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Targeted Therapy, Dabrafenib, Keeps Melanoma From Worsening Longer Than Chemotherapy [1]

Researchers found that the drug dabrafenib reduced the risk of melanoma worsening and the risk of death from the disease when compared with chemotherapy in a new, large study of melanoma. Dabrafenib is a targeted drug. This treatment targets the cancer's specific genes, proteins, or the tissue environment that contributes to cancer growth and survival. Specifically, dabrafenib targets a mutation (change) in the *BRAF* gene, which is known to fuel melanoma growth. Another drug recently used for melanoma, vemurafenib (Zelboraf), also targets the *BRAF* mutation.

The patients who participated in this study had stage III or IV melanoma that could not be removed with surgery and had not received any treatment before the study began. During the study, they received either dabrafenib or a standard chemotherapy for melanoma, the drug dacarbazine (DTIC-Dome). Melanoma growth slowed or stopped for 50% of the patients taking dabrafenib, compared with 6% of those receiving chemotherapy. Because the study is ongoing, researchers do not have final data; they estimate that the time it takes for the melanoma to worsen for patients taking dabrafenib will be a little more than two months longer than for the patients receiving chemotherapy.

The side effects of dabrafenib include sensitivity to the sun and other skin cancers. However the number of patients who developed these side effects was low. In fact, the side effects of dabrafenib in this study were less severe than previous research on vemurafenib has shown.

What this means for patients

"For three decades, we had no new treatments for melanoma that had spread to other parts of the body. Last year, ipilimumab (Yervoy) and vemurafenib were approved, and now dabrafenib could be approved," explained lead author and global principal investigator, Axel Hauschild, MD, Professor of Dermatology at the University Hospital in Kiel, Germany. "These findings represent another advance in the treatment of melanoma. Research on dabrafenib is ongoing, and it is currently only available in clinical trials. Talk with your doctor about all the treatment options for melanoma, including clinical trials."

Questions to Ask Your Doctor

- What stage of melanoma do I have? What does this mean?
- Will tests be needed to find out if there are any gene mutations involved in my melanoma?
- What are my treatment options?
- What treatment plan do you recommend? Why?
- Is targeted therapy a treatment option?
- What clinical trials are open to me?
- What are the possible side effects? How can they be managed?

For More Information

[Guide to Melanoma](#) [2]

[Understanding Targeted Treatments](#) [3]

[Skin Reactions to Targeted Therapies](#) [4]

[Managing Side Effects](#) [5]

Links:

[1] <http://www.cancer.net/targeted-therapy-dabrafenib-keeps-melanoma-worsening-longer-chemotherapy>

[2] <http://www.cancer.net/patient/Cancer+Types/Melanoma>

[3] <http://www.cancer.net/patient/All+About+Cancer/Cancer.Net+Feature+Articles/Treatments%2C+Tests%2C+and+Procedures/Un>

[4] <http://www.cancer.net/patient/All+About+Cancer/Treating+Cancer/Managing+Side+Effects/Skin+Reactions+to+Targeted+Therap>

[5] <http://www.cancer.net/patient/All+About+Cancer/Treating+Cancer/Managing+Side+Effects>