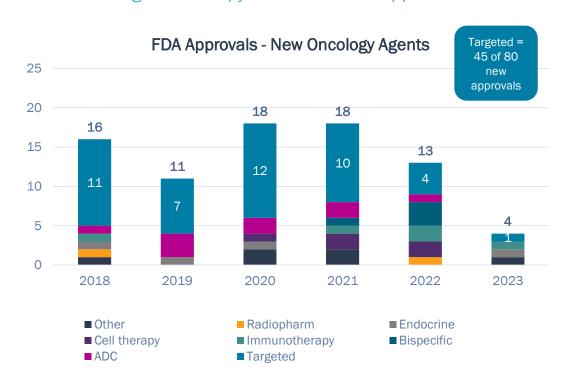


**Oncology Update** 

May 2023

# Targeted therapy has been the driver of new oncology approvals, accounting for 60% of new oncology drugs in the past five years

Targeted therapy has dominated approvals – but 2022 new entrants were a more diverse mix



Targeted therapies account for ~60% of new approvals in past 5 years

10 new biomarkers have been added to the list busy oncologists need to track\*

Recent approval of LAG-3 is first new checkpoint since PD-1 – creating a new option for melanoma patients

Recent ADC launches and partnering have revived the category

Significant pipeline investment in cell therapies and bispecifics has led to eight approvals... so far



\* FGFR, FLT3, IDH1, IDH2, MET, NTRK, PDGFR, PI3K, RET, KRAS G12C, ESR1 Source: FDA; Bluestar analysis

## 2022 saw fewer oncology approvals than in recent years, in large part due to weak AA filings from follow-on PI3K and PD-1 inhibitors

2022 New Oncology Agents

	Targeted	Cell/Gene Therapy	10	Bispecific	ADC	Radiopharm
Approved 13 (6 AA)	Vonjo (JAK) <sup>AA</sup> Lytgobi (FGFR) <sup>AA</sup>	Carvykti (BCMA) Adstiladrin (IFNα2b)	<b>Opdualag (LAG-3)</b> Imjudo (CTLA-4)	Kimmtrak (gp100xCD3)		Pluvicto (PSMA)
	Rezlidhia (IDH1) Krazati (KRAS G12C) <sup>AA</sup>			Tecvayli (BCMAxCD3) <sup>AA</sup> Lunsumio <sup>AA</sup> (CD20 x CD3)	Elahere (FRα) <sup>AA</sup>	
Withdrawn/ Rejected (11) (6 AA)	Parsaclisib (PI3K) <sup>AA</sup> Ubilituximab (CD20) <sup>AA</sup> Dovitinib (VEGF) Zandelisib (PI3K) <sup>AA</sup> Surufatinib (VEGF) Poziotinib (pan-HER) <sup>AA</sup>		Tislelizumab (PD-1)(delayed) Torapalimab (PD-1) (delayed) Sintilimab (PD-1)		Blenrep (BCMA) <sup>AA</sup>	Omburtamab <sup>AA</sup> (B7H3)

#### FDA signaled a tougher stance toward accelerated approval (AA) as well as use of ex-U.S. data to support filing

- Incyte withdrew parsaclisib filing, and MEI Pharm discontinued zandelisib because AA pathway was no longer an option (indications for three additional PI3Ki were withdrawn)
- Blenrep (belantamab mafodotin) AA was withdrawn in Nov 2022, within one month of GSK announcing a failed confirmatory
- FDA rejected filings based predominantly on Asian data for sintilimab and surufatinib; inability to complete inspections in China delayed decisions on two PD-1 inhibitors



# 2023 could see the approval of agents with new targets such as panRAF, claudin18.2, and GPRC5D, as well as cell therapies for solid tumors – lovance TILs and AdaptImmune's MAGE A4 TCR

#### 2023 New Oncology Agents

	Targeted	Cell/Gene Therapy	10	Bispecific	ADC	Other	Radiopharm
Approved	Jaypirca (BTK) <sup>AA</sup>	Omisurge (enhanced CD34+ stem cells)	Zynyz (PD-1)			Orserdu (SERD)	
Filed	Momelotinib (JAK) Nirogacestat (γ secretase) Fruquitinib (VEGF) Quizartinib (FLT3)	Lifileucel (TILs) <sup>2</sup> Afimi-cel (MAGEA4) <sup>2</sup>	Penpulimab (PD-1) ALT-803 (IL-15) Cosibelimab (PD-L1)	Glofitamab (CD20xCD3) <sup>AA</sup> Epcoritamab (CD20xCD3) <sup>AA</sup> Talquetamab (GPRC5DxCD3) <sup>AA</sup> Elrantamab (BCMAxCD3) <sup>AA</sup>	Trastuzumab duocarmazine (HER2)		
On Deck	DAY101 (panRAF) Zolbetuximab (claudin18)	Tabelecleucel (T cells) (filed in EU)	Tislelizumab (PD-1) (delayed) Torapalimab (PD-1) (delayed)				Iomab-B (CD45)
Rejected	Hypericin (PDT <sup>1</sup> )						

- Claudin18.2 provides some OS benefit in gastric KOLs hopeful it could translate into other GI tumors
- PanRAF starting in pediatric glioma (niche), MOA may have potential to expand beyond BRAF V600
- Cell therapy for solid tumors initial indications likely to see limited uptake: AdaptImmune MAGEA4 in rare synovial sarcoma, and melanoma TILs carries IL-2 requirement

<sup>1</sup> PDT = photodynamic therapy <sup>2</sup>Rolling BLA initiated <sup>AA</sup> accelerated approval



Source: TrialTrove: FDA: Bluestar analysis

#### **Key Questions for 2023**

Recent Trends....

...Emerging Questions

Targeted therapies account for ~60% of new approvals in past 5 years

LAG-3 is first new checkpoint since PD-1 – creating a new option for melanoma patients

Recent ADC launches and M&A/partnering have revived the category

Significant pipeline investment in cell therapies and bispecifics has led to eight approvals... so far

How will niche indications fare in light of IRA and FDA accelerated approval guidance?

Will Roche's SKYSCRAPER 1 in NSCLC validate TIGIT? (Est final OS Q3) What is the next wave of promising IO targets?

Can the vision of replacing chemo be achieved?
Where do ADCs demonstrate incremental vs. substantial benefit?

Will auto CAR-T logistics and durability improve in the near term? How will physicians position bispecific T cell engagers relative to CAR-T?



### ASCO 2023 – abstracts we're watching

Topic	Tumor	Regimen	Abstract #
Can LAG-3 reach the \$4B+	NSCLC	Neoadjvuant relatlimab + nivo [randomized Ph2]	8500
potential for Opdualag laid	Melanoma	2-yr follow up for 1L relatlimab + nivo [Ph3]	9502
out by BMS?	Melanoma	Fianlimab + PD-1 in adjuvant PD-1 progressors	9501
Lessons learned in PD-1 retreatment?	RCC	Atezo + cabo in 2L PD-1 pretx [Ph3]	LBA4500
A win for PD-L1 or efficacy driven by PARP?	Ovarian	Durva + olaparib in 1L BRCA WT [Ph3]	LBA5506
What outcomes drive change in indications with high 1L efficacy?	cHL	Nivo +AVD vs. brentuximab vedotin +AVD in 1L advanced [Ph3]	LBA4
Can ADCs improve the IO tail?	UC	Enfortumab vedotin + pembro in 1L cis-ineligible – long-term follow up [Ph2]	4505
How will EGFR MT tx	NSCLC	Amivantamab + lazertinib in 1L - long term follow up [Ph1]	9134
paradigm evolve?	NSCLC	BLU945 (4th gen TKI) +/- osimertinib in 2L+ [Ph1/2]	9011
A 'new' liquid tumor for CAR-T?	CLL	Liso cel in 3L+ CLL [Ph2]	7501
IO ADC Targeted	Cell		

# #ASCO23





PAUL ZHANG, MBA
Partner
pzhang@bluestarbio.com



ERIN OLSEN, MBA
Managing Director
eolsen@bluestarbio.com



MICHELLE WHANG
Senior Engagement Manager
mwhang@bluestarbio.com



ELIA FARAH, PhD Senior Consultant efarah@bluestarbio.com

## **About Bluestar**



#### Our therapeutic area experience is broad-based, with oncology our number one area of focus

#### **Our Areas of Focus**

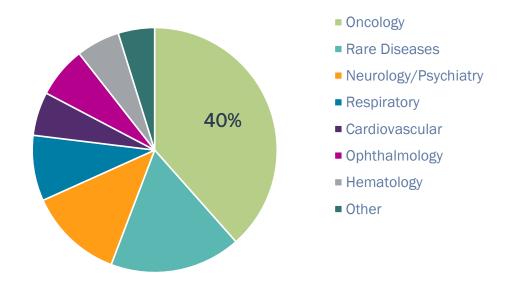
We work in all therapeutic areas in which our clients have assets in development

Oncology is an area of excellence for our team

- Our expertise is based on the senior leadership team's 20+ years of experience in both consulting and biopharma roles
- We support clients in evidence-based indication prioritization strategy, asset forecasting and valuation, and business development decisions

Rare diseases and neuroscience are also areas of focus and expertise based on a broad spectrum of experiences in both academia and industry

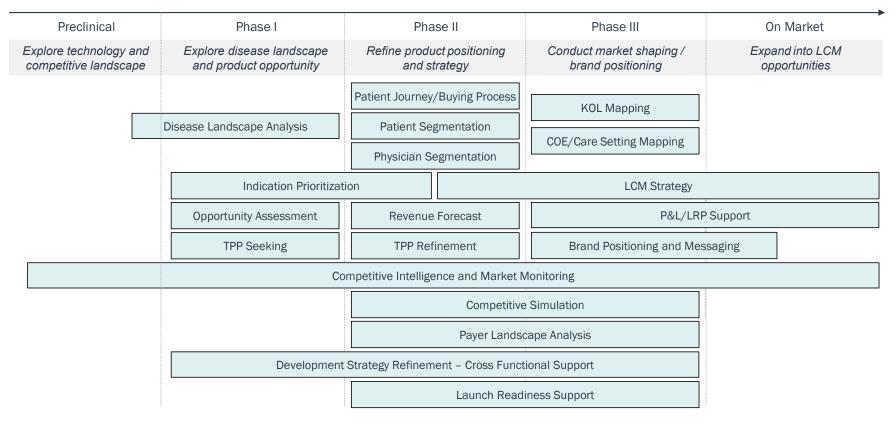
#### Recent Engagements by Therapeutic Area





# Our services cover a range of topics from early stage market landscape analysis to post launch LCM strategy

#### **Illustrative Project Types**





We commit to deliver insights that make an impact to client business and an enjoyable client experience throughout the collaboration

Why We Stand Out

#### Senior Team Hands-on Work

We have a flat internal structure and provide direct experiential guidance

#### **Subject Matter Depth**

We offer scientific, clinical and commercial planning knowledge

#### **Client-Side Experience**

We know what clients need, having been in similar roles previously

#### **Collaborative Approach**

We listen to clients while providing independent expertise

#### **Deep Industry Connections**

We have access to a large network of experts and executives



521 Fifth Ave.
25<sup>th</sup> Floor
New York, NY 10175
www.bluestarbioadvisors.com

