

LIVE EVENT

Cancer Progress

40 YEARS OF SCIENTIFIC DISCUSSIONS AND CONNECTIONS

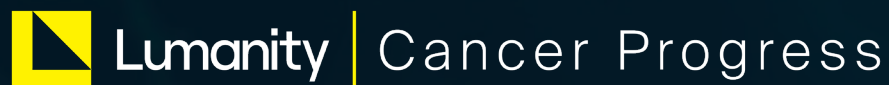
APRIL 2, 2025

NEW YORK GENOME CENTER

 Lumantia | Cancer Progress

Thank you to all our 2025 Sponsors in support of Damon Runyon Cancer Research Foundation

DAMON RUNYON
CANCER RESEARCH
FOUNDATION



NOW | 9:00 AM - 9:15 AM

Opening Address



Jeffrey Bockham, PhD

EVP, Oncology
Lumanity




Tom Murtagh, MBA

Joint Global Practice Lead,
Strategy & Insight Consulting

NEXT | 9:15 AM - 10:30 AM

Patient Voices: Shaping the Future of Cancer Care

 **Lumanity** | Cancer Progress

8:15 AM - 9:00 AM

Registration and Morning Networking

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Coffee Break

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Back to the Future: Next-Generation Platforms

12:00 PM - 1:00 PM

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Commercializing Uphill: Realizing Challenging Propositions

2:15 PM - 3:30 PM

Breaking with Dogmas: What is Holding us Back?

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Boats and the Tide: Changes in the Pharma Ecosystem

5:00 PM - 5:30 PM

Closing Remarks

5:30 PM - 7:30 PM

Reception and Networking

Our first iteration took place in 2012, after acquiring from its founders

23rd Annual Cancer Progress Conference
March 6 & 7, 2012
The Westin New York at Times Square

AGENDA

Tuesday, March 6, 2012

7:00am Continental Breakfast and Registration- Majestic Foyer

8:15 - 8:45am Opening Remarks
 Jeff Bockman, PhD, Vice President, Defined Health

8:45 - 9:45am Future of cancer therapy – Where have we been, where are we going?
 Moderator: Neal Rosen, MD, Professor of Medicine, Memorial Sloan-Kettering Cancer Center
 Panelists:

- Steven Averbuch, MD, Vice President, Early Global Clinical Research Oncology & Head, Pharmacodiagnosics, Bristol-Myers Squibb Company
- Larry Norton, MD, Deputy Physician-in-Chief for Breast Cancer Programs; Medical Director, Evelyn H. Lauder Breast Center; Norma S. Sarofim Chair in Clinical Oncology, Memorial Sloan-Kettering Cancer Center
- Geert Kolvenbag MD, PhD, Global Product Vice President, AstraZeneca

9:45 - 10:30am Keynote address: Angiogenesis
 George D. Yancopoulos, MD, PhD, Executive Vice President, Chief Scientific Officer, and President, Regeneron Research Laboratories

Oncology Deals Slowed, But So Did Most Other TAs

• Click to add text

Oncology M&A Activity (2007-2011)

Year	Deal Value (Oncology) (Billions USD)	Deal Value (All Other Therapeutic Areas) (Billions USD)
2007	10	35
2008	15	20
2009	5	20
2010	10	38
2011	5	5

Alliance Activity By Therapeutic Category (2007-2011)

Therapeutic Category	2007	2008	2009	2010
CNS	10	10	10	10
Oncology	35	30	30	30
Platform	30	30	30	30
Metabolic disease	10	10	10	10
Inflammation/immunology	10	10	10	10
Infectious disease	10	10	10	10
Cardiovascular	10	10	10	10
Vaccines	10	10	10	10
OTC/Genetic	10	10	10	10
Respiratory	10	10	10	10
Gastrointestinal	10	10	10	10
Dermatology	10	10	10	10
Ophthalmology	10	10	10	10
Rare disease	10	10	10	10

The data set comprises 120 M&A deals signed by Big Pharma, Big Biotech, and top four Japanese firms between 01/01/2007 and 05/02/2011. Not included in the analysis: the mega-mergers of Roche/Genentech, Merck/Schering-Plough, and Pfizer/Wyeth; Novartis' staged acquisition of Alcon was also excluded. Major acquisitions such as AstraZeneca's purchase of MedImmune, Sanofi's acquisition of Genzyme, and Schering's take-out of Organon were included in calculating a total potential deal value but were not classified as oncology deals since the acquisitions spanned multiple therapeutic areas. 2008 data set of oncology deal values includes Takeda/Millennium.

Source: In Vivo, May 2011

The data set includes 721 alliances signed by Big Pharma, Big Biotech, and Top Japan firms (Takeda, Astellas, Eisai, and Daiichi Sankyo) between 01/01/2007 and 12/31/2010. Alliances were categorized by therapeutic area; in cases where more than one product was licensed, the most advanced product was used to make the therapeutic area classification.

Logos: Cancer Progress, DefinedHealth unconventional insight, Therapeutic INSIGHT

Cancer Progress first launched in 1985, making this the 40th anniversary!



Defined Health and Communitech Market Intelligence to Collaborate on the 23rd Annual Cancer Progress Conference

October 6, 2011 | 4 min read



MORRISTOWN, NJ – Oct 5, 2011 -- Defined Health is pleased to announce our collaboration with Communitech Market Intelligence to produce the Twenty-Third Annual Cancer Progress Conference, which will be held at the Westin New York at Times Square on March 6th-7th 2012.

Communitech first launched Cancer Progress in 1985, and the conference has gained the utmost respect throughout the industry over the years. The typical audience consists of 150 senior

The last in-person Cancer Progress was scheduled for March 2020



CANCER PROGRESS

CANCER PROGRESS 2020 PANELS

- Paradigm-shifting platforms I, IO: Taking IO to the next Level
- Paradigm-shifting platforms II, Non-IO: Targeting Better, Targeting the Intractable
- Investing into Oncology: Who, What and Where?
- Vaccines: From Paleo to Neo, Cancer Vaccines in the New Age of IO
- Next Wave of Diagnostics, Including Precision IO: Early and Smarter, the Better to Cure
- Inflecting Value in Early Stage Biotech (in an Increasingly Cost Conscious Environment): Linking Proof of Relevance to Pricing & Reimbursement

AND INTRODUCING: ADVANCED THERAPEUTICS – 1/2 DAY SESSION

- Antigen/platform pairings ("Forget Wine and Cheese... Get this Right and Your Valuation Takes Flight")
- State of the Union for off-the-shelf ("In an 'All or Bust' Market, What's Rising to the Top of the Shelf?")
- What are investors and partners looking for today ("How to Stand Out/Inflect Value in a F frothy Vat of Cells")

THANK YOU TO OUR 2020 SPONSORS TO DATE



For Sponsorship Opportunities: Eileen Tuma | 973.292.5001 x5223 | etuma@cellohealth.com



CANCER PROGRESS

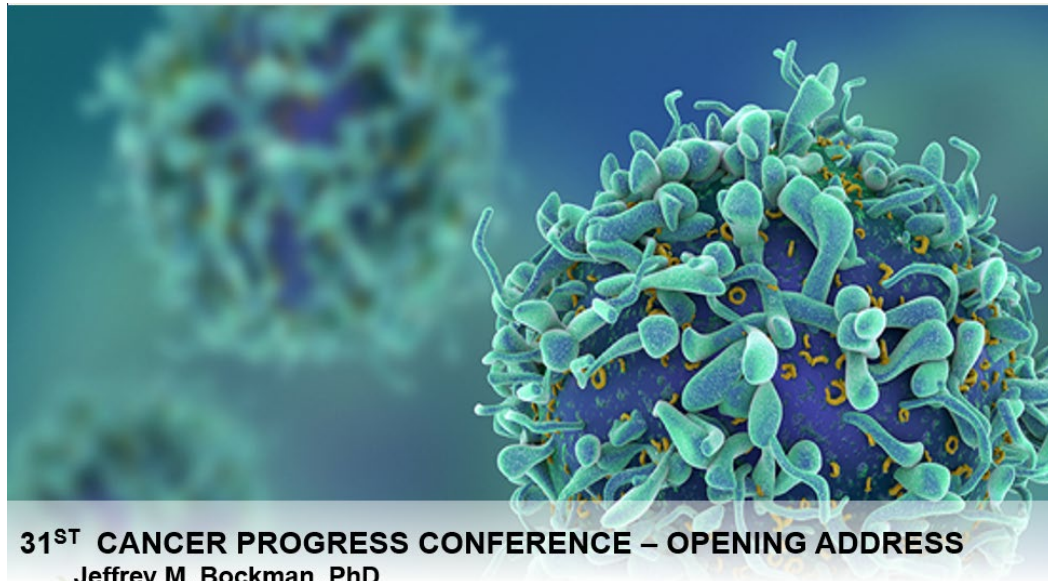
31ST ANNUAL CANCER PROGRESS CONFERENCE

MAY 5 - 6, 2020
CONVENÉ AT 32 OLD SLIP, NYC



Early Bird Code: EB2020 www.cancerprogressbycellohealth.com

Within a few weeks, we pivoted to a three-day virtual event



31ST CANCER PROGRESS CONFERENCE – OPENING ADDRESS
Jeffrey M. Bockman, PhD
EVP, Oncology Practice Head

© Cancer Progress by Cello Health 2020 | Wednesday, May 5-6, 2020 | cancerprogressbych.com | cellohealthbioconsulting.com | cellohealth.com



We then transitioned to a Cancer Progress webinar series

Upcoming Webinar | October 23, 2024 | 10:30am - 12:00pm ET

Adapting to Immuno-Oncology's R&D Challenges: Refocusing on Innate Immunity as a "Next Big Thing" in Cancer Immunotherapy

Moderated by:
Jeff Bockman, PhD, Expert Advisor, EVP Oncology, Lumanity
Viraj Parekh, PhD, Principal, Oncology Lead, Lumanity

Upcoming Webinar | November 20, 2024 | 10:30 AM EST

Upgrading ADCs to the Next Level: What Does the Future of Antibody Drug Conjugates Look Like?

Moderated by:
Jeff Bockman, PhD, Expert Advisor, EVP, Oncology, Lumanity
Viraj Parekh, PhD, Principal, Oncology Lead, Lumanity

Upcoming webinar

Oncology 2050: Have We Been Thinking About the Management of Cancer in the Right Way?

Cancer Progress
June 27, 2024 | 10:30am - 12pm ET

Upcoming webinar

What's Next for IO: What and When is the Next Game Changer?

Cancer Progress
April 30, 2024 | 10:30 AM -12:00 PM ET

Speakers and Moderators:

- Frank Borriello, MD, PhD
Founder and CEO, Alloplex Biotherapeutics
- Bjorn Frendeus, PhD
CSO, Biolvent International AB
- Anne Goubier, DVM, PhD
SVP Research and Early Development, Molecular Partners
- Art Krieg, MD
Founder, President and acting CEO/CSO, Zola Therapeutics
- Michael J Newman, PhD
Founder and CSO, Indaptus Therapeutics
- Heidi LeBlanc, PhD
Associate Director, Immuno-oncology, Omeros Corporation
- Asthika Goonewardene, MBA
Managing Director, Senior Biotech Analyst
Truist Securities
- Greg Dwyer, MBA
Head of Business Development
Orum Therapeutics
- Jeremy Sauer, PhD
Director, External Innovation for ADC Discovery and Cancer Immunology
Pfizer
- John M. Lambert, PhD
Consultant/Scientific Advisor & former CSO
ImmunoGen, Inc.
- Michael King
CEO
Oqony, Inc.
- Michael T. Stumpp, PhD
EVP Projects
Molecular Partners AG
- Dr. Krystle Karoscik
Chief Operating Officer
INNOVOTEX Inc.

And now five years later, finally...




Live from New
York, it's Cancer
Progress!

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Patient Voices: Shaping the Future of Cancer Care

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Coffee Break

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Angela Wheeler

President, Insight USA & Patient Center of Excellence Lead
Lumanity

MODERATOR



Michael Cramer

Cancer survivor,
Patient advocate,
Social Influencer
"Michael and Mom Talk
Cancer"



Ashlee Cramer

Caregiver and advocate,
Social Influencer
"Michael and Mom
Talk Cancer"



T.J. Sharpe

Patient Engagement
Expert, Sharpe Patient
Insights

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Back to the Future: Next-Generation Platforms



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EVP, Oncology
Lumanity

MODERATOR



Kaitlyn Andreano, PhD

Engagement Manager,
Strategy Consulting
Lumanity



**Francesca Barone,
MD, PhD**

CSO
Candel Therapeutics



Kapil Dhingra, MD

Managing Member
KAPital Consulting



Lucy Kappel, PhD

VP, Head of Oncology
BD Regeneron
Pharmaceuticals



Amy Han

VP, Global
Commercialization,
Solid Tumors, Genmab



Axel Hoos, MD, PhD

Former CEO
Scorpion Therapeutics



Lakshmi Srinivasan, PhD

Executive Director Oncology
Translational Medicine
Moderna Therapeutics

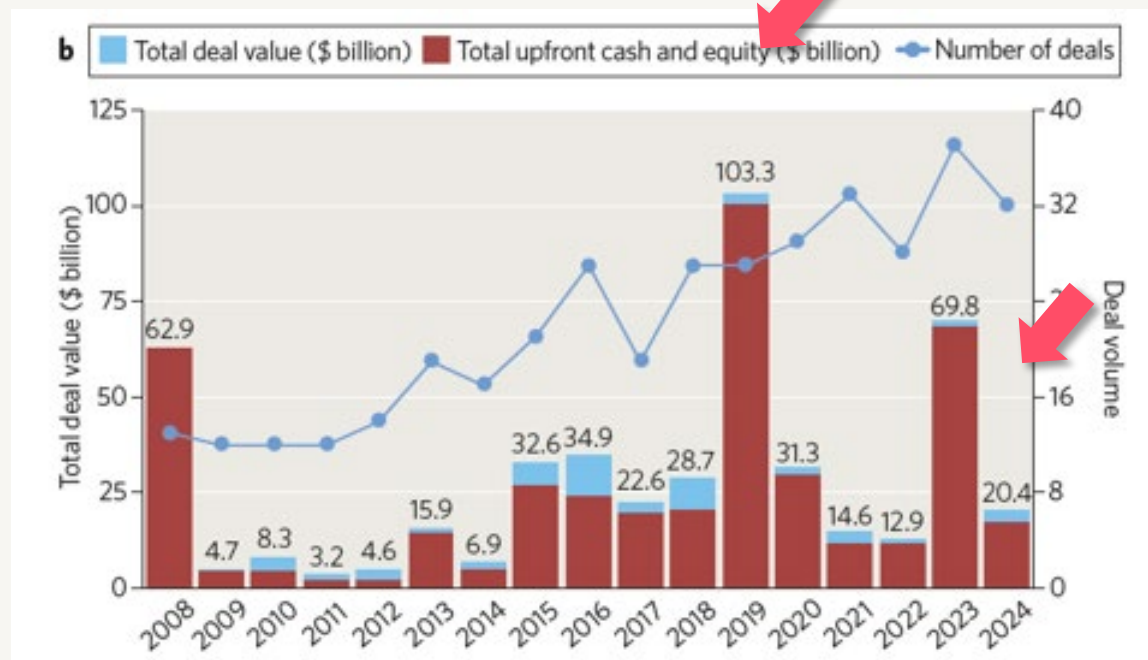
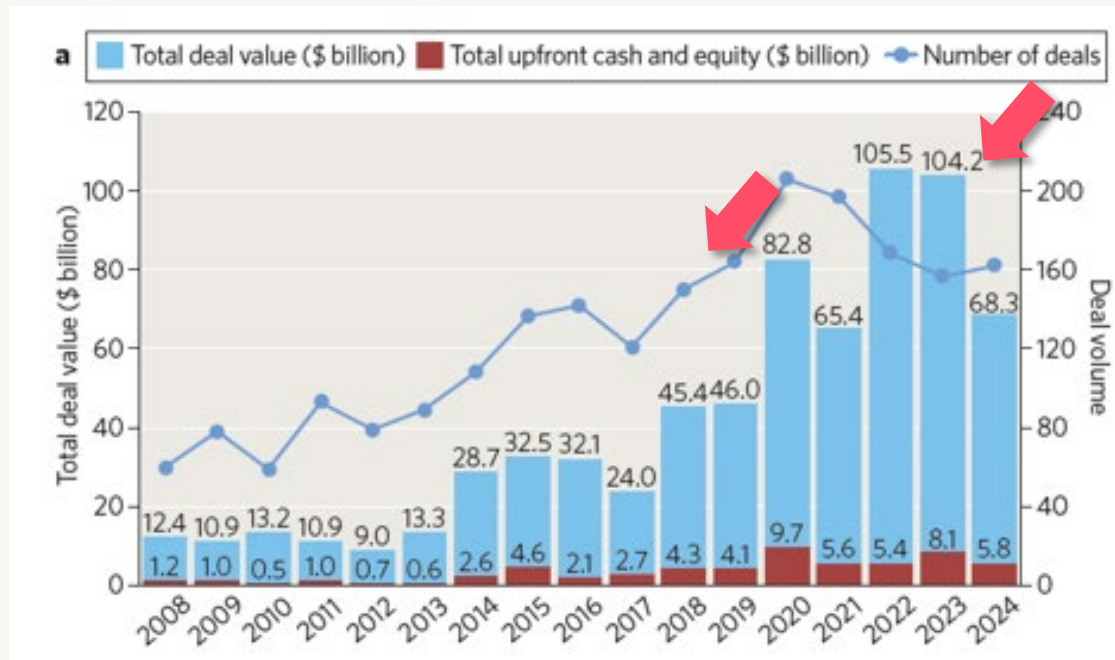


Dominique Verhelle, PhD

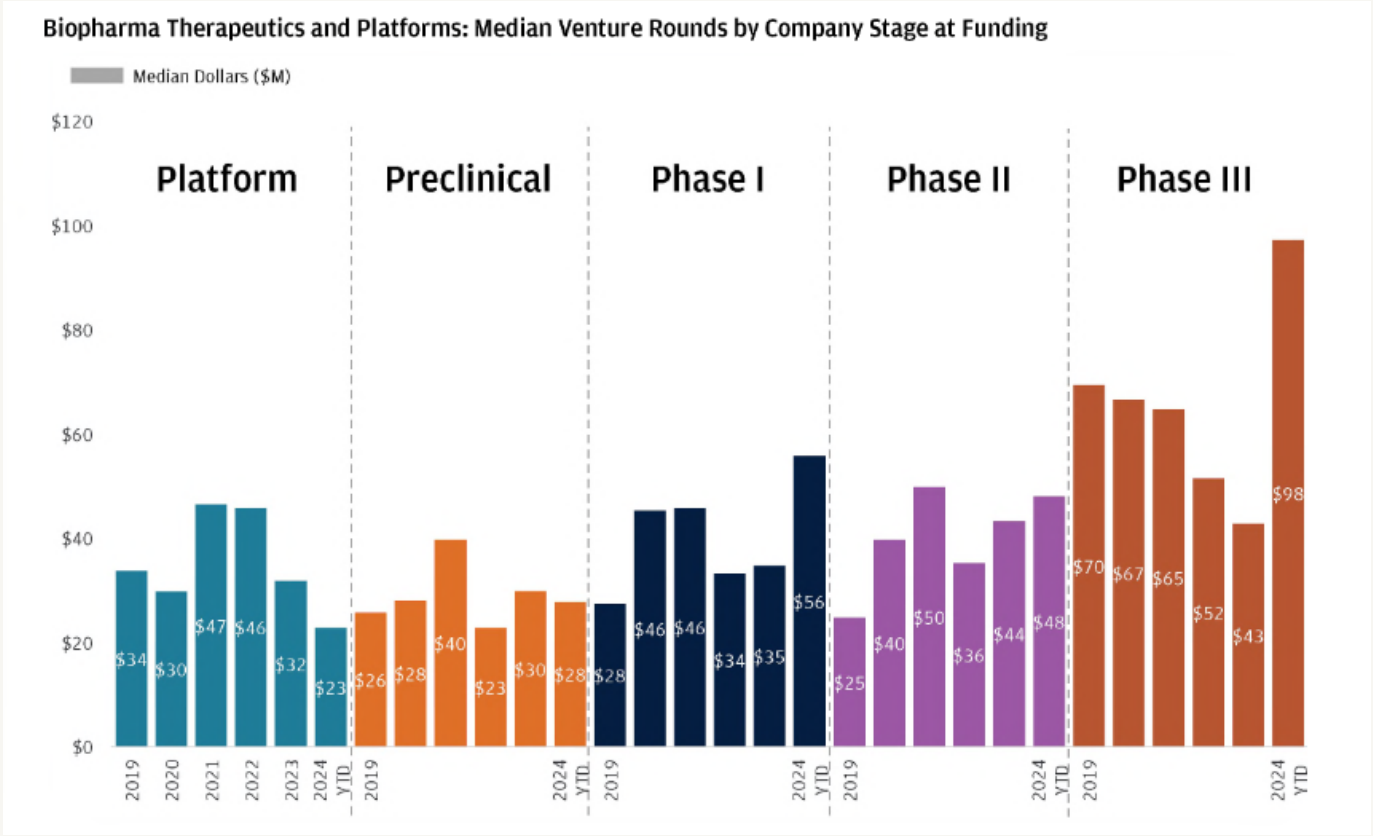
MBA, Co-Founder & CEO
NextRNA Therapeutics

Firstly, yes, oncology activity is down—but while licensing is up, M&A is indeed down

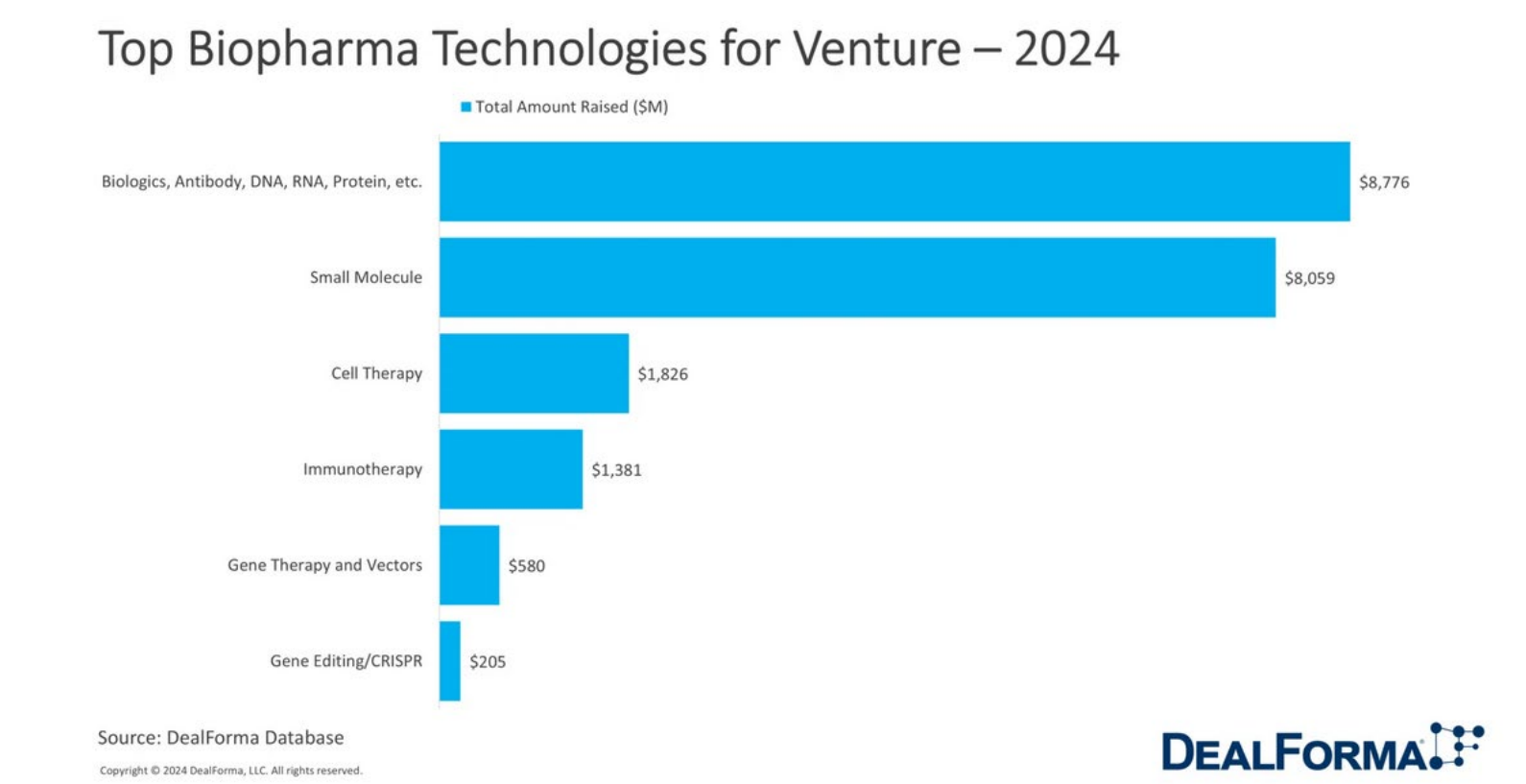
Figure 1: Biopharma activity. **a**, Partnership activity in oncology licensing. **b**, Merger and acquisition (M&A) activity in oncology. **Source:** DealForma.



Across biotech, across TAs, platform investment – and interest – waxes and wanes



Investment by modality (across TAs)



Biologic platforms – and programs derived thereof – dominate oncology licensing deals

90% of Value per March 2025 Nature Article, Versus ~70% per March 2019 Nature Article

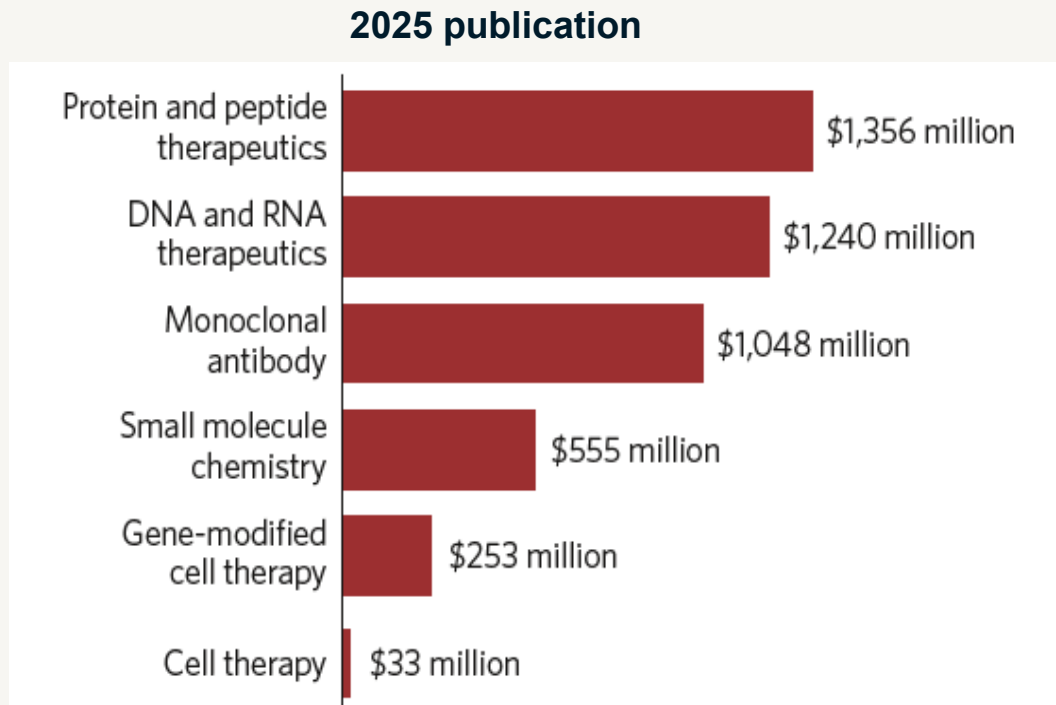


Fig.3 | Average deal value by technology for all oncology licensing deals from 2023 to 2025. Source: Evaluate.

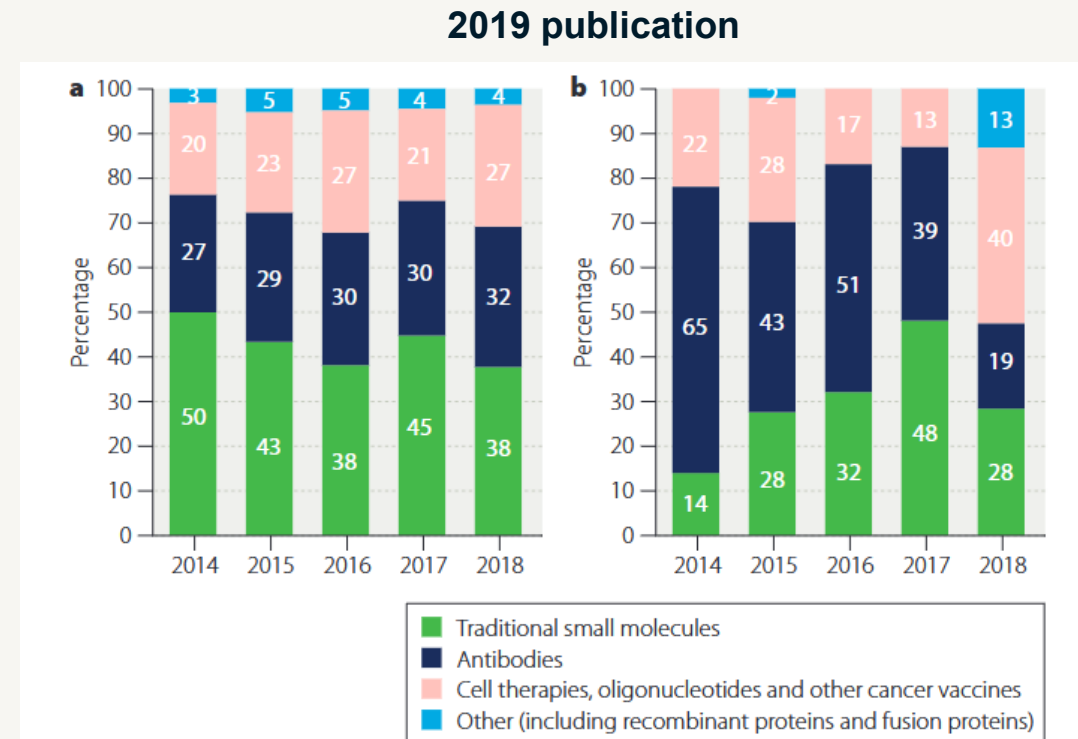
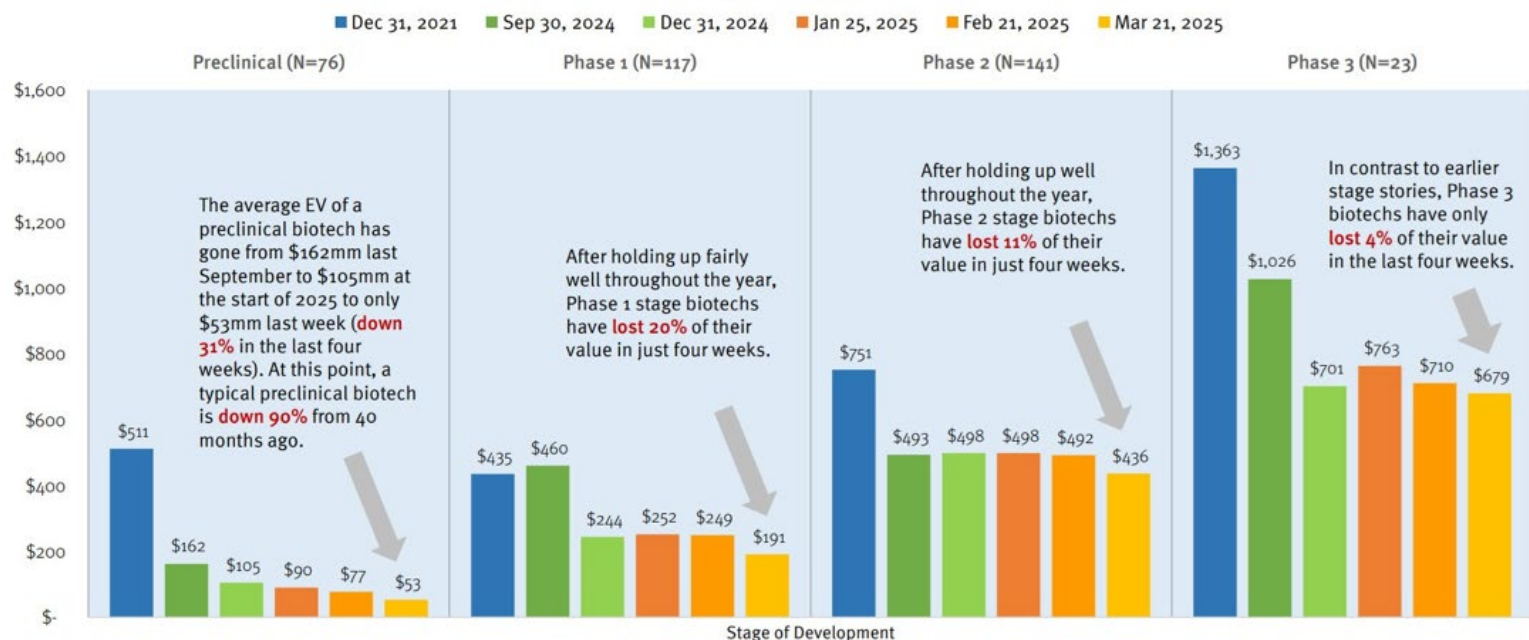


Fig. 3 | Technology breakdown of oncology licensing. Breakdown by deal volume (a) and total projected deal value (b). For details of the dataset, see Box 1.

Times are tough – and getting tougher – for early-stage companies

Biotech Market is Penalizing Early-Stage Stories

Average Enterprise Value of a Biotech Listed on U.S. Exchanges by Stage of Development, Dec 31 2021 to Mar 21, 2025 (\$ Millions)



A few simple topics to address...

- Unprecedented innovation everywhere, the issue always has been, but is especially true these days: how to fund the discovery and development of such innovation? For the established BioPharma companies, we discussed the tension between early and late-stage programs
- Early biotech has a variant issue: how to raise the funds, how to convince investors and/or partners of the value?
- Another struggle that platform companies face, whether large or small (albeit with different twists) is whether to deploy the technology against well validated targets and if so, can clinically relevant diffraction be achieved; or to go after less validated targets? Or in other words, how to balance clinical/commercial risk versus technical risk
- As the slides I quickly opened with show, industry interest in platforms waxes and wanes. And there is now a push for clinical assets, and this in turn has, in part, driven the rush of China deals. How are each of you dealing with these challenges/opportunities?
- Both for internal programs as well as external ones being considered: what triggers the go/no go or interest in a partnership, respectively— are there types of preclinical readouts you value? Are there new endpoints for FIH, such as ctDNA?
- We are heavily represented here by biologics focused platform companies. So, true to the session's title, what are the next innovations in biologics: in antibodies, in RNA therapies (using and targeting), in cell therapies?
- We have major LOE looming, especially the checkpoint inhibitors. That's a big gap to fill on a company and Oncology basis. How are each of you thinking about the broadness vs the narrowness of the utility of your programs as you prioritize internally, as you messages externally? Or a variant question: how are you thinking about ROI?
- The past five years have been a wild ride for biotech, broadly, and for Oncology. And especially for Immuno-Oncology. We have seen Oncology cede some of its long-standing dominance in funding and partnering to AIID, Obesity, etc. So, big question as we near the end of our session: what is the state of Oncology, of IO, or precision oncology?

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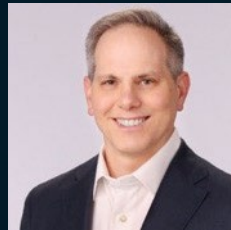
Commercializing Uphill: Realizing Challenging Propositions



Martin Strebl-Bantillo, PhD

Principal, Strategy Consulting
Lumanity

MODERATOR



Alan Bash

President, Carvykti
Legend Biotech



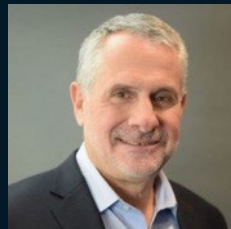
Adriana Herrera

CEO
Pierre Fabre
Pharmaceuticals, Inc.



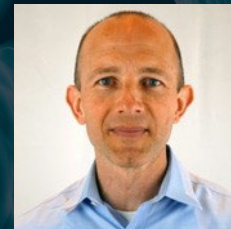
Laura Johnson, PhD

COO, CSO
Verismo Therapeutics



Ed Saltzman

Senior Strategic Advisor
Lumanity



John Wiggins


VP, Isotope Strategy
Lantheus

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Breaking with Dogmas: What is Holding us Back?



Dennis Chang, PhD

SVP, Strategy Consulting
Lumanity

MODERATOR



Dr. Qasim Ahmad

Chief Medical Officer
IO Biotech



Kapil Dhingra, MD

Managing Member
KAPital Consulting



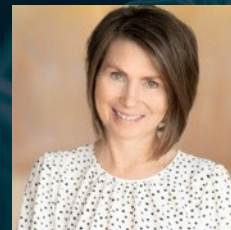
Matthew Maurer, MD

Chief Medical Officer
Myeloid Therapeutics



Joe Guidi

VP, Global Medical Early
Differentiation and Pipeline
Bristol Myers Squibb



Kate Yen, PhD

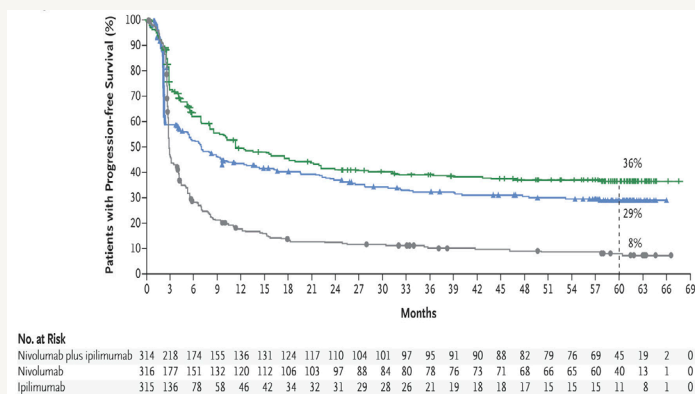
Founder and CEO
Auron Therapeutics

Oncology drug development does “work”

In the last 15 years, we have seen transformative successes including:

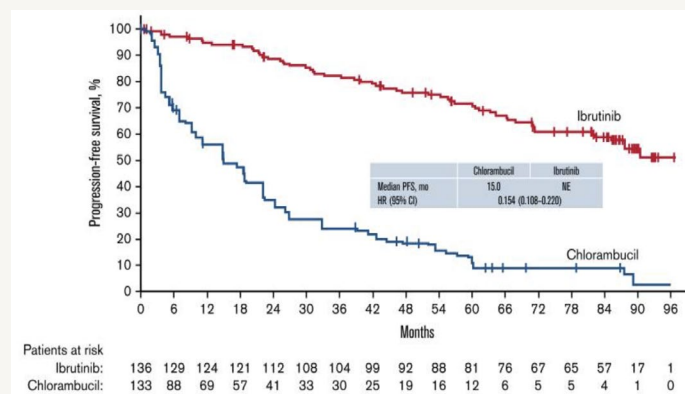
Curative Immunotherapies

- Nivo ± Ipi for metastatic melanoma
- Anti-PD1 ± chemo for many indications
- CD19 CAR-T for r/r B-ALL and B-NHL
- ...



“Functional cures” in hematology

- BTK inhibitors for 1L CLL/SLL
- Anti-CD38 combos for 1L MM
- ...



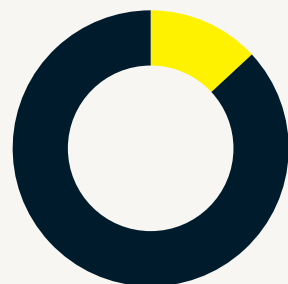
Precision medicines for new patient populations

- KRAS G12C inhibitors
- PARPi for BRCAm/HRD cancers
- T-DXd for HER2-low/ultra-low breast cancer
- MET inhibitors for MET-mut NSCLC
- BRAFi + MEKi for BRAF V600E
- NTRKi for NTRK fusions
- RETi for RET fusions
- ...

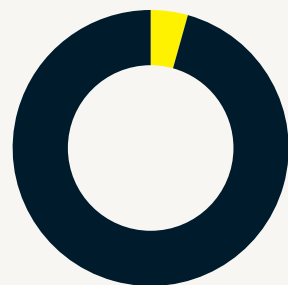
...so why break with dogma?

The probability of success is dismal

14% of new chemical substances that enter clinical trials at large pharma companies achieve regulatory approval (all therapeutic areas)

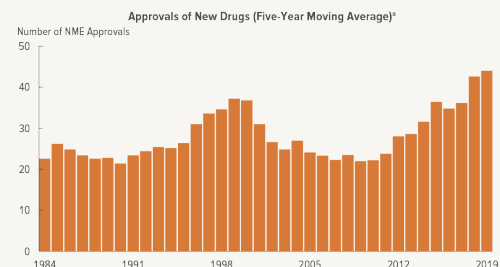
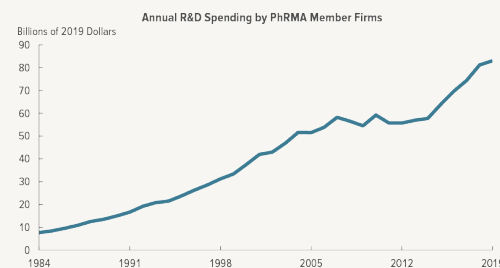


3.4-5.3% of oncology programs entering phase 1 advance to regulatory approval

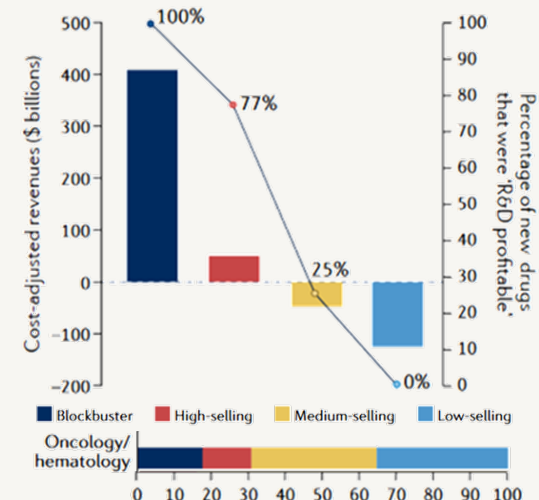


R&D costs more and has poorer ROI than ever

R&D spending has outpaced drug approvals

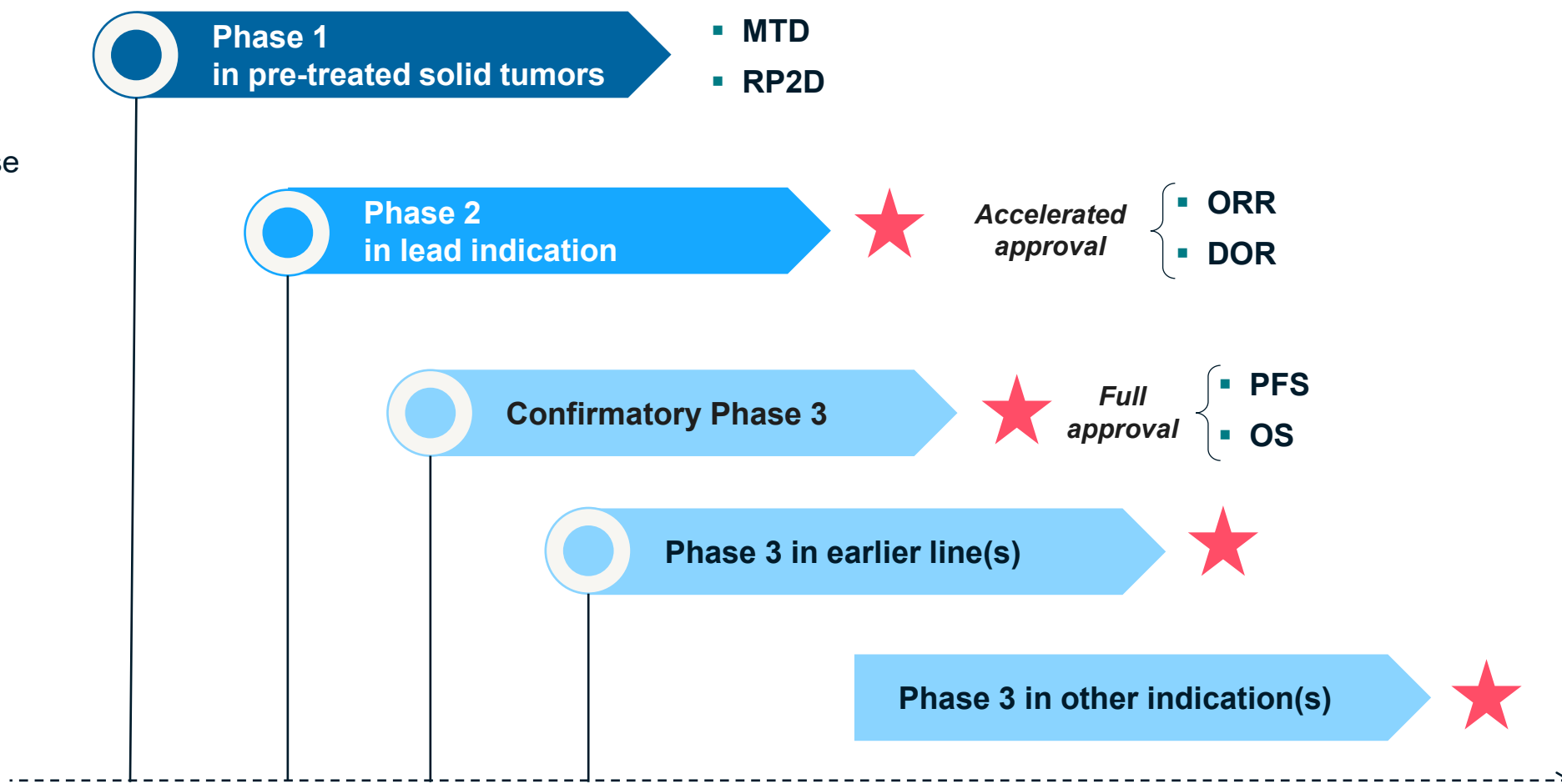


Most drugs are not 'R&D profitable'



A 'typical' oncology R&D paradigm—for the last 30+ years

- Compound identification and validation
- Preclinical evidence of activity in cell lines, mouse tumors, and PDX models
- Toxicology, PK/PD

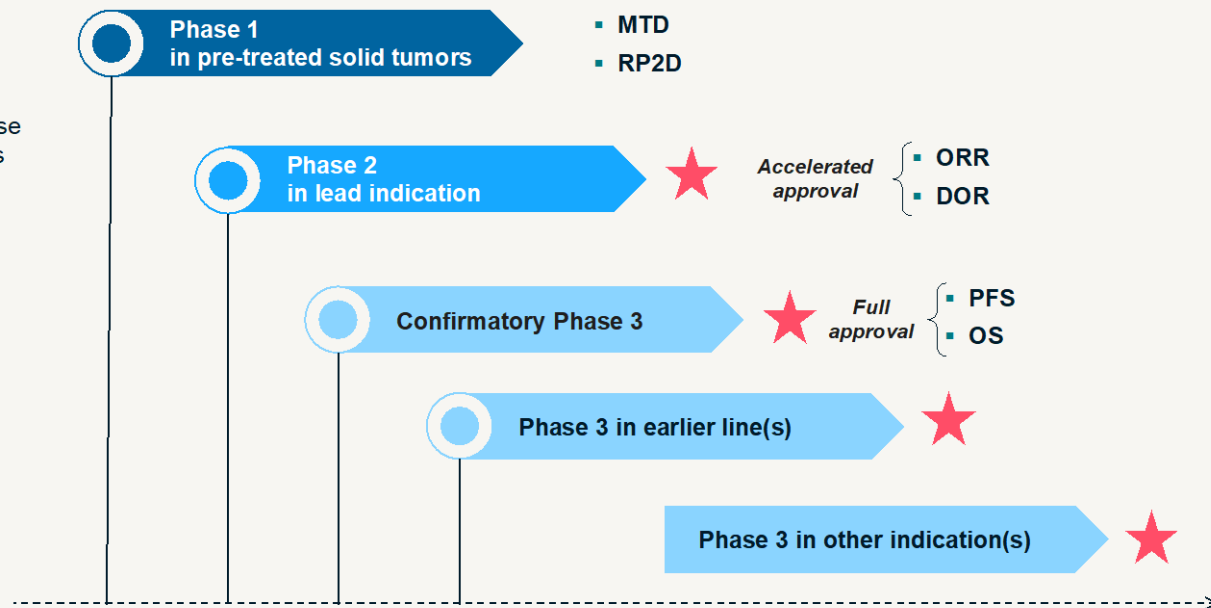


When should we break from this paradigm?



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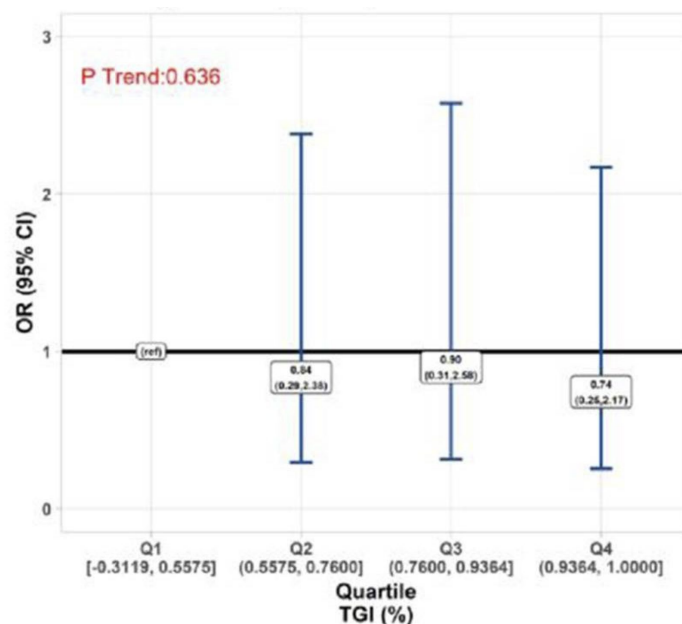


- When are current preclinical models unable to show drug activity?
- When is late-line cancer a poor setting for signal-finding?
- When are response endpoints poor metrics for treatment efficacy?
- When does the traditional sequencing strategy fail to demonstrate value?

Preclinical/translational models to test novel biology



Tumor growth inhibition (TGI) in murine models and success of lung cancer drugs (1996 – 2014)



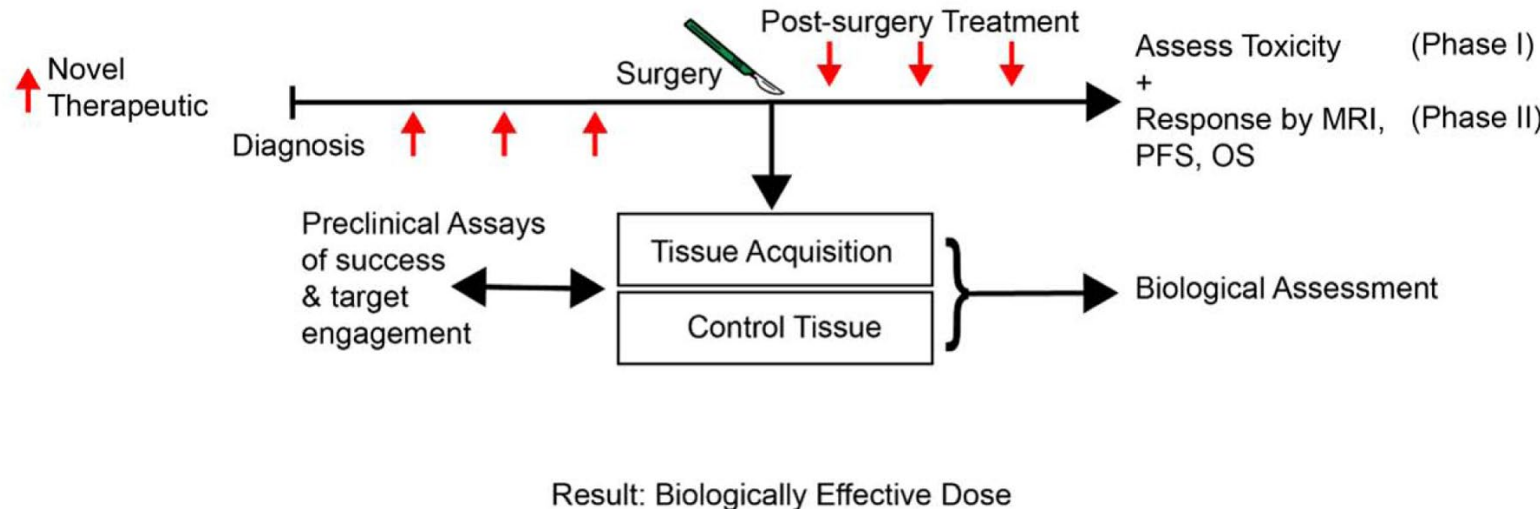
- What cancer biology demands different model systems?
- What needs to change about our approach to preclinical / translational research?
 - Mindsets
 - Methodologies
 - Technologies
 - Funding and incentives
 - Public-private partnerships

Neoadjuvant window-of-opportunity studies



Key Components

1. Tissue acquisition
2. Molecular Assay
3. Dosing schedule



- When should we take this approach to signal-finding?
- What barriers/challenges must be overcome?
 - Mindsets
 - Methodologies
 - Technologies
 - Collaboration models

Turning cancer into a chronically manageable disease



Success Stories So Far

Cancer Type	Median PFS in 1L
CML (chronic myeloid leukemia)	>> 10 years
CLL (chronic lymphocytic leukemia)	6–9 years
FL (follicular lymphoma)	6–8+ years
MM (multiple myeloma)	5–7 years
ALK+ NSCLC (non-small cell lung cancer)	3–6+ years

- When should we take this approach to signal-finding?
- What barriers/challenges must be overcome?
 - Mindsets
 - Methodologies
 - Technologies
 - Collaboration models

In vivo reprogramming of solid tumors



OCTOBER 23, 2024 | PRESS RELEASE

Interius BioTherapeutics Doses First Patient with in vivo Chimeric Antigen Receptor (CAR) Gene Therapy for B-cell Malignancies

INT2104 is a novel in vivo chimeric antigen receptor (CAR) gene therapy designed to generate CAR-T and CAR-NK cells in the patient's body to target CD20-expressing malignant B cells

Interim safety and proof-of-concept data to be presented at a scientific meeting in 1H 2025

Astellas and Kelonia Therapeutics Enter into Research and License Agreement to Develop Novel Immuno-Oncology Therapeutics

NEWS PROVIDED BY ASTELLAS PHARMA INC. → Feb 15, 2024, 10:30 ET




AbbVie and Umoja Biopharma Announce Strategic Collaboration to Develop Novel In-Situ CAR-T Cell Therapies

NEWS PROVIDED BY AbbVie → Jan 04, 2024, 08:45 ET


ZACKS

Sanofi Inks \$1.9B Deal With Dren Bio to Buy Autoimmune Disease Drug

March 20, 2025 — 12:30 pm EDT

Written by Zacks Equity Research for Zacks →

SHARE THIS ARTICLE



- Billions of \$ spent on T cell therapies, with limited success in solid tumors
- TME barriers limit trafficking, persistence, and efficacy
- What has to change?
 - Mindsets / decision rules
 - New platform technologies
 - Delivery efficiency
 - Overcoming TME immunosuppression
 - Beyond T cells
 - New clinical development approaches
- What are the low-hanging fruit?

Disease	Therapy	Trial	CR	2y EFS	
Hem.	ALL	Ex vivo CAR-T: Tisa-cel	ELIANA	81%	~50%
	DLBCL	Ex vivo CAR-T: Axi-cel	ZUMA-1	58%	~40%
	MM	Ex vivo CAR-T: Ide-cel	KarMMa-3	39%	~30%
Solid	SS	Ex vivo TCR-T: Afami-cel	SPEARHEAD-1	0%	~10%
	NMIBC	In vivo GT: Adstiladrin	CS-003	51%	~36%

Other paradigms/reasons to break with dogma



Examples of paradigms		Past successes
Early interception	Can cancer be prevented by treating at-risk populations?	<ul style="list-style-type: none"> HPV vaccines Tamoxifen for breast cancer prevention
Truly synergistic combinations	Can we identify combinations with more-than-additive efficacy?	<ul style="list-style-type: none"> CDK4i + ET for HR+ breast cancer Anti-LAG3 + anti-PD1 for melanoma
Down-staging oligometastatic cancer	Can we convert a subset of metastatic cancer into surgically curable disease?	<ul style="list-style-type: none"> <i>Studies ongoing</i>
“Try-it-all” precision oncology	Can we personalize treatment empirically in “avatar” models?	<ul style="list-style-type: none"> <i>Studies ongoing</i>
Current paradigm but more efficiently	How can we streamline clinical & regulatory processes/requirements?	<ul style="list-style-type: none"> AA pathway BTD CDx co-dev.

What is holding us back from realizing new paradigms?

- **Blind spots/misperceptions:** How are we looking at the world the wrong way?
- **Misaligned incentives/flawed strategies:** How are we making decisions the wrong way?
- **Hurdles to implementation:** How are we stumbling in execution?

Final thoughts



**Who's going to
pay for it?**

**What should we do
differently tomorrow?**

NOW | 3:30 PM – 3:45 PM

Coffee Break

 Lumany | Cancer Progress

Thank you to all our 2025 Sponsors in support of Damon Runyon Cancer Research Foundation



3:45 PM – 5:00 PM

Boats and the Tide: Changes in the Pharma Ecosystem



Michael Parisi, MBA

Global Practice Lead, Medical
Strategy & Communications
Lumanity

MODERATOR



Ed Saltzman

Senior Strategic Advisor
Lumanity

MODERATOR



JS Cleiftie, MS, MBA

CBO & CFO
NextRNA Therapeutics



Axel Hoos, MD, PhD

Former CEO
Scorpion Therapeutics



Llew Keltner, MD, PhD

CEO
EPISTAT

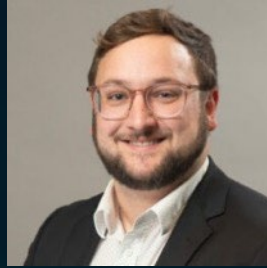


Kelly Page, MBA

SVP, Global Head of
Oncology Strategy &
Program Leadership
Arvinas

5:00 PM – 5:30 PM

Closing Session



Martin Strebl-Bantillo, PhD

Principal, Strategy Consulting
Lumanity



Yung Lie, PhD

President & CEO,
Damon Runyon Cancer
Research Foundation

NOW | 5:30 PM – 7:30 PM

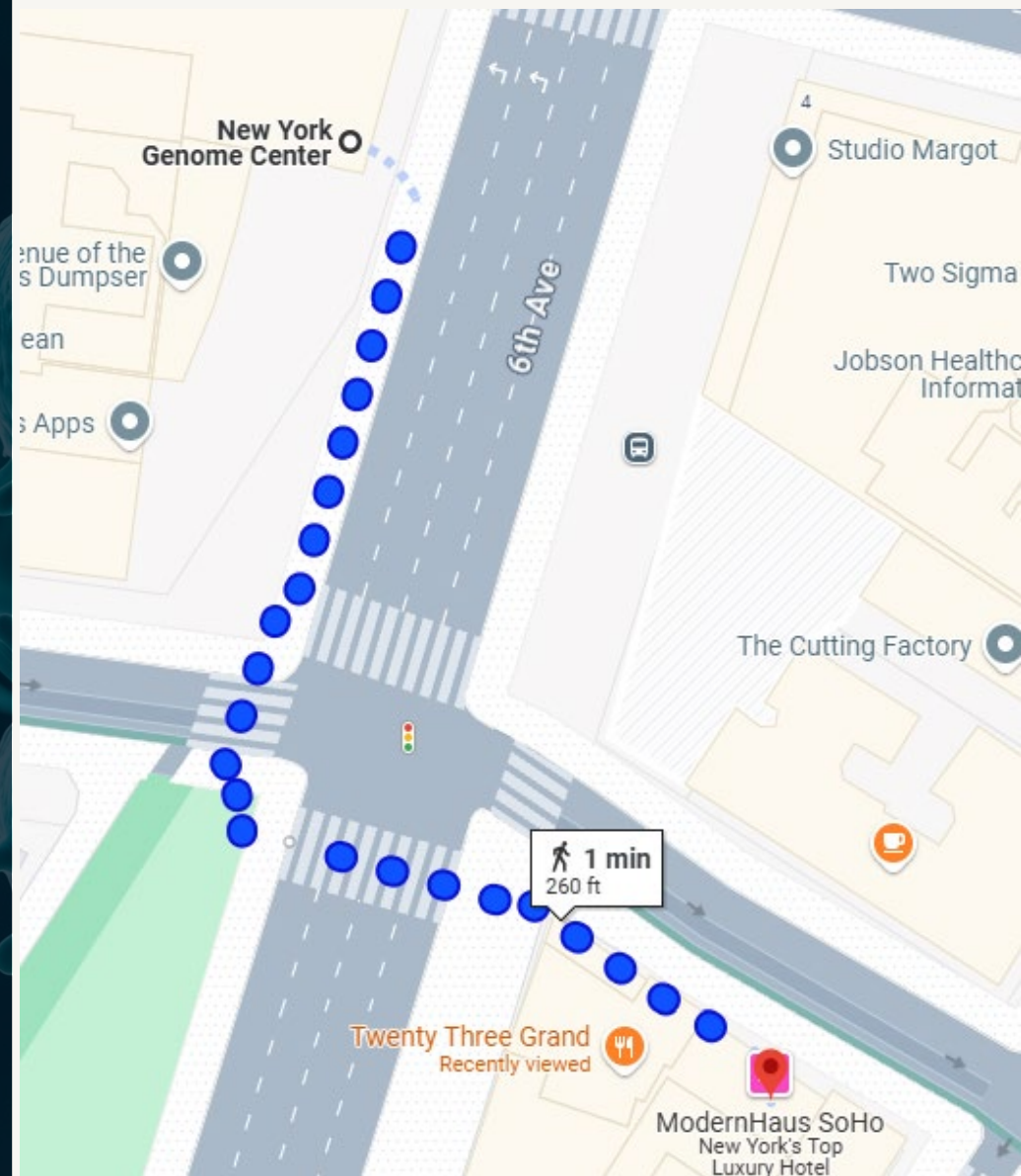
Reception and Networking

Jumpin Jacks at ModernHaus

*ModernHaus SoHo
27 Grand Street, Second Floor*



 Lumantia | Cancer Progress



Thank you for attending Cancer Progress!

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