Objective

With a high incidence, low survival rates and limited availability of effective treatment, melanoma is one of the research priorities for health authorities and is considered as priority of public health (Figure 1). Optimizing the development of both academic and private research requires the availability on information on the characteristics of patients, clinical data and collected biological samples.

To meet this need, the French Multidisciplinary Melanoma Group (GMF-Mel) in collaboration with INCa (French National Cancer Institute), the CeNGEPS (National Centre for Healthcare Products Trial Management) and the CIC-BT0503 from Nantes hospital (Biotherapy Clinical Centre of Investigation) has set up in April 2011 a Clinical Investigation network for melanoma called the CeNGEPS-GMF-Mel Network. Nowadays, the network is named:

**RIC-Mel : network for Research and Clinical Investigation on Melanoma**

Aims of our network are to promote translational research, to optimize the achievements of clinical trials and to support basic research. To achieve these goals, the primary objective of our network was to set up a national database in order to make epidemiological studies and to be able to have the possibility for participating to international clinical trials.

Method

All French centres treating melanoma patients were contacted to participate. Each participating centre filled in the database its active list of patients, for which data are treated confidentially. Database is available on the Internet at any given moment but each participant has an exclusive access for his data. All patient included in the database had given its agreement to participate.

Collected data describes patient characteristics, disease history until death and if biological samples are available (Figure 2). Consequently, our database gives a permanently updated mapping of melanoma treated in France with the key information needed for any research projects.

Results

Nowadays, the RIC-Mel network includes 42 hospital’s dermatology centres and 6 cancer centres located all over the country (Figure 3). The RIC-Mel database was launched in march 2012 and has been approved by French Health authorities, both ethically and confidentiality of data. After just 3 years existence, more than 13,000 patients were included (Figure 4), with the following distribution : 70 % of primary stages and 30 % of loco-regional/metastatic stages.

**Industrial**

Four pharmaceutical companies have expressed interest in our database (BMS, Roche, GSK and AMGEN). These companies have signed a partnership agreement to support prospective inclusions of patients as well as regular updating of the clinical data. Thanks to these support, two research projects has been achieved.

In 2013, a first company used data from 6,000 patients prior to the registration of a targeted therapy and to realize medico-economic modelling. In 2014, another company used epidemiological data from 12,000 patients to estimate the proportion of patients meeting the selection criteria for a clinical trial. Recently, a new company expressed the wish to develop an e-CRF, only available on the database, for a post-ATU (Authorisation of Temporary Use) study. This e-CRF will be used to fill data specific to the study treatment, with patient characteristics and clinical data available in the database as well as for any other field.

**Institutional**

Several institutional projects were carried out in monocentric database for rational (review cases of discordant mutational status or clinical response of patient subgroups regarding biological parameters...) and feasibility studies. Recently, the population of patients with stage IV and unresectable stage III with a mutated B-Raf statu has been analysed at the request of French National Authority for Health (HAS).

The RIC-Mel database is linked to the clinico-biologico-radiological database MELBASE, for patients with metastatic melanoma stage IV or unresectable stage III, setting up by Saint Louis hospital (Paris).

**The RIC-Mel database is a pertinent way through which relevant clinical and biological information can be rapidly and accurately communicated for the development of melanoma research.**

**The RIC-Mel network provides to researchers key information for the epidemiological and development of melanoma research.**

Special thanks to the participating sites : CHU de Lyon, Centre d’Onco-dermatologie CHU-CRCC de Rennes, CHU de Nantes, CHU de Lille, Hôpital Saint Louis (Paris), CHU de Nice, CHU de Montpellier, CHU de Grenoble, CHU de Toulouse, Hôpital Bichat Claude Bernard (Paris), CHU de Nîmes, CHU de Besançon, Hôpital Saint-Antoine (CHU de Bordeaux), CHU d’Amiens, CHU de Limoges, Hôpital Ambroise Pare et Henri Mondor (Paris), Hôpital de La Rochelle, CH Saint Vincent de Paul (Lille), CHU d’Angers, CHU de Besançon, Hôpital Haut-Levêque (CHU de Bordeaux), CHR de Metz-Thionville, CHU d’Orléans, Hôpital Jacques Monod (le Havre), CHU de Nancy, CH Urology, CHU de Poitiers/Saint-Germain-en-Laye, CLCC Val d’Aurelle Paul Lamakere (Montpellier), CHU de Rennes, CHU de Paris, CHU de Sainte-Anne, CLCC et CHU de Bordeaux, CHU de Saint-Etienne, CLCC, Georges Friedlander.

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**RIC-Mel Network**

Coordinators
Pr B. Dréno and Ph C. LEBBE
Coordinating centre : CHU de Nantes
Steering Committee
Scientific Council
Participating centres : University and Regional Hospital Centres, Cancer Centres
Enrollment of patients and entry of data

**RIC-Mel data base**

**Figure 2 : RIC-Mel network key working**

**Results**

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