The MRA Annual Scientific Retreat & Patient Forum took place February 26 – 28, 2020 in Washington DC. The Patient Forum included more than 100 individuals registered to participate in-person and more than 700 registered to participate via live stream. The Scientific Retreat included 310 registrants with more than 8% traveling to attend from outside the United States (Australia, Canada, Denmark, France, Germany, Israel, Mexico, Netherlands, Spain, Switzerland, and the United Kingdom). Post-retreat evaluation surveys were distributed online using Survey Monkey and completed by 154 individuals (50% of registrants). While respondents had the option for anonymity, 55% provided their name. Agendas for the Retreat have been appended to this report.

<table>
<thead>
<tr>
<th>Registrants</th>
<th>Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Academic Researcher</td>
<td>203 (65%)</td>
</tr>
<tr>
<td>Federal Government Employee</td>
<td>14 (5%)</td>
</tr>
<tr>
<td>Industry/Pharma Representative</td>
<td>50 (16%)</td>
</tr>
<tr>
<td>Non-profit / Foundation Representative</td>
<td>25 (8%)</td>
</tr>
<tr>
<td>Patient or Patient Advocate</td>
<td>18 (6%)</td>
</tr>
<tr>
<td>Other</td>
<td>3 (2%)</td>
</tr>
</tbody>
</table>

“The scientific content of this meeting is outstanding. The talks really were of the highest quality. It is also one of the best run meetings I attend annually.”

– 2020 Evaluation Comment
Respondents were asked to rate aspects of the MRA Retreat on a scale of one (unsatisfactory) to five (outstanding), with the following responses received:

<table>
<thead>
<tr>
<th></th>
<th>Outstanding</th>
<th>Good / Fair</th>
<th>Unsatisfactory</th>
<th>Average (out of 5)</th>
<th>n</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Overall</strong></td>
<td>77% (100)</td>
<td>21% (27)</td>
<td>2% (3)</td>
<td>4.82</td>
<td>130</td>
</tr>
<tr>
<td><strong>Registration</strong></td>
<td>90% (117)</td>
<td>7% (9)</td>
<td>3% (4)</td>
<td>4.95</td>
<td>130</td>
</tr>
<tr>
<td><strong>Opening Reception</strong></td>
<td>61% (57)</td>
<td>31% (29)</td>
<td>8% (7)</td>
<td>4.66</td>
<td>93</td>
</tr>
<tr>
<td><strong>Scientific Sessions</strong></td>
<td>75% (96)</td>
<td>21% (27)</td>
<td>4% (6)</td>
<td>4.80</td>
<td>129</td>
</tr>
<tr>
<td><strong>Networking Roundtables</strong></td>
<td>55% (62)</td>
<td>35% (39)</td>
<td>9% (10)</td>
<td>4.37</td>
<td>112</td>
</tr>
<tr>
<td><strong>Poster Session</strong></td>
<td>53% (43)</td>
<td>36% (29)</td>
<td>10% (10)</td>
<td>4.47</td>
<td>81</td>
</tr>
<tr>
<td><strong>Dinner</strong></td>
<td>82% (80)</td>
<td>15% (15)</td>
<td>3% (3)</td>
<td>4.81</td>
<td>98</td>
</tr>
<tr>
<td><strong>Meeting Facilities</strong></td>
<td>71% (91)</td>
<td>27% (34)</td>
<td>2% (3)</td>
<td>4.91</td>
<td>128</td>
</tr>
</tbody>
</table>

Respondents were asked to write in what they liked most about the 2020 Retreat:

**Forty-six respondents indicated the science/talks as what they liked most about the retreat, with individual comments such as:**

✓ Listening to all the unpublished data on all of the science being done is just exhilarating.
✓ The scientific content of this meeting is outstanding. The talks really were of the highest quality. It is also one of the best run meetings I attend annually.
✓ The mix of basic science - clinical perspectives. The basic science presentations demonstrate what is coming next while the clinical presentations reinforce where the unmet needs persist - this is an important feedback loop.
✓ The possibility to hear ongoing, unpublished work, particularly on clinical studies. A broad set of topics are covered.
✓ Thought the focus on subtypes or rare melanomas was important and different.
✓ The scientific talks and the opportunity to talk about interesting science with a vibrant group of like-minded researchers. Great Science with world class colleagues.
✓ Very focused meeting with cutting edge science, one of my most favorite meetings to go to.

Thirty-six respondents indicated the opportunity for networking as what they liked most about the retreat, with individuals’ comments such as:

✓ Incredible networking opportunity within the melanoma field, and a space to learn about the latest in the field and connect with others who know the field well. Inspired regarding ideas that I can next start working on for research and I think especially involving early stage researchers from the dermatology space who have an interest in melanoma in this event can significantly affect the trajectory of one’s career and research productivity.
✓ Opportunities for discussion and networking - MRA really excels in creating these opportunities that lead to in-depth discussion. Opportunity to interact with world class scientists/clinicians.
✓ The opportunity to meet with colleagues - both clinical and researchers - this is an important mix.
✓ Meeting so many enthusiastic young scientists
✓ The “bridgers” between the research and practice communities that facilitate both the development of clinically relevant research and the fast integration of scientific advances by physicians.
✓ The breadth and depth of participants in the meeting and making new connections/collaborations with individuals I might otherwise not be connected to.

Five respondents indicated they liked the roundtables best, both due to better format from prior year in terms of sound/acoustics, and the opportunity to discuss areas of interest.

Other highlights called out by two or more individuals included the size of meeting (intimate/manageable), the diversity of participants and inclusion of patients, the industry roundtable opportunity for sponsors, and the opportunity to form collaborations.

Additional cross-cutting feedback on elements most favored by participants included the following:

✓ As usual, really great science and a strong community of people. Good balance of talks, posters, informal discussions, dinners, etc.
✓ Hearing about the most up-to-date findings, the trusting atmosphere that allowed researchers to share brand new information in a confidential environment.
✓ I particularly enjoyed the scientific session on acral melanoma (I may be a little biased as it is my area of research!) but I thought it was amazing that more attention is being paid to this disease. I also really enjoyed the opportunities to network, especially the young investigator / pilot awardee poster session and the Model Workshop dinner.

✓ Overall it was absolutely fantastic -- it's the perfect size, everyone is open to meet, and the patient video was important to kick off the event properly (it should ground all of us to know why we're here).

✓ The MRA scientific annual retreats are truly wonderful. The organization, the science, the special added value of making real life melanoma cases (like the movie at the opening session of the impressive patient) to scientists otherwise too far from the clinic - it makes us lab scientists really remember what we are working so hard for. The interaction with clinicians and advocates is very special, and getting to know better the MRA community.

✓ The MRA scientific retreat provides a rich environment to discuss science with colleagues and to get re-energized by meeting patient advocates and industry representatives.

Respondents were asked what MRA should do differently or better for 2021.
Responses provided have been grouped below by thematic domain:

**Poster Session:**

✓ The poster presenters did not get a chance to look at fellow poster presenters. Can you have a session during the poster session where everyone can present their research in 2 minutes? That way, everyone knows what research they are working on, even if they see the posters.

✓ Place poster board stands outside of the conference room so that everyone is able to take a look at them during the breaks/lunch.

✓ The poster session might be better attended if it was during breakfast or lunch.

✓ It would be great if the hotel had a larger room for the posters, as I thought it was pretty cramped this year.

✓ Poster attendance/focused time. Maybe some rapid sessions 10 mins/poster highlights.

✓ The poster session could be even longer - or allow posters to be up for longer when folks might be able to browse more between talk sessions (this may be a limitation of the physical location and where posters can be left out).

**Roundtables**

✓ Maybe just do roundtable discussions at lunch, because hardly anyone came to the breakfast one.

✓ The round table discussions were a little difficult to sign up for.

✓ There seemed to be a shortage of seats with tables.

✓ There were too many table topics for lunch. Fewer topics with multiple tables per topic would have been much less confusing.

✓ Encourage moderator to open the discussion to the other table participants.
✓ Have the roundtable perhaps more focused on something actionable to address the issue. Good discussion but was more a review of what is known and unknown for everyone at the tables.
✓ The lunch round table is a great idea, but it is not clear how they are supposed to be run. The lack of clarity made it difficult for people to choose and know how to participate.
✓ Separate Lunch/breakfast from the round table discussions as separate time slots
✓ Perhaps attendance at rounds tables could be open, and not restricted--although in practice it was easy to move between the tables--maybe chairs in circles rather than be limited to the table size.

Science Lectures/ Panels
✓ Most presenters this year seemed to discuss more basic research and some translational but less clinical research than previous years, nice to have a good mix.
✓ Allow more time for questions/discussions and longer breaks to allow networking (mentioned 3 times).
✓ A mixed panel of clinical and basic scientist for the final discussion.
✓ Have different disciplines from basic, to clinical, to epidemiology - also a panel discussion would be great.
✓ The patient opening was heart breaking and perfect to focus audience on what matters. General program was perhaps not as strong as in prior years. Sharma Allison White super strong talks for example. However, no microbiome, and no memory persistent talks (TCF7) made this less current to state of field in a clinically relevant manner.
✓ I know the focus is on early research but I think have a few more clinical presentations would be highly appealing. Need more clinical discussions. (mentioned 5 times),
✓ You might want to consider including a session on cellular therapies as this is a clear upcoming topic in melanoma after ICB failure with promising clinical results.
✓ Instead of one long session (e.g. on acral melanoma) a session with many short (10 minute) exciting research results/plans presentations.
✓ New development in translational research i.e., biomarkers, validated assays - preclinical models to support combination therapy agents included in the main meeting not the close door workshop

Prevention
✓ More dermatology involvement--maybe a separate session?
✓ Expand sessions or add talks on prevention and early detection. (mentioned 4 times)

Diversity/Inclusion
✓ I believe that more diversity is needed if we are really to achieve the goal of ending melanoma suffering - I may not have seen all the attendees but I never interacted with anyone else based in Latin America or Africa. These researchers are fundamental and are very good investigators.
I believe they should be included in future editions, and perhaps a space be given for them to talk about diversifying research and the particular obstacles they face in their melanoma research.

✓ Bigger session for women in melanoma research.
✓ I would like to see MRA to continue to build on efforts to increase diversity/inclusion. One opportunity for this could be to select session chairs who are at the Assistant Professor level, perhaps those who have submitted high quality grants but may not have been awarded. I noticed many of the chairs were very established- selecting early career candidates may be a way to increase engagement and build a broader network.

General Cross-Cutting Recommendations:
✓ Create more opportunities for the attendees to interact (mentioned 4 times).
✓ More industry-academic forums of interaction.
✓ More on adjuvant trials. More on prevention.
✓ MAYBE facilitate non-science connections i.e. industry w/advocacy.
✓ Offer CME/MOC credit.
✓ More programmatic interactions between researchers and journal editors.
✓ More small tables or a better way of splitting up the group according to interests.
✓ Themes should look more into the future.
✓ More or longer networking sessions and/or planned switching during these sessions so that individuals can attend more than one session (especially the ones only offered once) and hear what transpired previously and add their input.
✓ Perhaps a talk from patient advocate in the main session, as I was not able to attend the patient symposium on Wednesday due to flight availability but I did speak with several advocates during the meeting. I think it would be valuable for everyone to hear from the advocates during the plenaries.
✓ As a young/mid-career investigator I do feel that there is a definite barrier to the senior faculty. It would be nice to be able converse with them about their research/our research in an informal way but the typical social barriers exist. To be honest, the senior faculty rarely go out of their way to get to know other investigators that are not at their specific/select institutions.

Retreat Length / Dates / Facility / Format
✓ Extend the meeting by half a day or a day.
✓ Conference hotel is not made for discussions afterwards due to absence of fine social facilities.
✓ Consider shifting times later to accommodate west coasters if possible.
✓ Holding the retreat in February can be difficult because of weather.
✓ The meeting facilities were wonderful, I just marked it down because it was difficult to find a location for private conversations between sessions. If you went up 2 floors there were a few couches, but otherwise there wasn't anywhere close.
✓ It feels too short but there are pros and cons of a compact meeting. Extending the dinner or providing more of a formal pre-dinner happy hour might increase time for networking.
Consider having the last dinner be buffet and also people to wander around. With 300 people at the meeting, you get fixed in place and there would be more interactions with buffet.

Consider simultaneous sessions. This would really allow the investigators to look into a topic in depth. Some of the sessions are not as relevant to certain investigators, so at least one simultaneous session time would be good.

Having some concurrent sessions might be of value - the meeting has gotten pretty big, and it seems there is opportunity to have a more basic science session and more clinical session (or melanoma subtypes?) that could allow more speakers.

Industry Roundtable

The Industry Roundtable is a small, invite-only meeting within the broader Retreat. Each industry sponsor of the retreat is provided one seat at the Roundtable. Other attendees include FDA and NCI representatives, academic researchers, and MRA staff. Input from sponsors (as of December 2019) and key academic scientific advisors was solicited in December 2019 to develop the 2020 focus of the conversation on “Breaking the Barrier: Beyond 50% Long-term Survival for Advanced Melanoma.”

The 2020 Industry Roundtable was chaired by Drs. Patrick Hwu (UT MD Anderson) and Marc Hurlbert (MRA). Approximately 40 individuals participated in the 2020 Industry Roundtable and feedback on this evaluation was received by 14 attendants.

Among respondents to the survey, when asked how they would rate importance of the topic covered at Industry Roundtable, 57% marked Outstanding, 35% marked between Outstanding and Good, and 7% indicated Good. In terms of overall rating of the Roundtable, 42% marked Outstanding, 35% marked between Outstanding and Good, and 3% indicated Good.

Respondents were asked what they enjoyed most about the Industry Roundtable and provided the following responses:

- Two respondents indicated the networking opportunity was what they enjoyed most about the Industry Roundtable, two indicated the great forum for discussion, and an additional two indicated they enjoyed the opportunity to hear/interact with regulators/FDA the most.
- Individual responses also included:

  ✓ Acknowledgement from the FDA that there are potential pathways for accelerated approval for populations who have poor prognoses.
  ✓ FDA input was important to hear...and there are not other options to interact with regulatory agency leadership in this manner.
Respondents were asked what MRA could do differently or better in the future for the Roundtable:

- Develop a more structured approach to the event, as in past years, may help with avoiding the dead spots in the discussion.
- Hard to do, but would be nice if could identify concrete ways to have industry/investigators move forward.
- Signage was confusing and some participants went to the other roundtables instead of the Industry Roundtable.
- The agenda should include topics suggested by Industry representatives in the weeks before the meeting.
- Would be great to come up with strategies about how to improve the engagement and communication by industry in the discussion. Maybe short statements by selected representatives at the beginning about what they see as the critical opportunities and barriers to galvanize discussion?
- Good to see people, not sure it moved anything forward.

Young Investigators’ Breakfast

Each year MRA hosts a Young Investigators’ (YI) Breakfast open to all past Young Investigators supported by MRA along with supporting donors. The 2020 breakfast featured a talk on “The Science of Mentorship: Optimizing Your Mentoring Practices” by Kelly Diggs-Andrews, PhD.

Approximately 75 individuals participated in the 2019 YI Breakfast, including 35 who completed the post-retreat evaluation.

When asked to rate the importance of the topic chosen for the young investigator breakfast as it relates to their work, responses were: 23% Outstanding, 34% between Outstanding and Good, 34% Good and 9% between Good and Unsatisfactory. Overall rating scale with Outstanding as 5 and Unsatisfactory as 1 showed an average score of 3.7.

When asked to rate their experience at the young investigator breakfast, 17% chose outstanding, 29% between Outstanding and Good, 34% as Good, 17% between Good and Unsatisfactory, and 3% Unsatisfactory; with an overall rating of 3.4.
Respondents were asked what they enjoyed most about the YI Breakfast:

- 13 respondents indicated that what they liked best was the topic and/or speaker – many stating that the topic was highly relevant to their work and an important topic.
- 9 respondents indicated they liked the networking opportunity best, which provided a chance to meet/network with other YIs.

Respondents were asked what MRA could do differently or better in the future for the YI Breakfast:

- 10 respondents indicated need for improvement related to the speaker and/or topic, though more common was like of the topic, but dissatisfaction with the speaker and particular comments noting need for “More engaging speaker,” “More interactive topics.”
- 8 respondents indicated a desire to improve the networking opportunity, with particular suggestions including two requests for self-introduction session at the beginning, and other suggestions for more time to network/mingle.
- One respondent felt the session is frequently more geared to the U.S. environment/Scientific Requirements, and another respondent suggested grouping tables by domains of interest among YIs.

When asked what topics respondents would like to see covered at future YI Breakfast, the following responses were offered:

- 5 individuals suggested a focus on grant writing, with additional individual responses as follows:
  - How to attract sponsors (Vs mentors) to make our work more visible.
  - How to develop one's scientific identity, and to "cut the umbilical cord" from the postdoc mentor’s research topics.
  - How to get R01 when paylines are <10%. How to manage a lab. How to diversify research program.
  - More extensive/deeper coverage of Mentorship networking promoting/communicating our science
  - Navigating career path as a young investigator
  - Networking session with editors (mentioned 2 times).
  - Perhaps a presentation by an exemplary researcher, with practical advice.
  - Starting your own company.
  - Strategies for choosing institutes and study sections for grant applications
  - Working effectively with pharma.

Melanoma > Exchange Advocate Forum

The MRA Melanoma > Exchange Patient & Advocate Forum took place February 26th, the day prior to the Scientific Retreat. The event brought together more than 100 people in-person from across the United States, with an additional 700 individuals registered via live-stream, of which more than 100 participated day-of in live stream. All sessions were recorded in full, and links were sent to all registered participants the following week. (Data below come from 62 individuals, 41 on retreat survey + 21 on Patient Forum Only Survey – listened day of)
### What was the most useful information recipients learned during the forum:

Thirteen participants cited the Looking Beyond 2020 session as the most useful information. Examples of specific comments include:

- ✓ Information on promising new tests, therapies, and approaches to treatment.
- ✓ Liked the treatment panel with Tony Ribas. It was great being able to ask questions from doctors of that caliber.
- ✓ Relevant perspective on how newer treatments are working and how researchers are trying to fill the gaps.
- ✓ Hearing Dr. Goff speak about their 97% TIL growth vs lower rates in other labs and everything else she said.

Five participants cited the Models session as the most useful information, and examples of comments include:

- ✓ How animals help advance research. Always thought was cruel, but it was nice hearing how much they contribute and how well they are cared for.
- ✓ Appreciated finally getting to understand the usefulness of zebrafish model in melanoma.
- ✓ The animal models and using zebra fish versus mice was quite interesting to me. I quite enjoyed listening to her “peek behind the curtains” of what they seek in research models and what they can learn.

Two participants specifically called out the Melanoma Landscape as most useful while 3 participants commented on Hope or Hype as most useful.

Examples of additional general comments received include:

- ✓ The willingness of the patients and families to acquire new knowledge and try to keep up with the new scientific trends and treatment options, like "Citizen Scientists" or "Patient Scientists."
- ✓ I have had several people recently asking for my opinion and I’m still fairly new to this space so having an easily accessible resource to send people to is a game changer.
Meeting the Drug Rep that markets my drug, speaking with oncologists personally and hearing some of the information confirmed to me about the treatments I am currently taking.
✓ I really liked patients being able to ask questions.
✓ That researchers are trying to move needle when it comes to rare melanoma. Normally ocular melanoma feels like afterthought, not this year.
✓ Information on clinical trials
✓ SO MUCH. . . SG Adams ideas on better synergy with other advocacy groups (sunscreen on walks!) and promoting shaded leisure / play areas etc.! Dr Grossman's discussion of proteomic testing. Learning more about MRA - my first event! Meeting other advocates and learning about the landscape.... EVERYTHING!
✓ The entire day was once again fantastic. Loved the 'tough love' of the hope versus hype session. We've made progress, but not at all done yet.

What respondents liked most about the Forum – examples of responses provided:

✓ Informal atmosphere.
✓ Loved the polling at the beginning; always great to have the opportunity to catch up with old friends and meet new people.
✓ I thought the hope or hype talk was extremely interesting. I've found myself thinking about the concept of "'clickbait'" research many times since last Wednesday. This isn't a term Liz Szabo actually said but upon learning of the huge increase in extremely positive words being used in research that can lead to hype instead of truth, that's essentially what it's become.
✓ I adored hearing from Surgeon General Adams himself how valuable prevention and early detection is. It's encouraging to hear people who have dedicated their lives to medicine and are quite literally world changers placing value upon the things I care about most. (Dr. Adams mentioned as highlight 5 times)
✓ I enjoyed seeing so many familiar faces and meeting new people! The MRA is amazing and sure knows how to host such an important event! Cody is clearly hardworking and extremely welcoming and professional! Great job to all!
✓ "Melissa Walling, knowing all the hard work and how appreciative this patient and all patients are.... is priceless. Should make this work worthwhile when you can put a face, a beautiful face to all your efforts."
✓ LEARNING! Exposure to doctors and researchers and opportunity to ask questions that I can't ask my mother's doctor in short visits. Hearing other approaches and becoming better informed so we can make better life saving and quality of life decisions. Meeting the community after a long-time fighting battles for my mom alone. THANK YOU.
✓ I enjoyed networking and speaking with others. (mentioned more 5 times)
✓ The content was delivered in a very accessible way for us who aren't scientists. I think that's key for those of us going through treatment, as well as on the fund-raising side as we explain to others what we are working on and where the funds are going.

Honestly, some of the best information I learned was just the resources the MRA has for patients/family of patients.
What should MRA do differently or better – examples of responses provided:

✓ I love the format of the forum. I would suggest topics within the scope of scientific or education outreach and a discussion on common issues experienced by patients during their journey.
✓ Hype or Hope was an excellent topic, but could have used broader representation particularly from physicians who focus on palliative care and communication.
✓ Create more ways for us to get to know each other. Provide attendance list to facilitate contacts after the event. (mentioned 4 times)
✓ MORE OF THEM:)) I would really love to see a follow-up mechanism to ask more questions of the panel. I wrote to Cody about this. Like a "Ask Me Anything" video or audio session that could be uploaded for those who did or did not attend. The quality of information that is available is so poor and this forum was so HIGH LEVEL - it should be updated and expanded throughout the year - for example I’d like to hear updates on Dr. Moon's vaccine, on Dr. Beasley's neoadjuvant trials etc., etc. I'm sure the panelists enjoy sharing their work in this format and would be amenable:).
✓ I thought you guys did a fantastic job with the webinar end. Excellent streaming service... plus seeing the interactive answers as they popped up on screen! It was better than most other webinars I’ve streamed in the past two years!
✓ More discussion on prevention.
✓ Maybe offer those that register, make a private Facebook group and stream it via the group. Would be interesting to see comments and questions “live” instead of the texting option.
✓ Continue livestream and ability for remote participants to send in questions.

Questions Posed on Survey to only Web-Streamed Participants (Completed by 21 Individuals):

- Could you clearly see and hear all of the presentations through the livestream?
  13 responded, with 6 stating “Usually” and 6 selecting “Always”
- Were you able to download materials for livestream with link provided?
  13 responded, with 10 stating “Yes” and 2 selecting “No”
- Would you recommend participating in an MRA future event via livestream?
  13 responded, with 12 stating “Definitely Would” and 1 selecting “Probably Would Not”
## AGENDA

**JW Marriott Washington DC, 1331 Pennsylvania Avenue, NW**  
WiFi Network: JWMarriott_CONFERENCE  
Password: MRA2020

### Wednesday, February 26

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>7:30am-5:00pm</td>
<td>Grant Review Committee Meeting (by invitation)</td>
<td>Salon I</td>
</tr>
<tr>
<td>12:00-5:30pm</td>
<td>Melanoma Patients, Advocates &amp; Foundations Forum</td>
<td>Salon IV</td>
</tr>
<tr>
<td>4:00-8:00pm</td>
<td>Retreat Registration open</td>
<td>Foyer of Penn Avenue Terrace</td>
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<tr>
<td>6:00-7:30pm</td>
<td>Opening Reception</td>
<td>Penn Avenue Terrace</td>
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### Thursday, February 27

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>6:30am-6:00pm</td>
<td>Registration</td>
<td>Foyer of Salon III &amp; IV</td>
</tr>
<tr>
<td>7:00-8:15am</td>
<td>General Breakfast</td>
<td>Salon II</td>
</tr>
<tr>
<td>7:00-8:15am</td>
<td>Young Investigators Breakfast (by invitation)</td>
<td>Salon I</td>
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<tr>
<td>8:30-8:45am</td>
<td>Opening Remarks Day 1</td>
<td>Salon III &amp; IV</td>
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<td></td>
<td>Michael Kaplan, MRA President &amp; CEO</td>
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<td></td>
<td>Marc Hurlbert, MRA Chief Science Officer</td>
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<td>Grace Wenzel, Patient Advocate</td>
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<tr>
<td>8:45-9:15am</td>
<td>Lecture</td>
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<td></td>
<td>Jedd Wolchok, Memorial Sloan Kettering Cancer Center: Maintaining innovation: New directions in melanoma research</td>
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<tr>
<td>9:15-11:25am</td>
<td>Session 1: Novel therapeutic approaches for treating melanoma</td>
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<td></td>
<td>Chair: Ronit Satchi-Fainaro, Tel-Aviv University</td>
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<tr>
<td>9:15-9:40</td>
<td>Thorsten Mempel, Massachusetts General Hospital: CARMA1 in control of regulatory T cell function in melanoma</td>
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<tr>
<td>9:40-10:05</td>
<td>Elaine Fuchs, The Rockefeller University: How skin stem cell biology can guide us to the basis for tumor relapse</td>
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<tr>
<td>10:05-10:20</td>
<td>Break</td>
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<tr>
<td>10:20-10:40</td>
<td>Nick Huntington, Monash University: Therapeutic modulation of natural killer cell response to growth factors in melanoma</td>
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<tr>
<td>10:40-11:00</td>
<td>Rizwan Haq, Dana-Farber Cancer Institute: Melanoma selective cytotoxicity achieved through a novel switchable kinase inhibitor</td>
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</table>
11:00-11:25  **Richard White, Memorial Sloan Kettering Cancer Center:** Why tumors appear where they do: positional memory in the pathogenesis of acral melanoma

11:25-11:55am  **Lecture**
**Padmanee Sharma, University of Texas MD Anderson Cancer Center:** From the clinic to the lab: Investigating response and resistance mechanisms to immune checkpoint therapy

11:55am-12:05pm  **Transition to lunch**

12:05-1:05pm  **Networking Lunch and General Roundtables #1..........................................................Salon I & II**
*Seating at roundtables limited by prior registration. Additional tables with open seating available for general networking and/or scheduled meetings.*

**Topics are:**
1. Acral melanoma;
2. AI/imaging/diagnostics;
3. Brain metastasis and leptomeningeal;
4. Cell therapy (ACT, TIL, etc);
5. Clinical trials: multi-site and patient recruitment;
6. Founding your own company;
7. IO-understanding immune-related adverse events;
8. Microbiome;
9. MRA dermatology fellows;
10. Neoadjuvant and adjuvant treatments;
11. Overcoming resistance to IO/targeted therapies;
12. Pediatric and young adult melanoma;
13. Predictive, diagnostic & prognostic biomarkers;
14. Prevention & early detection;
15. Role of genetics, genomics, & epigenomics;
16. Single-cell technologies sequencing and imaging;
17. Targets: finding/validating new targets & drug discovery;
18. Treatment: combos, sequencing, and duration of treatment;
19. Tumor microenvironment;
20. Vaccines & intrallesional therapies.

12:00-2:00pm  **Scientific Advisory Panel meeting and lunch (by invitation). .........................The Senate Room**

1:05-1:20pm  **Transition to general session room (Salon III & IV)**

1:20-2:30pm  **Session 2: Understanding melanoma metastasis**
**Chair: Ashani Weeraratna, Johns Hopkins University**

1:20-1:45  **Eva Hernando, New York University:** Melanoma-secreted amyloid beta suppresses neuroinflammation and promotes brain metastasis

1:45-2:05  **Florian Karreth, Moffitt Cancer Center:** MicroRNA deregulation in melanoma progression

2:05-2:30  **Carmit Levy, Tel Aviv University:** Identification of novel regulators of melanoma brain metastasis

2:30-2:50pm  **Break**

2:50-4:00pm  **Session 3: Special Focus - Acral Melanoma**
**Chair: Nick Hayward, QIMR Berghofer Medical Research Institute**

2:50-3:15  **Boris Bastian, University of California, San Francisco:** The genetics of acral melanoma
3:15-3:35  Phyu Aung, University of Texas MD Anderson Cancer Center: Acral melanoma – histologic and molecular studies

3:35-4:00  Ruth Halaban, Yale University and Aaron Newman, Stanford University: Recurrent patterns of structural variation promote tumorigenesis in acral melanoma

4:00-4:30pm  Lecture
James Allison, University of Texas MD Anderson Cancer Center: Immune checkpoint blockade in cancer therapy: Historical perspective, new opportunities, and prospects for cures

4:30-4:35  Closing Remarks Day 1
Kristen Mueller, MRA Senior Director, Scientific Program

4:45-6:15pm  Young Investigator, Dermatology Fellow, and Pilot Awardee Poster Session
All retreat attendees encouraged to attend

4:45-5:45pm  ACS-MRA grant awardees reception (by invitation).................The State Room

6:30-9:00pm  Reception and Dinner................................................Zaytinya*
Dress: Casual
701 9th St NW
Reception: 6:30-7:00pm; Dinner 7:15pm

* 6:00-7:00pm: Transportation provided to Zaytinya; Shuttles will depart from the circular drive outside the hotel lobby. Upon exiting the hotel, bear to your right and shuttles will be stationed in the breezeway between the hotel and art gallery on the property.

Friday, February 28

6:30-10:00am  Registration open............................................................Foyer of Salon III & IV

7:00-8:30am  Networking Breakfast and General Roundtables #2................................Salon I & II
Seating at roundtables limited by prior registration. Additional tables with open seating available for general networking and/or scheduled meetings. Topics are:

1. Clinical trials: Benefits and impediments to Phase 1 trials;
2. Founding your own company;
3. Sex-related biology and melanoma;
4. Heterogeneity and phenotype switching;
5. IO – understanding immune-related adverse events;
6. Melanoma metastases – dormancy;
7. Overcoming resistance to IO/targeted therapies;
8. Predictive, diagnostic & prognostic biomarkers;
9. Prevention & early detection – melanoma initiation;
10. Role of genetics, genomics & epigenomics in melanoma;
11. Surgery: current and emerging methods of surgical treatment;
12. Targets: finding/validating new targets & drug discovery;
13. Tumor metabolism and metabolomics;
14. Tumor microenvironment;
15. Understanding the biology of in-transit melanoma;
16. Uveal & mucosal melanoma;
17. Women in melanoma research & care.
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<tr>
<th>Time</th>
<th>Event</th>
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<tr>
<td>7:00-8:30 am</td>
<td>Industry Roundtable Breakfast (by invitation)</td>
<td>Salon I</td>
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<td>8:40-8:45 am</td>
<td>Opening Remarks Day 2</td>
<td>Salon III &amp; IV</td>
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<td>8:45-9:15 am</td>
<td>Lecture</td>
<td>Salon III &amp; IV</td>
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<td><strong>Christian Blank, Netherlands Cancer Institute:</strong> Neoadjuvant approaches for treating melanoma</td>
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<td>9:15-10:25</td>
<td>Session 4: Understanding melanoma initiation to improve patient outcomes</td>
<td>Salon III &amp; IV</td>
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<td><strong>Chair:</strong> Sheri Holmen, Huntsman Cancer Institute at University of Utah</td>
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<td>9:15-9:40</td>
<td>Chengyu Liang, University of Southern California: Molecular mechanisms of UV-induced mutagenesis in melanoma</td>
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<td>9:40-10:00</td>
<td>Eleonora Leucci, Katholieke Universiteit Leuven: LncRNAs as modulators of protein synthesis rewiring in melanoma</td>
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<td>10:00-10:25</td>
<td>Lorenz Studer, Memorial Sloan Kettering Cancer Center: Lineage programs establish oncogenic competence in human pluripotent stem cell and zebrafish model of melanoma</td>
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<td>10:25-10:45</td>
<td>Break</td>
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<td>10:45-11:30</td>
<td>Session 5: Novel approaches for diagnosing melanoma and assessing therapeutic efficacy</td>
<td>Salon III &amp; IV</td>
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<td><strong>Chair:</strong> Christin Burd, Ohio State University</td>
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<td>10:45-11:05</td>
<td>Ashish Kulkarni, University of Massachusetts, Amherst: Nanoscale approaches for targeting tumor-associated Macrophages</td>
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<td>11:05-11:30</td>
<td>Joann Elmore, University of California, Los Angeles: The importance of applying AI to assess histologic features to improve melanoma diagnosis</td>
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<td>11:30am-12:15pm</td>
<td>Panel Discussion: Maintaining the momentum: New directions in melanoma research</td>
<td>Salon III &amp; IV</td>
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<td><strong>Moderator:</strong> Michael Atkins, Georgetown University, Chair of MRA Medical Advisory Panel</td>
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<td>- Susan Swetter, Stanford University</td>
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<td>- Suzanne Topalian, Johns Hopkins University, Chair of MRA Scientific Advisory Panel, MRA Board of Directors</td>
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<td>- Richard Carvajal, Columbia University</td>
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<td>- Marisol Soengas, Spanish National Cancer Research Center</td>
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<td>- Lorenzo Cohen, University of Texas MD Anderson Cancer Center</td>
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<td>12:15pm-12:30pm</td>
<td>Closing Remarks</td>
<td>Salon III &amp; IV</td>
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<td>Michael Kaplan and Marc Hurlbert</td>
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<td>12:30-1:30 pm</td>
<td>Lunch and Departures</td>
<td>Salon II</td>
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<td>12:30-6:00 pm</td>
<td>Lunch and Melanoma Models Workshop (by invitation)</td>
<td>Salon I</td>
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AGENDA

12:00 - 1:00 pm  Lunch & Networking

1:00 - 1:10 pm  Welcome Remarks  
*Michael Kaplan – President & CEO, Melanoma Research Alliance*

1:10 - 1:30 pm  Who We Are & Why We Are Here

1:30 - 2:20 pm  The Melanoma Treatment Landscape  
Learn where we are, where we’ve been, and where research is taking us.  
*Rizwan Haq, PhD, MD – Dana-Farber Cancer Institute*

2:20 - 2:30 pm  Break

2:30 - 3:30 pm  Is it Hope or Hype?  
We’ve all see headlines proclaiming the imminent cure for cancer, only to be let down after reading just a few lines. Learn how to separate hype from hope.  
*Jason Luke, MD – University of Pittsburgh  
Liz Szabo – Kaiser Health News*

3:30 - 4:00 pm  Ask the Expert: Animal Models  
What role do animal models play in developing next-generation melanoma therapies?  
*Liz Patton, PhD – University of Edinburgh*

4:00 - 4:15 pm  Break

4:15 - 5:45 pm  Looking Beyond 2020 – The Next Decade of Melanoma Treatment  
The melanoma treatment landscape has more options than ever. Hear from experts on emerging approaches gaining steam in clinical trials and the clinic.  
*Georgia Beasley, MD – Duke University  
Stephanie Goff, MD – National Cancer Institute  
Kenneth Grossman, MD, PhD – University of Utah  
James Moon, PhD – University of Michigan  
Antoni Ribas, MD, PhD – University of California Los Angeles  
Moderator: Marlana Orloff, MD – Thomas Jefferson University*

5:45 - 6:00 pm  Closing & Wrap-up

6:00 - 7:30 pm  MRA Patient, Advocate, & Researcher Reception