



Prospective Studies – in mUM

1. **Van den Hoek L., Burgmans M., Tong T., et al.**
 Percutaneous hepatic perfusion combined with ipilimumab and nivolumab for metastatic uveal melanoma (CHOPIN): a single-centre, open-label, randomised, phase 2 trial. *Lancet Oncol.* 2026 Mar;27(3):372-382. doi: 10.1016/S1470-2045(25)00720-X.
2. **Zager J. S., Orloff M. M., Ferrucci P. F., et al.**
 Efficacy and Safety of the Melphalan/Hepatic Delivery System in Patients with Unresectable Metastatic Uveal Melanoma: Results from an Open Label, Single Arm, Multicenter Phase 3 Study. *Pubmed.ncbi.nlm.nih.gov/38704501/*
3. **Zager J. S., Orloff M. M., Ferruci P. F., et al.**
 Subgroup analyses of the phase 3 FOCUS study of melphalan/hepatic delivery system in patients with unresectable metastatic uveal melanoma. *Journal of Cancer Research and Clinical Oncology* (2026) 152:25 <https://doi.org/10.1007/s00432-025-06291-x>.
4. **Zager J. S., Orloff M. M., Ferrucci P. F., et al.**
 An open-label, randomized study of melphalan/hepatic delivery system versus best alternative care in patients with unresectable metastatic uveal melanoma. *Ann Surg Oncol.* 2025;32(7):4976–88. <https://doi.org/10.1245/s10434-025-17231-x>.
5. **Meijer T. S., Burgmans M. C., de Leede E. M., et al.**
 Percutaneous Hepatic Perfusion with Melphalan in Patients with Unresectable Ocular Melanoma Metastases Confined to the Liver: A Prospective Phase II Study. *Ann Surg Oncol* (2021) 28:1130–1141; doi.org/10.1245/s10434-020-08741-x.
6. **Meijer T. S., Burgmans M. C., Fiocco M., et al.**
 Safety of Percutaneous Hepatic Perfusion with Melphalan in Patients with Unresectable Liver Metastases from Ocular Melanoma Using the Delcath Systems' Second-Generation Hemofiltration System: A Prospective Non-randomized Phase II Trial. *Cardiovasc Intervent Radiol* (2019) 42:841–852; doi.org/10.1007/s00270-019-02177-x.

Prospective Studies – in mUM *continued*

7. **Tong T. M. L., Burgmans M. C., Speetjens F. M., et al.**
 Combining Melphalan Percutaneous Hepatic Perfusion with Ipilimumab Plus Nivolumab in Advanced Uveal Melanoma: First Safety and Efficacy Data from the Phase Ib Part of the Chopin Trial. *Cardiovasc Intervent Radiol*; doi.org/10.1007/s00270-022-03338-1.

Quality of Life Data – in mUM

8. **Vigneswarana G., Malalasekera W., Smith V., et al.**
 Quality of life after melphalan percutaneous hepatic perfusion for patients with metastatic Uveal Melanoma. *Melanoma Res*; DOI: 10.1097/CMR.0000000000000947.
9. **Tong T. M. L., Fiocco M., van Duijn-de Vreugd J. J., et al.**
 Quality of Life Analysis of Patients Treated with Percutaneous Hepatic Perfusion for Uveal Melanoma Liver Metastases. *Cardiovasc Intervent Radiol*; doi.org/10.1007/s00270-024-03713-0.

Retrospective Studies – long-term data in mUM

10. **Reiner C. M., Schneider M. A., Weilert H., et al.**
 Survival Outcome After Percutaneous Hepatic Perfusion with High-Dose Melphalan for Liver-Dominant Metastatic Uveal Melanoma: A 10-Year Single-Center Experience. *Cancers* 2025, 17, 3834. <https://doi.org/10.3390/cancers17233834>.
11. **Laukhuf J., Wiens L., Grözinger G., et al.**
 Characterization of long-term survivors with liver metastases from uveal melanoma diagnosed between 2005 and 2021. *Int J Cancer.* 2025;1-7. doi:10.1002/ijc.70246, <https://pubmed.ncbi.nlm.nih.gov/41216869/>

Retrospective Studies – comparative in mUM

- 12.** Kolb M., Forschner A., Artzner C., et al.
Selective Internal Radiotherapy (SIRT) and Chemosaturation Percutaneous Hepatic Perfusion (CS-PHP) for Metastasized Uveal Melanoma: A Retrospective Comparative Study. *Cancers* 2023, 15(20), 4942; doi.org/10.3390/cancers15204942.

Retrospective Studies – safety and efficacy (in mUM)

- 13.** Wiens L., Grözinger G., Dittmann H., et al.
Melanoma-specific survival of patients with uveal melanoma and liver metastases diagnosed between 2005 and 2021. *Ther Adv Med Oncol* 2024, Vol. 16: 1–12; <https://doi.org/10.1177/17588359241273020>.
- 14.** Ghali H., Dugan M. M., Aflatooni S., et al.
Hepatic and Overall Progression-Free Survival After Percutaneous Hepatic Perfusion (PHP) as First-Line or Second-Line Therapy for Metastatic Uveal Melanoma. *Ann Surg Oncol* 2024; <https://doi.org/10.1245/s10434-024-16039-5>.
- 15.** Tong T. M. L., Samim M., Kapiteijn E., et al.
Predictive Parameters in Patients Undergoing Percutaneous Hepatic Perfusion with Melphalan for Unresectable Liver Metastases from Uveal Melanoma: A Retrospective Pooled Analysis. *Cardiovasc Intervent Radiol* (2022) 45:1304–1313.

Retrospective Studies – safety and efficacy (in mUM) *continued*

- 16.** Artzner C., Mossakowski O., Hefferman G., et al.
Chemosaturation with percutaneous hepatic perfusion of melphalan for liver dominant metastatic uveal melanoma: a single center experience. *Cancer Imaging* (2019) 19:31; doi.org/10.1186/s40644-019-0218-4.
- 17.** Brüning R., Tiede M., Schneider M., et al.
Unresectable Hepatic Metastasis of Uveal Melanoma: Hepatic Chemosaturation with High-Dose Melphalan—Long-Term Overall Survival Negatively Correlates with Tumor Burden. *Radiology Research and Practice*, Volume 2020, Article ID 5672048, 7 pages; doi.org/10.1155/2020/5672048.
- 18.** Dewald C. L. A., Warnke M., Brüning R., et al.
Percutaneous Hepatic Perfusion (PHP) with Melphalan in Liver-Dominant Metastatic Uveal Melanoma: The German Experience. *Cancers* 2022, 14(1), 118; doi.org/10.3390/cancers14010118.
- 19.** Modi S., Gibson T., Vigneswaran G., et al.
Chemosaturation with percutaneous hepatic perfusion of melphalan for metastatic uveal melanoma. *Melanoma Research* 32(2):p 103-111, April 2022; DOI: 10.1097/CMR.0000000000000806.



Retrospective Studies – anaesthesia topics

- 20.** Rehn P., Tan B., Turra J., et al.
Peri-Interventional Hemodynamic Management Strategies for Percutaneous Chemosaturation of the Liver in Metastatic Cancer. *Cancers* 2024, 16, 3698. <https://doi.org/10.3390/cancers16213698>.
- 21.** Metze M., Zimmermann S., Kirsten H., et al.
Effects of Protamine Reversal on Coagulation Parameters After High-Dose Heparin Administration in Percutaneous Hepatic Chemosaturation Intervention. *Clinics and Practics* 2025, 15, 38; doi.org/10.3390/clinpract15020038.

Review Articles in mUM

- 22.** Padia S., A., Modi S., Wehrenberg-Klee E., et al.
Treatment of Liver Metastases from Uveal Melanoma with Percutaneous Hepatic Perfusion. *J Vasc Interv Radiol* 2026; 37:107887; <https://doi.org/10.1016/j.jvir.2025.10.018>

Retrospective Studies – mUM and other indication

- 23.** Veelken R., Ebel S., Schindler A., et al.
Hepatic chemosaturation with melphalan in patients with primary or secondary liver tumors with or without extrahepatic tumor manifestation. *ESMO Gastrointestinal Oncology*, Volume 5 Issue C 2024; <https://doi.org/10.1016/j.esmogo.2024.100082>.
- 24.** Vogel A., Ochsenreither S., Zager J. S., et al.
Chemosaturation for primary and secondary liver malignancies: A comprehensive update of current evidence. *Cancer Treatment Reviews*; doi.org/10.1016/j.ctrv.2022.102501.

Retrospective Studies – mUM and other indication *continued*

- 25.** Veelken R., Maiwald B., Strocka S., et al.
Repeated percutaneous hepatic perfusion with melphalan can maintain long-term response in patients with liver cancers. *Cardiovasc Intervent Radiol* (2022) 45:218–222; doi.org/10.1007/s00270-021-02983-2.
- 26.** Schönfeld L., Hinrichs J. B., Marquardt S., et al.
Chemosaturation with percutaneous hepatic perfusion is effective in patients with ocular melanoma and cholangiocarcinoma. *Journal of Cancer Research and Clinical Oncology* (2020) 146:3003–3012; doi.org/10.1007/s00432-020-03289-5.
- 27.** Marquardt S., Kirstein M. M., Brüning R., et al.
Percutaneous hepatic perfusion (chemosaturation) with melphalan in patients with intrahepatic cholangiocarcinoma: European multicentre study on safety, short-term effects and survival. *European Radiology*; doi.org/10.1007/s00330-018-5729-z.
- 28.** Dewald C. L. A., Becker L. S., Maschke S. K., et al.
Percutaneous isolated hepatic perfusion (chemosaturation) with melphalan following right hemihepatectomy in patients with cholangiocarcinoma and metastatic uveal melanoma: peri and post-interventional adverse events and therapy response compared to a matched group without prior liver surgery. *Clinical & Experimental Metastasis* (2020) 37:683–692; doi.org/10.1007/s10585-020-10057-9.



