



## 2021 Annual Spring Virtual Meeting | Abstract Submission

### **Effects of intralesional Ipilimumab injections on metastatic RCC**

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A 58-year-old male patient diagnosed with stage 4 metastatic renal cell carcinoma presents to the clinic with persistent erythematous, scaly macular lesions on his scalp with associated pain, pruritis, bleeding, growth, and poor healing. Due to multiple failures to respond to systemic therapy, local intralesional Ipilimumab injections were attempted due to previous reported success of this therapy for metastatic melanoma. He was administered 0.3 ml of Ipilimumab 50mg/10ml intralesional, with 0.1 ml injected into each of 3 separate scalp lesions. The patient was next seen in the clinic for an 8 week follow up appointment at which point he had experienced total clearance of his scalp metastases in addition to a 30% reduction in size of his internal metastases. The patient also reported improvement in his shortness of breath with no need for supplemental oxygen. No further treatment for his metastatic RCC was given at this time. The patient ultimately received two more local injection of Ipilimumab but declined the fourth due to sustained reduction of his internal metastases. He reported no adverse effects from the intralesional Ipilimumab injections and was not utilizing any additional treatment regimens for his malignancy while undergoing this local treatment. The patient has since been followed by oncology for 6 years and at this time his metastases are limited to small asymptomatic lesions on his lung with no other tumor recurrence. This case introduces the potential role of intralesional injection of biologic agents and dermatological management in the treatment of widely metastatic RCC.