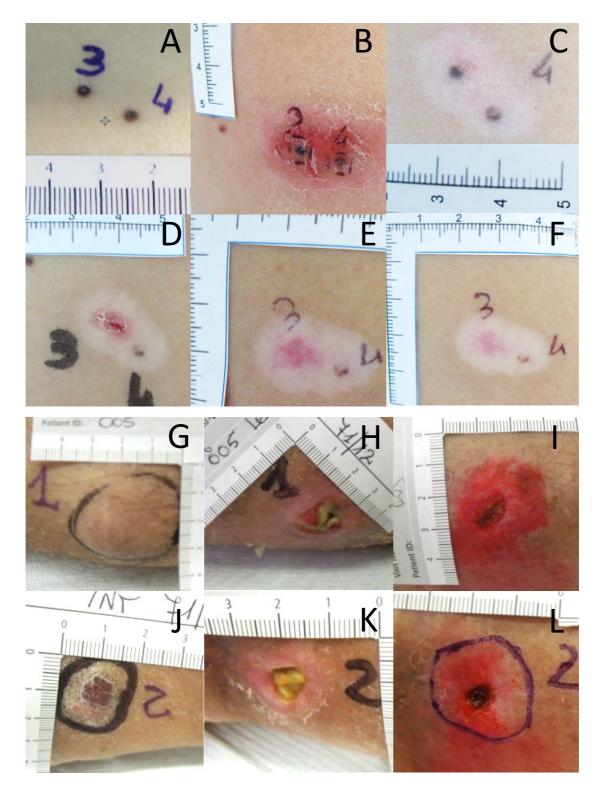
Patient number	Prior antitumor therapy	Treatment line	Active principle	Dose	Administration route	Start date	End date
001	Yes	1	NY-ESO	NA	Intramuscular	26/03/12	04/06/12
		2	Bleomycin (ECT)	30 mg	Intravenous bolus	24/07/12	24/07/12
		2 3	Dacarbazine	NA	Intravenous	02/08/12	02/10/12
002	No						
003	Yes	1	Bleomycin (ECT)	30 mg	Intravenous bolus	01/03/12	01/03/12
004	Yes	1	MAGE A3 + AS15	0.5 ml	intramuscular	21/06/11	11/07/11
005	No						
006	Yes	1	Dacarbazine	$1000 \text{ mg/m}^2$	Intravenous	01/04/12	01/09/12
007	Yes	1	Melphalan (ILP)	100 mg	Intravenous bolus	30/04/12	30/04/12
800	No		,	Ū			
009	Yes	1	Dacarbazine	1600 mg/m <sup>2</sup>	Intravenous	12/09/12	28/12/12
010	Yes	1	Dacarbazine	1000 mg/m <sup>2</sup>	Intravenous	05/09/12	27/09/12
		2	Vemurafenib	960 mg b.i.d.	Oral	14/10/12	08/02/13
011	No			Ū			
012	No						
013	No						
014	Yes	Adjuvant	Melphalan (ILP)	100 mg	Intravenous drip	07/03/12	07/03/12
015	Yes	Adjuvant	IFN	High-dose	Intravenous	26/08/13	09/10/13
016	No	-		-			
017	Yes	Adjuvant	IFN	3 MIU	Intravenous	01/04/00	01/10/01
		1	Dacarbazine	800 mg/m <sup>2</sup>	Intravenous	17/10/06	13/11/06
		1	Thymosine	3.2 mg	Subcutaneous	17/10/06	13/11/06
		2	Ipilimumab	10 mg/kg	Intravenous	10/01/07	21/02/07
018	Yes	1	Bleomycin (ECT)	27 mg	Intravenous bolus	24/09/13	24/09/13
019	No		/	-			
020	Yes	Adjuvant	Anti-BCG	NA	Subcutaneous	01/08/10	12/08/10
021	No	-					
901	Yes	Adjuvant	IFN	NA	Subcutaneous	01/12/12	01/11/13

Supplementary Table 1: Previous antineoplastic th	nerapies
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NA = Not available; ECT = Electrochemotherapy; ILP = Isolated limb perfusion; IFN = Interferon; b.i.d. = twice a day



Supplementary Figure 1.

## Supplementary Figure 1. Examples of responses of injected cutaneous/subcutaneous metastases.

**A to F**. Two cutaneous lesions present at baseline (**A**) in this patient (patient 23.003.S.005) were injected with L19-IL2/L19-TNF. After last injection (day 22) the injected area appears erythematous and lesions less surelevated (**B**). At tumor assessment 2 at week 12 (day 85), lesions appear reduced in size and surrounded by a vitiligo-like, discoloured skin area (**C**). At tumor assessment 3 (week 24, day 168) a crusty scar is visible in the place of lesion 3 (**D**). At the following assessment (week 36) and at follow-up 1 (week 52), lesion 3 has disappeared while lesion 4 has become not measurable, leaving behind a hyperpigmented rim (**E** and **F**).

**G** to **L**. Two large subcutaneous lesions present at baseline in patient 14.004.S.008 (**G** and **J**) were treated with the immunocytokine combination. After 6 weeks, both lesions appeared necrotic and ulcerated (**H** and **K**). At tumor assessment 2 (week 12, day 85), lesions appear to have considerably shrunk (**I** and **L**). Three weeks later, the patient underwent surgical resection of the residual measurable lesion (lesion 1) and was withdrawn from the study because considered NED.



Supplementary Figure 2.

## Supplementary Figure 2. Comparison between intralesional treatment with L19IL2/L19TNF and surgery.

**A and C**. Two patients with cutaneous metastases at baseline (red arrows), who had previously received surgical exeresis of several other skin lesions (black arrows), were treated with L19IL2/L19TNF as per protocol. At tumor assessment at week 12, all treated lesions appeared to have disappeared leaving behind little scars (**B and D**). The immunocytokine treatment is less disfiguring than surgery, with better cosmetic results and no margin problems, thus improving patient's quality of life.