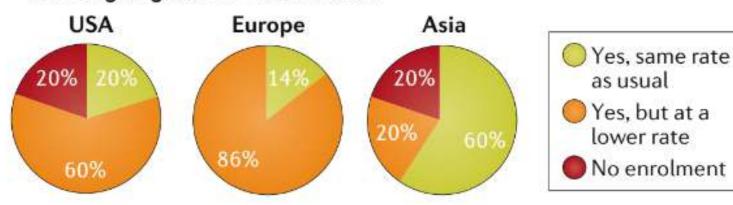
Impact of COVID-19 on oncology clinical trials Nature Reviews Drug Discovery, May 18, 2020

Samik Upadhaya, Jia Xin Yu, Cristina Oliva, Megan Hooton, Jeffrey Hodge & Vanessa M. Hubbard-Lucey



Proportion of surveyed institutions continuing to enrol new patients into ongoing cancer clinical trials

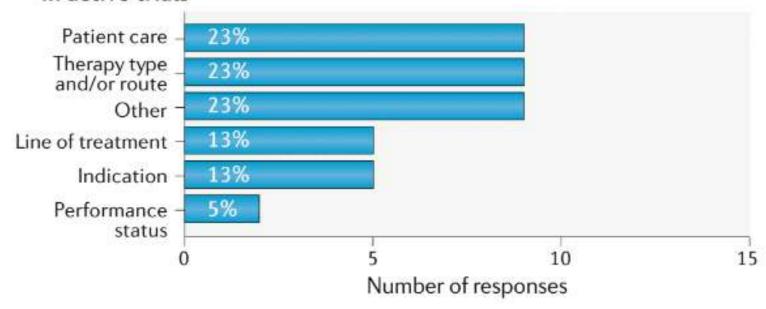




Impact on patient enrolment in active oncology clinical trials, based on survey responses from 22 investigators leading trials in the United States (10), Europe (7) and Asia (5).



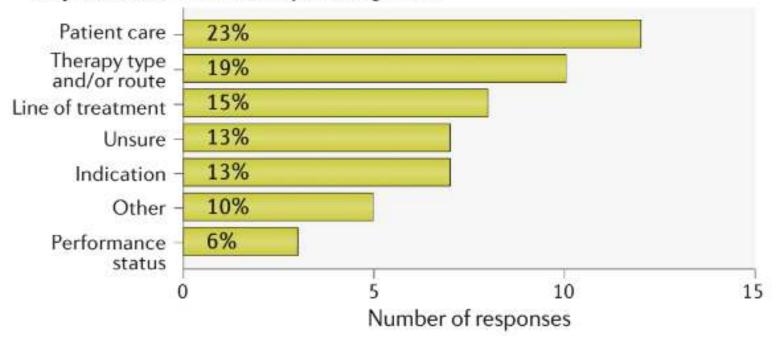
Trial considerations causing the most difficulty for enrolment in active trials





Factors affecting enrolment for ongoing trials highlighted by 13 investigators, who selected their top three considerations. Percentages reflect responses within each category out of the total of 39 responses

Key considerations for upcoming trials

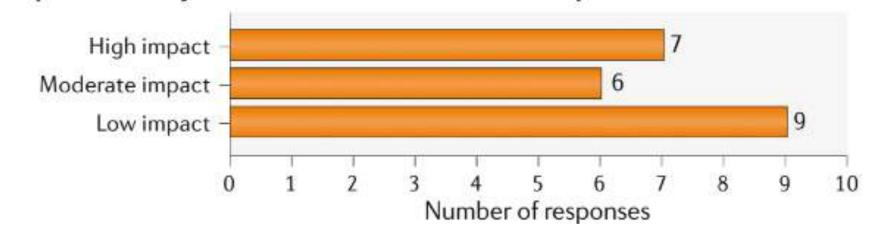




Key considerations for future trials highlighted by 22 investigators. Percentages reflect responses within each category out of the total of 52 responses.



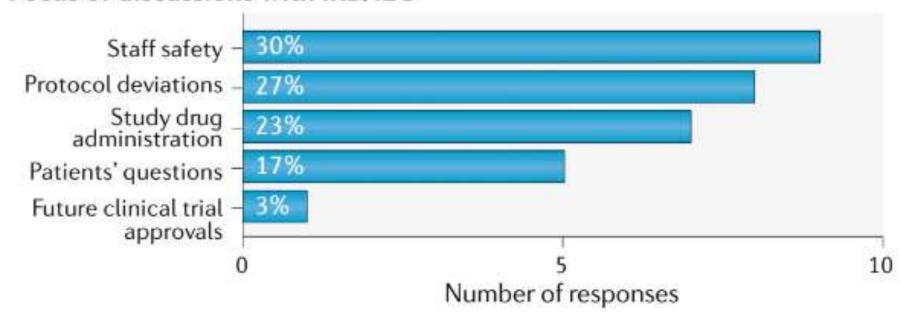
Impact on delayed or cancelled visits for cancer patients in trials





Impact on patient visits based on responses from 22 investigators.

Focus of discussions with IRB/IEC

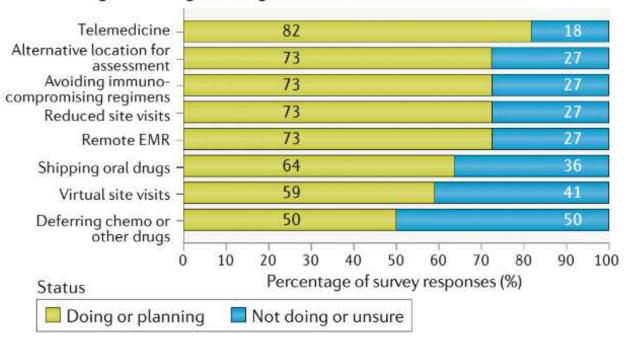




Topics discussed with an institutional review board (IRB) or independent ethics committee (IEC). Percentages are out of the total of 30 responses from 11 investigators



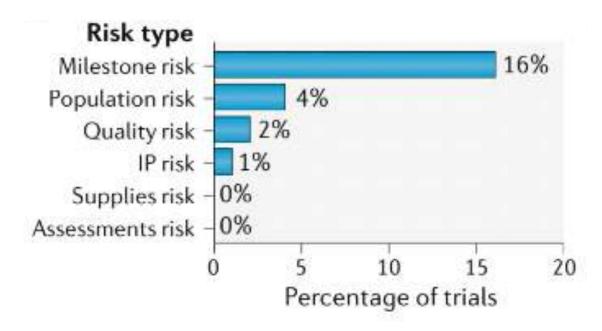
Technologies/strategies being considered for clinical trial assessments





Comparison of institutional strategies for clinical trial assessments and quality monitoring as a result of COVID-19. Percentage of respondents aware of current or future implementation and unaware of such measures at their institution are shown, based on 198 responses from 22 investigators.



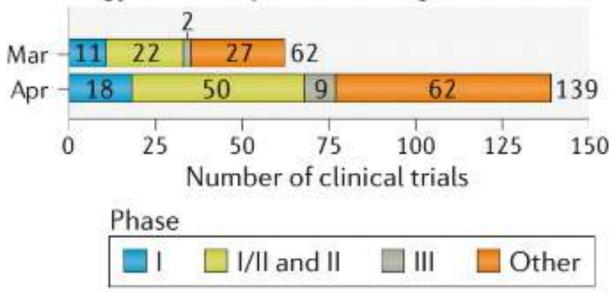




Operational risks, based on an analysis conducted by IQVIA of a subset of its oncology trials (n > 200).



Oncology trials suspended owing to COVID-19





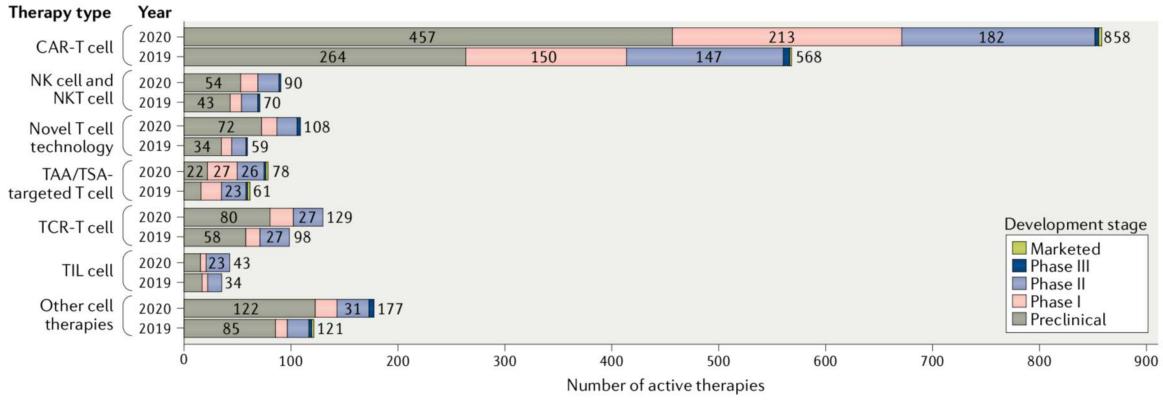
Number of interventional oncology trials suspended in March and April owing to COVID-19. Data extracted from ClinicalTrials.gov on 12 May 2020. 'Other' includes phase IV trials and trials for which the phase is not stated.



Cancer cell therapies: the clinical trial landscape Nature Reviews Drug Discovery, May 26, 2020

Jia Xin Yu, Samik Upadhaya, Revati Tatake, Fern Barkalow & Vanessa M. Hubbard-Lucey

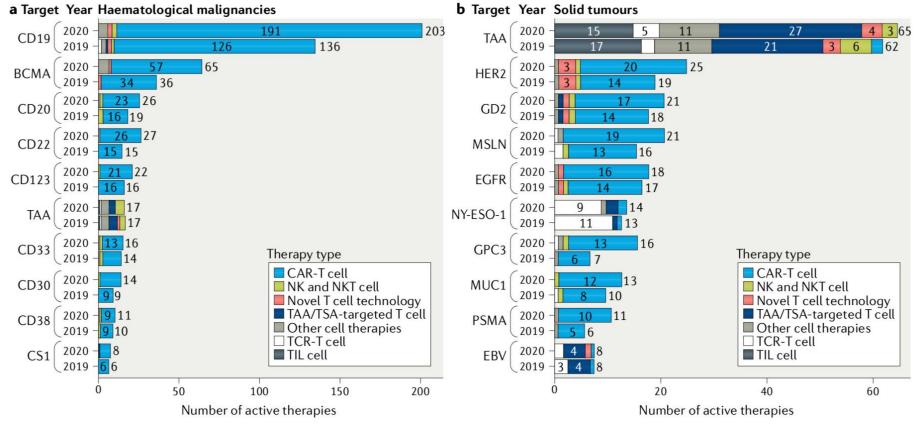






Trends in the cancer cell therapy pipeline. Comparison of the pipeline in March 2019 and March 2020 (data on analysis included in the Supplementary file). TAA, tumour-associated antigen; TCR, T cell receptor; TIL, tumour-infiltrating lymphocyte; TSA, tumour-specific antigen.







Top targets of cell therapies for blood and solid tumours.

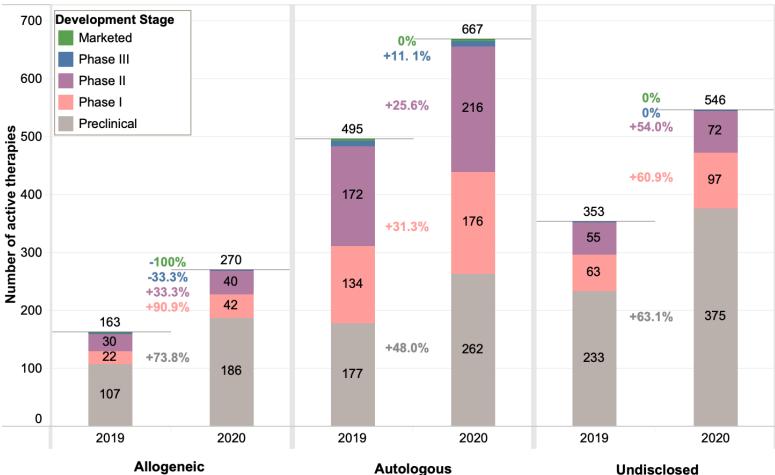


	Endpoint Status	Phase													
Blood Indication	Positive	l or II	5	19	11		48		35	-	67		187		
		III or IV	2 5								Therapy Type CAR-T cell				
	Negative	l or II	333	9							Property (1997)	NK cell & NKT cell			
		III or IV	11								Novel T-ce	Novel T-cell technology			
Solid Indication or Both	Positive	l or II	10	6	19	18	19	25	18	115	Other cell therapies TAA/TSA-targeted T cell TCR-T cell				
		III or IV	4 4												
Indi	Negative	l or II	2 7								TIL cell				
-			0	20	כ	40	60	80	100	120	140 160	180	200		
				Number of Clinical Trials											



Comparison of endpoint status of trials with published results by cancer types, therapy types, and phases. (Positive = Fully/Partially Achieved Endpoints, Negative = Did not achieve endpoints)



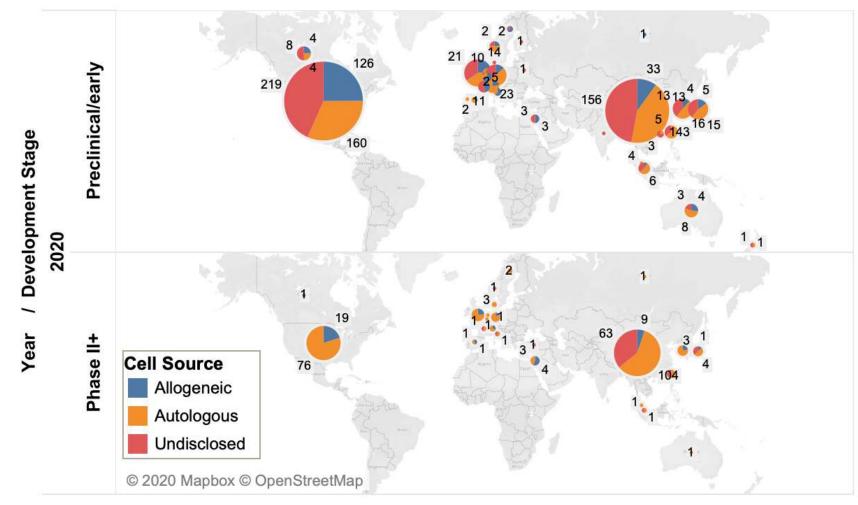


CANCER The Anna-Maria Kellen Clinical INSTITUTE Accelerator The Anna-Maria Kellen

Undisclosed

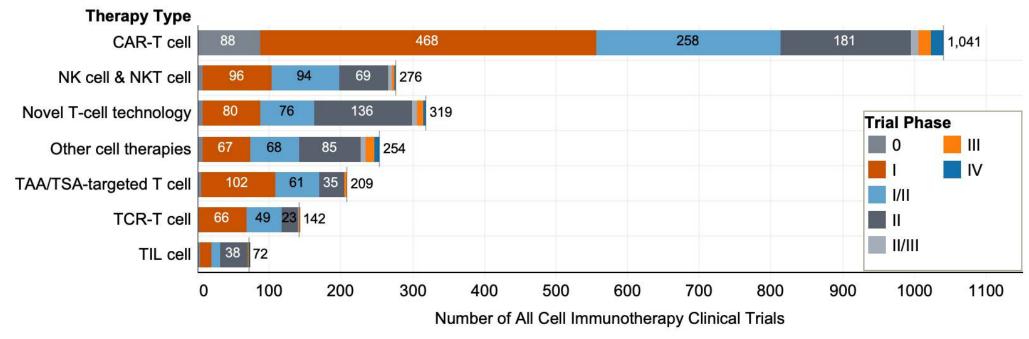
Comparison of active cellular immunotherapies based on Allogeneic and Autologous in origin or Undisclosed where the origin is not disclosed.







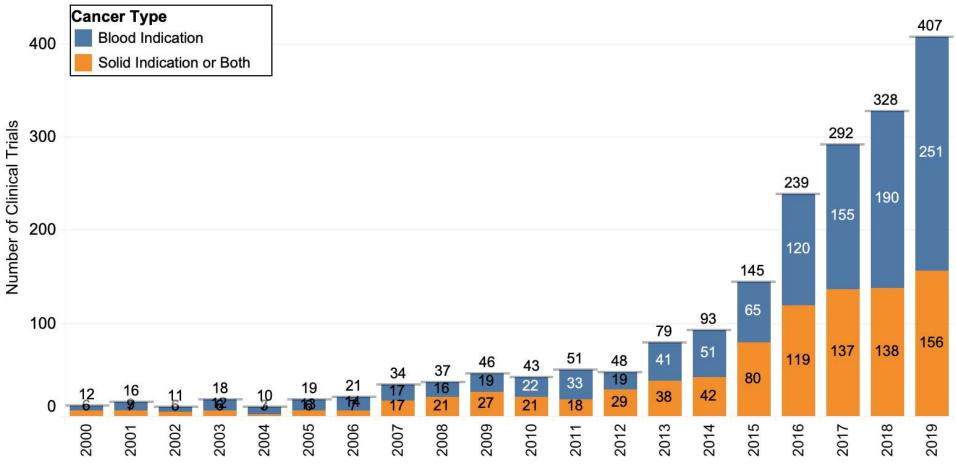
Landscape of cancer cellular immunotherapy pipeline from 2020 update by country of origin and development stage.





Landscape of all cancer cellular immunotherapy trials extracted from GlobalData's clinical trials database (data cut off March 31, 2020) based on trial phase and therapy type.

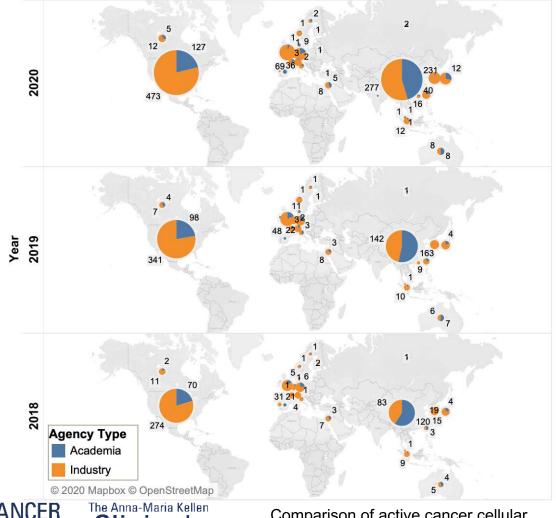






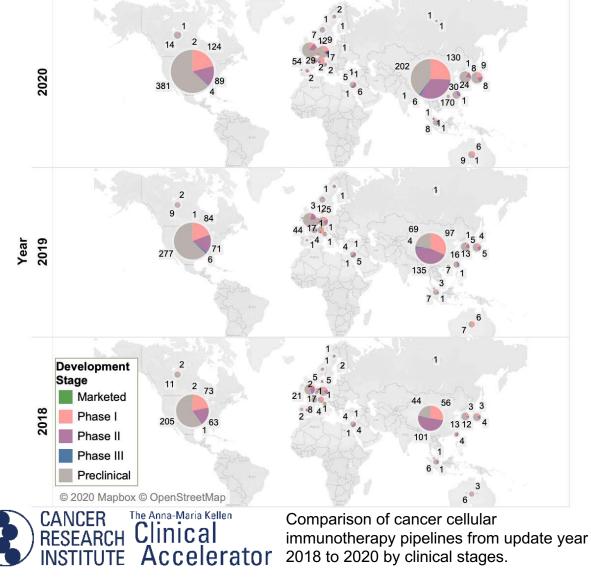
Comparison of all cancer cellular immunotherapy clinical trials by start date (1992 to 2019) and indication type.





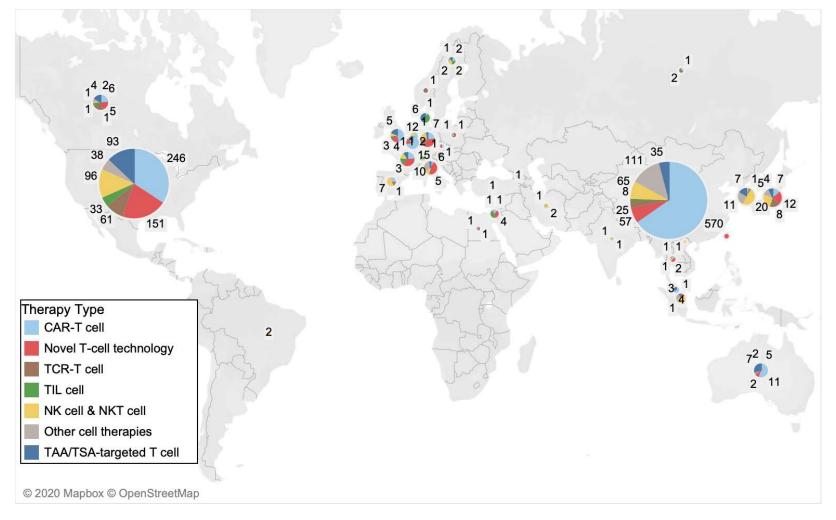


Comparison of active cancer cellular immunotherapy pipeline from update year 2018 to 2020 by ownership type.



Yu et al. Nature Reviews Drug Discovery. May 2020.







Comparison of all cancer cellular immunotherapy clinical trials by main country and therapy types with data cutoff date March 31, 2020.

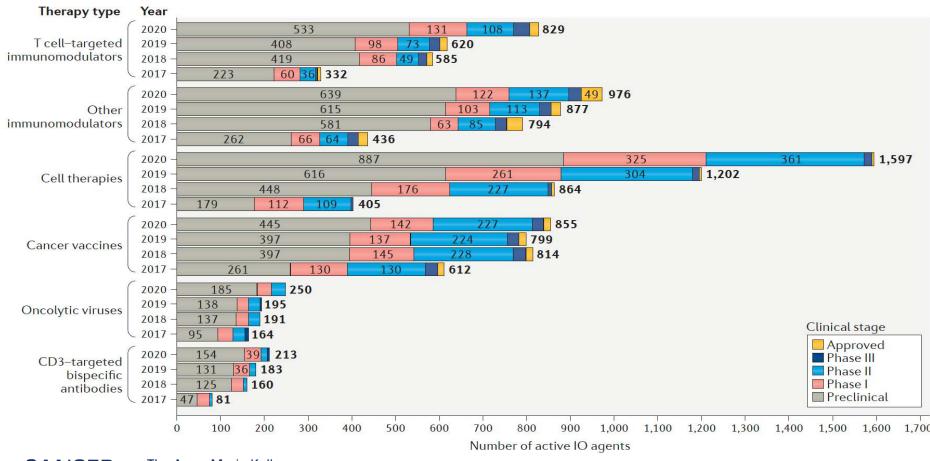


Immuno-oncology drug development forges on despite COVID-19

Nature Reviews Drug Discovery, September 18, 2020

Samik Upadhaya, Vanessa M. Hubbard-Lucey & Jia Xin Yu

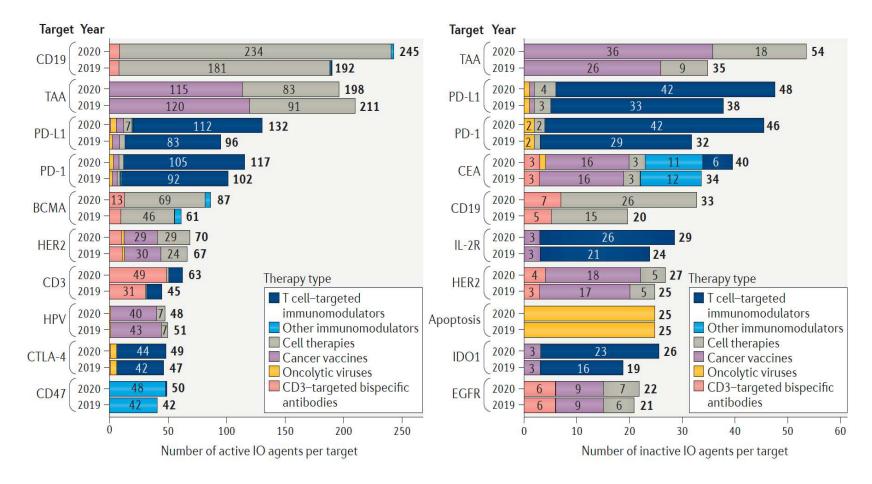






Trends in the immuno-oncology (IO) drug development pipeline The 4,720 IO agents in the current global clinical pipeline are compared with the pipelines from analogous analyses in previous years, based on the therapy type.

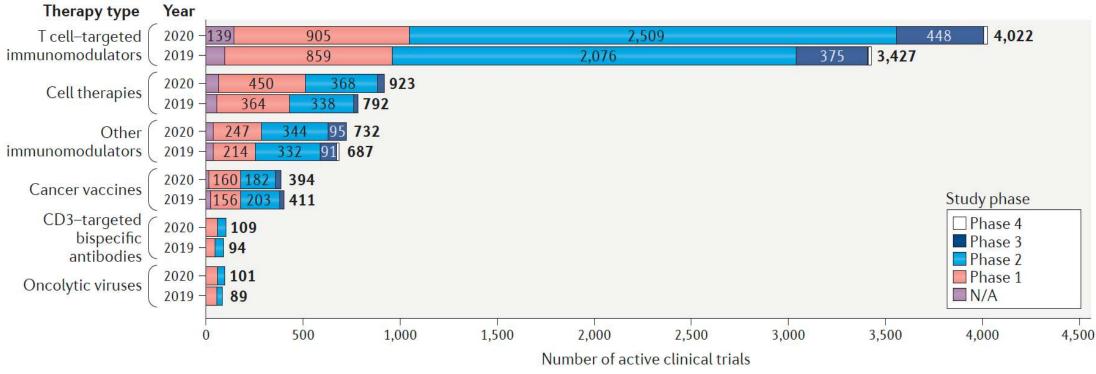






Top immuno-oncology targets for active and deprioritized agents in the drug development pipeline from 2019 and 2020. We consider inactive agents those that are not actively investigated owing to lack of efficacy, safety, or for business development reasons.

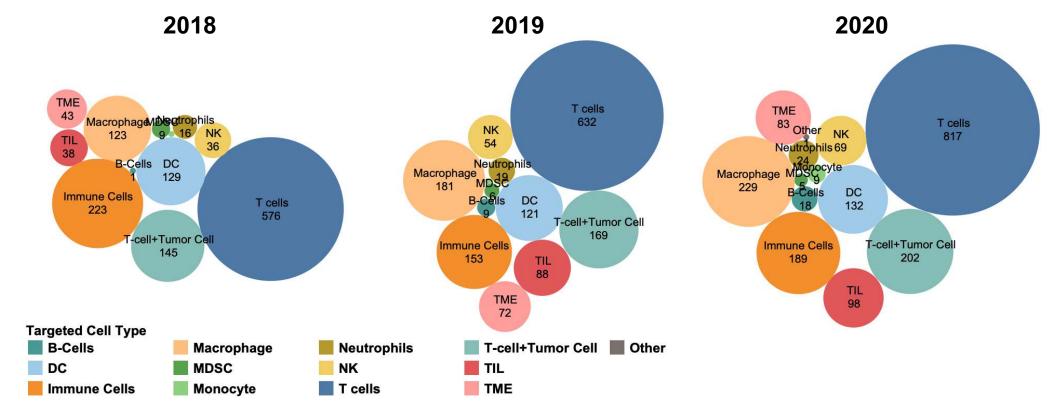






Trends in clinical trials for IO agents. Landscape of the 6,281 active IO trials in 2020 classified by therapy types and development phase compared to 2019.

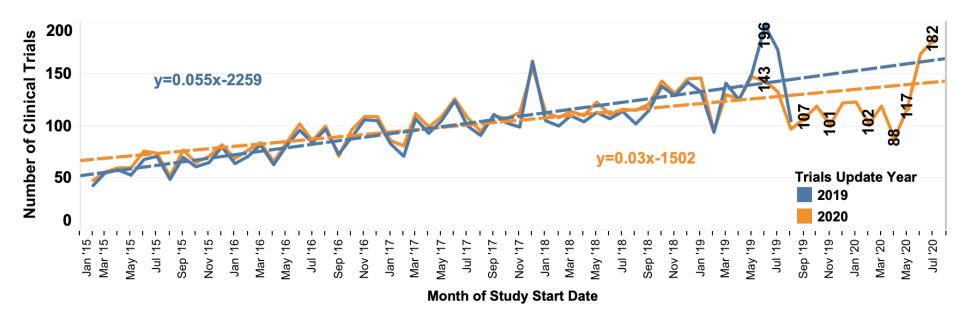






Target cell landscape of immunomodulators and CD3-targeted bispecific monoclonal antibodies over the past 3 years. "Immune cells" indicates broad immune cell targets. TIL=tumor infiltrating lymphocytes, TME= tumor microenvironment, DC = dendritic cells, NK= natural killer cells, Immune cells = several different immune cell types







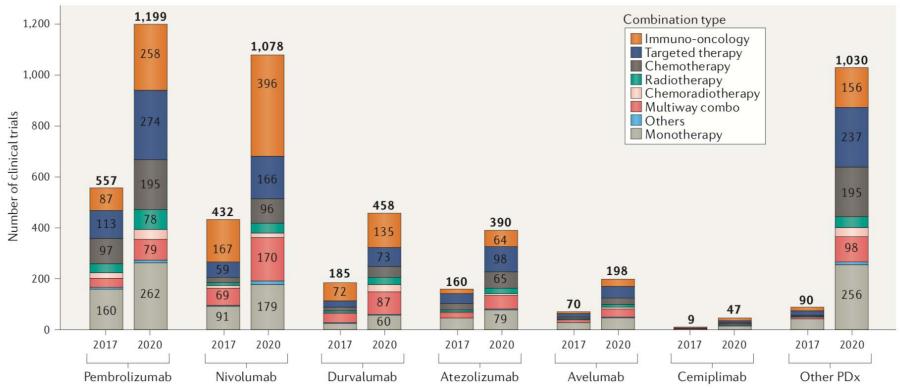
Start date of IO trials per year indicates a dip in new trials started towards the end of 2019, with recovery in summer 2020 to continue the lower but upward trend of new trials.



Combinations take centre stage in PD1/PDL1 inhibitor clinical trials Nature Reviews Drug Discovery, November 11, 2020

Samik Upadhaya, Svetoslav T. Neftelino, Jeffrey P. Hodge, Cristina Oliva, Jay R. Campbell & Jia Xin Yu



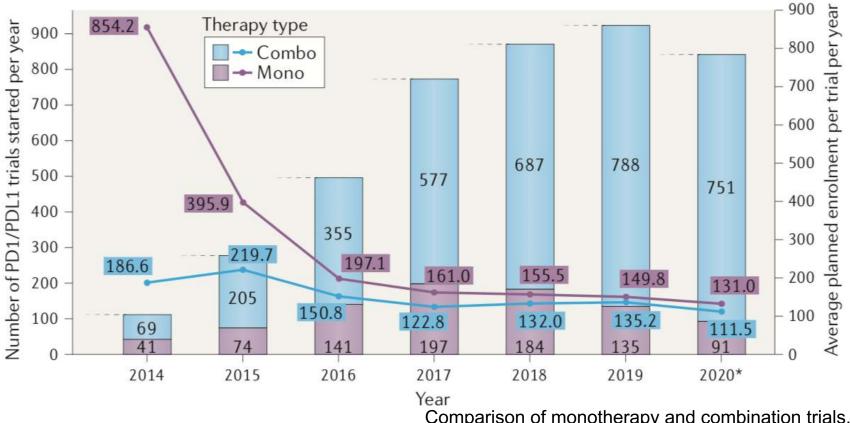




Clinical Accelerator

The landscape of anti-PD1/PDL1 mAb clinical trials in 2017 and 2020. As of September 2020, 4,400 clinical trials are in the current landscape, nearly tripling since in September 2017. Other PDx includes any anti-PD1/L1 mAbs without FDA approvals.

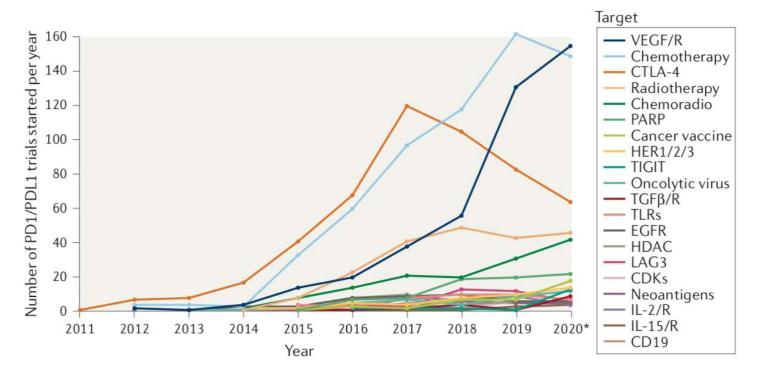






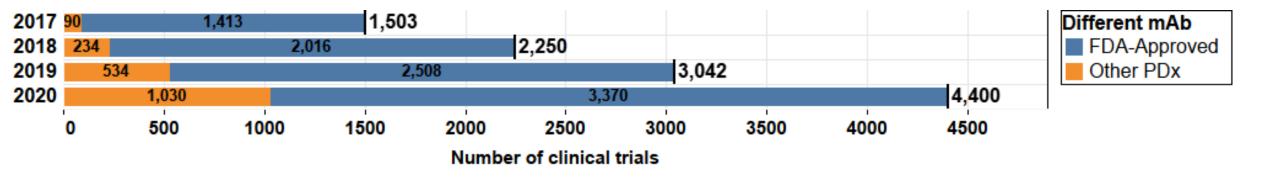
Comparison of monotherapy and combination trials. The majority of new trials since 2014 have been combination trials (bar graphs). The average planned patient enrolment (line graph) has decreased since 2014 for monotherapy trials more than for combination trials. *Only data from the first three quarters of 2020 were used to generate the analysis.







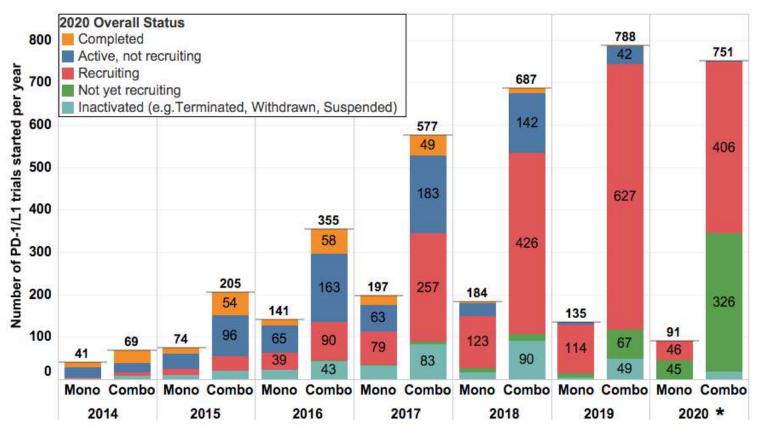
Main targets assessed in combination with anti-PD1/L1 mAbs. The graph shows the number of combination trials starting each year since 2011. The main 20 targets assessed in combination are shown in descending order according to the number of trials started in 2020. *Only data from the first three quarters of 2020 were used to generate the analysis.





Growth of landscape of PD1/L1 mAb clinical trials from 2017 to 2020. 4,400 clinical trials are in the current landscape as of September 2020, nearly tripling since in September 2017. FDA-approved mAbs include pembrolizumab, nivolumab, durvalumab, atezolizumab, avelumab, and cemiplimab. Other PDx include mAbs approved by regulatory agencies other than the FDA such as the EMA as well as those in clinical development and not yet approved.

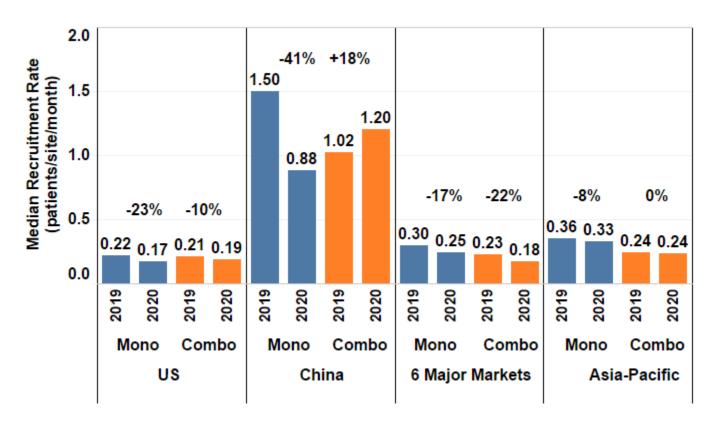






Anti-PD1/L1 monotherapy and combination trials started from 2014 to 2020 (*Only data from the first 3 quarters of 2020 were used to generate the analysis in the chart above.) The majority of trials started in last 4 years remain in recruitment phase, where the most recent trials have not started recruitment.

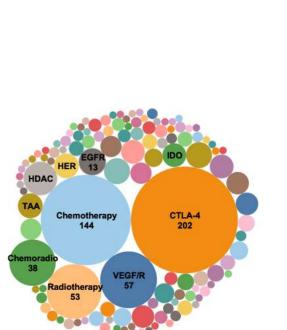




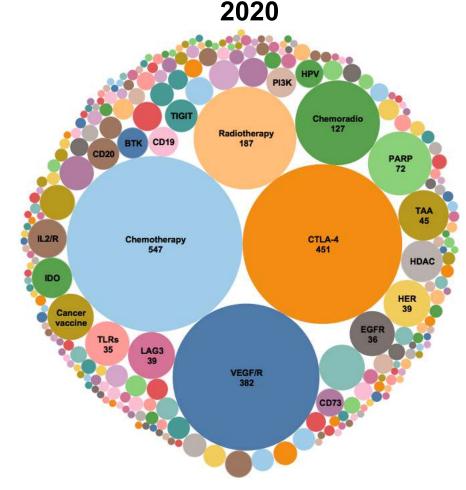


The median patient recruitment rate in different countries or regions in 2019 compared to 2020 with the percent change between the years. Six major markets are France, Germany, Italy, Japan, Spain and United Kingdom. The Asia-Pacific (APAC) area includes Australia, Hong Kong, Korea, New Zealand, Taiwan, and Thailand, while excluding China and Japan. Mono and Combo denote monotherapy and combination therapy trials respectively.



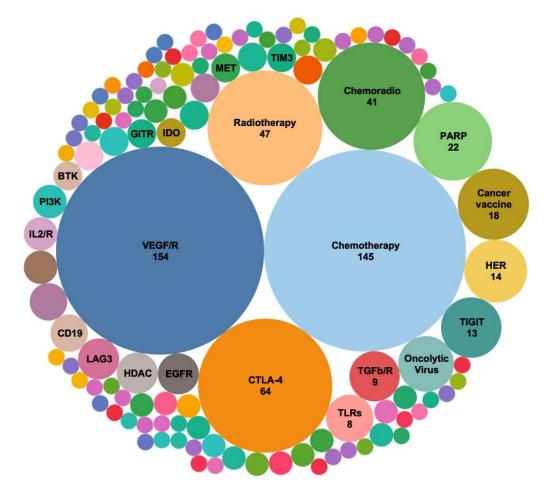


2017





Target landscapes of combination trials in 2020 and 2017. The number of combination trials has more than tripled in the past three years (2,900 compared to 857), with an increase of 129 additional combination target groups from 124 target groups. Similar targets are grouped together to better identify trends in year-to-year analyses.





Analysis of new combination trials (724 trials) starting in the year 2020* (*Only first 3 quarters of 2020 are included in the analysis.)