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### **Immunotherapy-induced vitiligo in metastatic melanoma**

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#### **Introduction**

Immune checkpoint inhibitors targeting the PD-1 pathway have become a cornerstone in the treatment of metastatic melanoma. Cutaneous immune-related adverse events are frequent, among which vitiligo-like depigmentation is particularly associated with melanoma and may reflect a strong antitumor immune response. We aim to report a case of immunotherapy-induced vitiligo occurring during pembrolizumab treatment for metastatic melanoma and to highlight its clinical relevance.

#### **Materials and Methods**

Case report.

#### **Results**

We report the case of a 56-year-old patient treated for plantar melanoma with lymph node metastasis. The patient was started on pembrolizumab at a dose of 200 mg every three weeks. After the fifth treatment cycle, the patient developed hypopigmented facial lesions, initially localized to the temporo-frontal region. With continued treatment, the lesions progressively extended to involve the entire face and acral areas. Dermoscopic examination revealed homogenous structureless areas with sharp borders as well as multiple perifollicular white dots and leukotrichia, without inflammatory or infectious features. The clinical course and temporal relationship with pembrolizumab supported the diagnosis of immunotherapy-induced vitiligo.

#### **Conclusions**

Melanoma-associated vitiligo represents a characteristic immune-related adverse event in melanoma patients treated with anti-PD-1 agents. Recognition of this manifestation is essential to avoid unnecessary investigations or treatment discontinuation. Importantly, vitiligo may represent a favorable prognostic marker reflecting an effective immune response against melanoma cells.

