The Road Not Taken

When more conventional treatments proved too risky—or futile—a top cancer specialist used immunotherapy to save his patient’s life.

**Doctor**: Dan Costin, MD, FACP, Medical Director, White Plains Hospital’s Center for Cancer Care  
**Patient**: James “Jimmy” Herde, 64, Croton-on-Hudson  
**Diagnosis**: Metastatic Melanoma

**THE PRESENTATION**
One day in October 2015, as James (Jimmy) Herde was getting dressed for work, he buttoned his shirt and felt a large lump on his neck.

Herde, who sees a dermatologist like clockwork every six months, had been through a cancer diagnosis, treatment, and surgery before, so when he found a lump, he knew the road ahead was likely an uncertain one. “I knew this situation was not good,” the 64-year-old recalls.

Two years earlier, the Croton-on-Hudson resident had surgery at White Plains Hospital’s Center for Cancer Care to remove several lymph nodes from his neck, along with a discolored patch of skin on his scalp that had tested positive for malignant melanoma, a potentially deadly skin cancer. Fortunately, the medical staff—including Mark Gordon, MD, and a team of oncology, thoracic, radiology, and surgical specialists—caught the cancer before it spread, and doctors found no remaining cancer after surgery.

Because he knew the importance of early detection, when Herde felt the new lump in his neck, he wasted no time going back to White Plains Hospital. This time around, tests confirmed that the cancer had metastasized and that a large tumor, roughly the size of three golf balls, needed to be removed.

**THE JOURNEY**
Doctors discussed all available options at respected regional institutions, such as Sloan Kettering, NYU’s Langone Medical Center, and others—and with treatments, including chemotherapy, radiation, and surgery. “That shook me,” Herde, a telecommunications executive, says of hearing the severity of his cancer. “That was real.”

Enter Dan Costin, MD, FACP, medical director of White Plains Hospital’s Center for Cancer Care, who met with Herde and his wife of 38 years, Kathleen, and assured the couple that Jim would be okay and would get the best care available. Dr. Costin, along with more than 20 specialists from different disciplines, reviewed the case and concluded that surgery was necessary. However, given the size of the tumor and its proximity to vital organs, they knew there were risks with operating, including the possibility of long-term scarring and further spread of the disease. They needed more options.

Dr. Costin then offered immunotherapy, a relatively new approach to treatment that uses one’s own immune system to attack cancer cells but without the adverse side effects of chemo or radiation. At that point, the doctors were hoping to simply shrink the tumor, to aid in the surgery. Herde received his first dose of immunotherapy, a one-two punch via IV, on March 2 of last year.

**THE OUTCOME**
“Within a week, we were starting to see a regression of this large, bulky tumor,” Dr. Costin says. After three weeks of immunotherapy, “everything looked like it literally melted. It was 100 percent gone; nothing was left.”

To be sure they hadn’t missed anything, doctors went ahead with surgery in July to remove and test lymph nodes and found no disease. When Herde was screened in April, he was still cancer-free.

Dr. Costin says that Herde’s case is a great example of the potentially remarkable outcomes with immunotherapy and a multidisciplinary approach to cancer care. “One unique thing about Jim is that he had an introduction to a therapy before its time.”

Immunotherapy may indeed be a “game-changer” that can impact the whole landscape of how we treat cancer,” Dr. Costin says.

For that personal approach, optimism, and out-of-the-box thinking, Herde is grateful. “It starts with the top,” Herde says of Dr. Costin and his team. “Having top-notch care in your backyard, that’s a world of difference.” —JM