**DISPARITIES IN INVASIVE MELANOMA AMONG ASIAN AND PACIFIC ISLANDER VETERANS IN THE UNITED STATES**

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 **BACKGROUND:** Melanoma in Asian and Pacific Islanders (APIs) is associated with worse outcomes compared to white individuals. The Veterans Health Administration is the largest US healthcare system. Veterans constitute a high-risk population and this disparity may limit our knowledge of melanoma in this group. We sought to characterize invasive melanoma in API Veterans.

**METHODS:** Data on API Veterans with melanoma diagnosed from January 2009 to December 2017 were obtained from the national Veterans Affairs Central Cancer Registry. Demographic and tumor characteristics were collected. Statistical analyses were completed using R, v3.5.3.

**RESULTS:** 88 API and 15,515 white Veterans were diagnosed with melanoma from 2009-2017. Median age at diagnosis, sex, rurality, and region were similar. APIs were more likely to be Hispanic (6.8% vs. 1.1%, P<.001). API patients presented less often with localized melanoma (60.2% vs. 74.4%) and more frequently with regional (14.8% vs. 10.9%) and distant (10.2% vs. 5.1%) disease (*P*=.02). API patients were less likely to have superficial spreading subtype (14.8% vs. 24.4%), but more likely to have acral lentiginous subtype (4.5% vs. 0.6%). API patients more commonly had melanomas of the lower extremities (5.7%vs.1.6%, *P*=.009). Breslow thickness and ulceration were similar. Between the two populations, API patients were more likely to have lower overall survival in most age groups and all SEER stages. Although overall survival slightly increased among white Veterans after introduction of nivolumab, an anti-PD-1 checkpoint inhibitor, in 2014, it did not confer survival benefit in APIs.

**CONCLUSIONS:** API Veterans present with unique melanoma features, most notably increased acral lentiginous melanoma and lower extremity tumors. Differences in overall survival highlight disparities in care despite advancements in treatment and access to VHA care. Future work is necessary to elucidate mechanisms for improving outcomes in this vulnerable population.

**CONTENT CATEGORY:** Epidemiology

**KEYWORDS:** melanoma, Asian American, Pacific Islander, Veterans, disparities