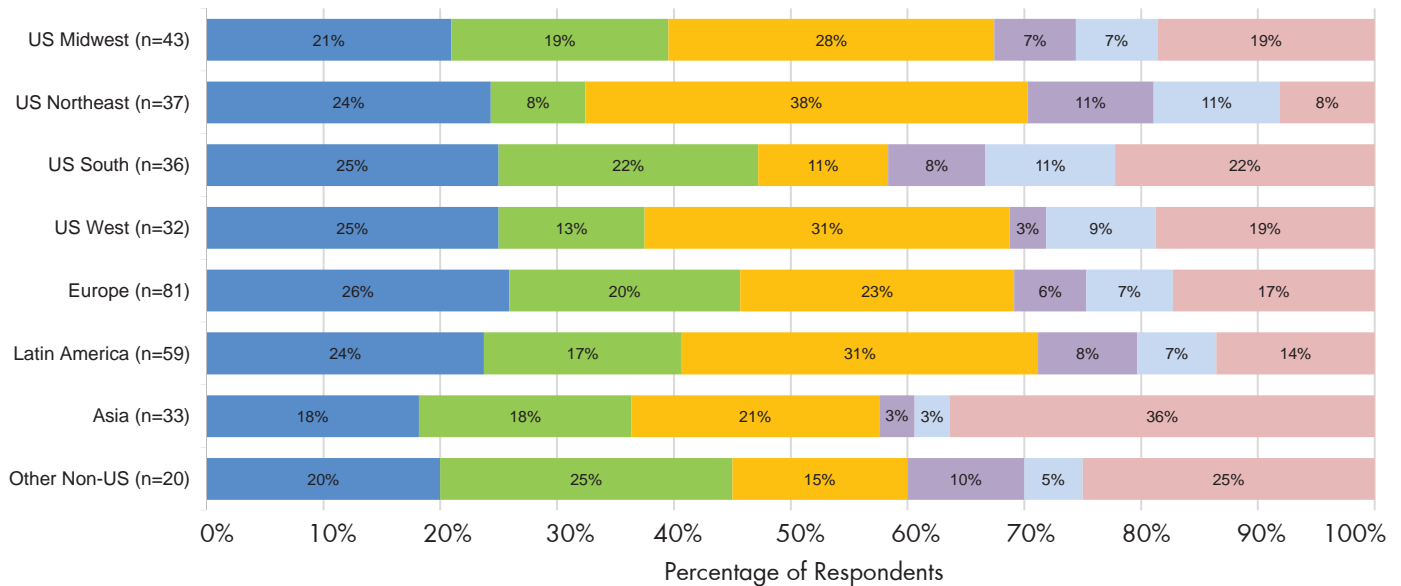




**Q3. What is your primary reason for choosing ipilimumab in the 1st line unresectable or metastatic melanoma setting (select one)? Please skip if you do not use ipilimumab in the 1st line unresectable or metastatic melanoma setting.**

**By Geography**

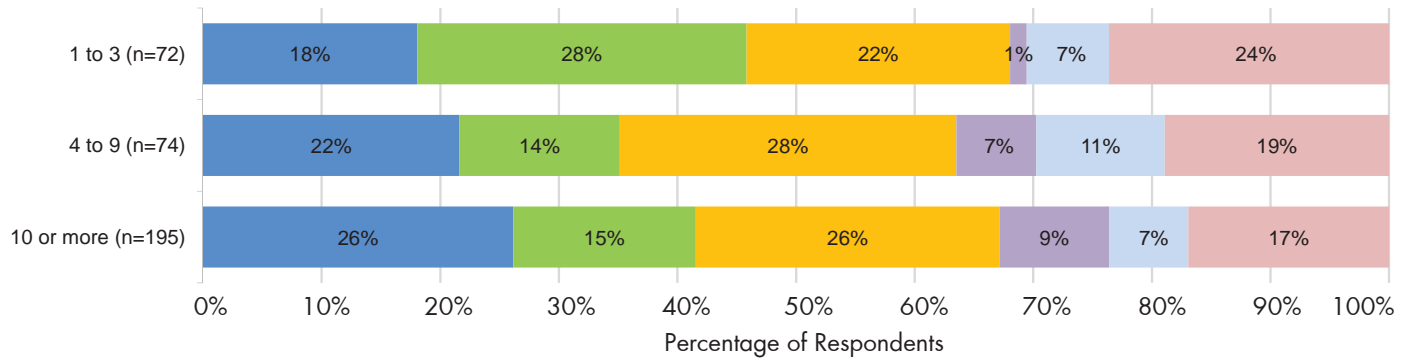
- Long term survival of 2 years +
- Survival between 1 - 2 years
- Response Rate
- MOA (Mechanism of Action)
- QoL (Quality of Life)
- Other



**Q3. What is your primary reason for choosing ipilimumab in the 1st line unresectable or metastatic melanoma setting (select one)? Please skip if you do not use ipilimumab in the 1st line unresectable or metastatic melanoma setting.**

**By Practice Size**

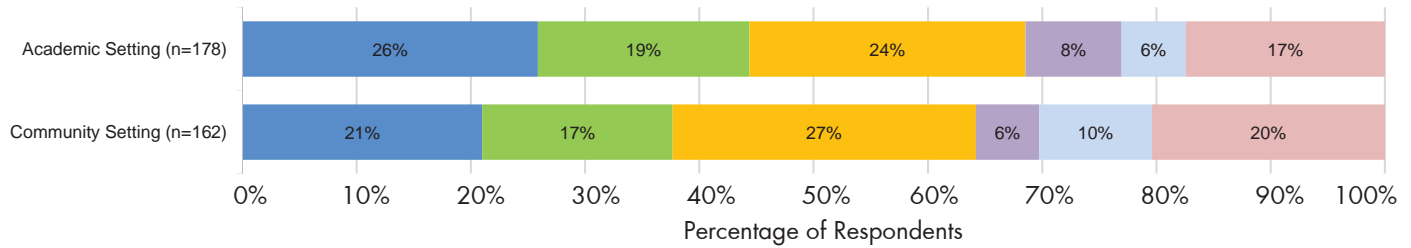
- Long term survival of 2 years +
- Survival between 1 - 2 years
- Response Rate
- MOA (Mechanism of Action)
- QoL (Quality of Life)
- Other



**Q3. What is your primary reason for choosing ipilimumab in the 1st line unresectable or metastatic melanoma setting (select one)? Please skip if you do not use ipilimumab in the 1st line unresectable or metastatic melanoma setting.**

**By Practice Setting**

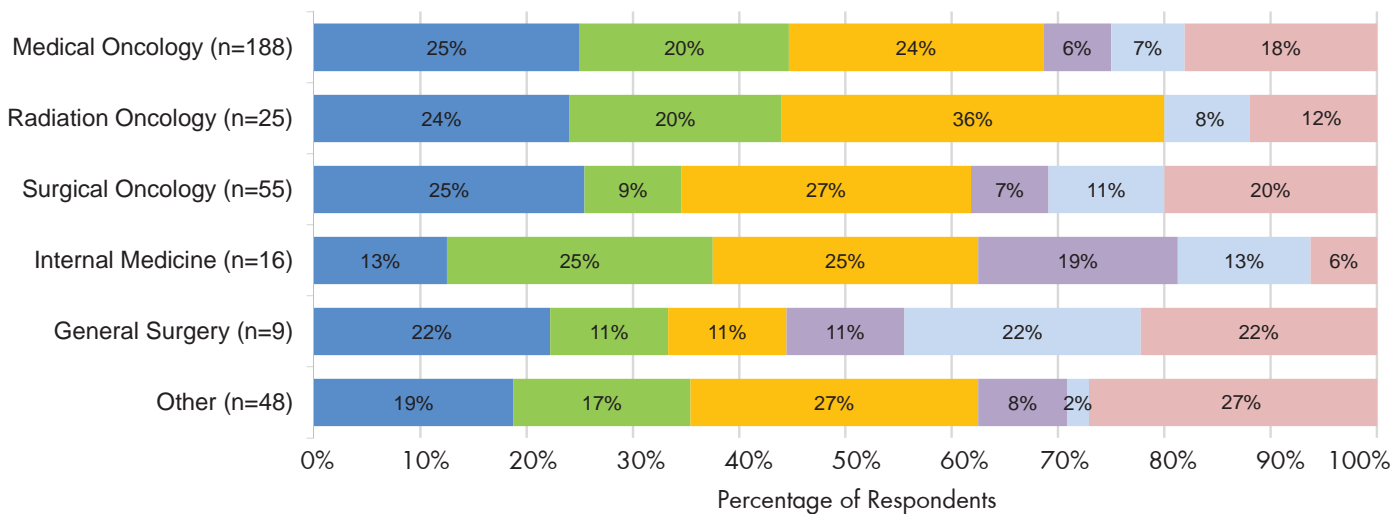
- Long term survival of 2 years +
- Survival between 1 - 2 years
- Response Rate
- MOA (Mechanism of Action)
- QoL (Quality of Life)
- Other



**Q3. What is your primary reason for choosing ipilimumab in the 1st line unresectable or metastatic melanoma setting (select one)? Please skip if you do not use ipilimumab in the 1st line unresectable or metastatic melanoma setting.**

**By Specialty**

- Long term survival of 2 years +
- Survival between 1 - 2 years
- Response Rate
- MOA (Mechanism of Action)
- QoL (Quality of Life)
- Other



**NCCN Trends™** is an analytics tool from the National Comprehensive Cancer Network® (NCCN®) that surveys how clinicians across the U.S. and around the globe are delivering cancer care. NCCN Trends™ surveys are designed to reach targeted populations that can include several thousand clinicians as a potential sample size. NCCN can also provide analytics on existing NCCN Trends™ and clinician demographic data sets, allowing for greater insight into oncology practice patterns.

To commission an **NCCN Trends™** survey, to discuss analytic and data services, or to request information on other NCCN programs and resources, please contact:

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**Senior Director, Business Insights**  
**215.690.0557**  
[maccracken@nccn.org](mailto:maccracken@nccn.org)

## **National Comprehensive Cancer Network® (NCCN®)**

The National Comprehensive Cancer Network® (NCCN®), a not-for-profit alliance of 21 of the world's leading cancer centers, is dedicated to improving the quality and effectiveness of care provided to patients with cancer. Through the leadership and expertise of clinical professionals at NCCN Member Institutions, NCCN develops resources that present valuable information to the numerous stakeholders in the health care delivery system. As the arbiter of high-quality cancer care, NCCN promotes the importance of continuous quality improvement and recognizes the significance of creating clinical practice guidelines appropriate for use by patients, clinicians, and other health care decision-makers. The primary goal of all NCCN initiatives is to improve the quality, effectiveness, and efficiency of oncology practice so patients can live better lives.



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