

# Kidney Transplant Rejection - Pipeline Insight, 2021

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# **Abstracts**

This report can be delivered to the clients within 2-3 business days

DelveInsight's, "Kidney Transplant Rejection – Pipeline Insight, 2021," report provides comprehensive insights about 15+ companies and 15+ pipeline drugs in Kidney Transplant Rejection pipeline landscape. It covers the pipeline drug profiles, including clinical and nonclinical stage products. It also covers the therapeutics assessment by product type, stage, route of administration, and molecule type. It further highlights the inactive pipeline products in this space.

**Geography Covered** 

Global coverage

Kidney Transplant Rejection Understanding

Kidney Transplant Rejection: Overview

Renal transplant rejection is an immunological response that leads to inflammation with specific pathological changes in the allograft, due to the recipient's immune system recognizing the non-self (foreign) antigen in the allograft. Kidney transplantation is the treatment of choice in patients with end-stage renal disease or severe chronic kidney disease as it improves the quality of life and has better survival advantages compared to dialysis. Depending on the histopathology and immunological characteristics, the renal transplant rejections can be classified broadly under the following categories:

1) Hyperacute rejection: Happens minutes after transplant, and it is related to the preformed antibody or ABO incompatibility; this is rarely seen now due to the very



sensitive cross-match tests performed before the transplant.

2) Acute rejection: This can happen any time after transplant, usually within days to weeks after transplant. It classifies into the following:

A) Antibody-mediated rejection- ABMR: which usually demonstrates evidence of circulating donor-specific alloantibodies and immunological evidence of antibody-mediated injuries to the kidney. Like inflammation of glomeruli (Glomerulitis) or peritubular capillary (peritubular capillaritis).

B) Acute T-cell mediated rejection- TCMR: which characterized by lymphocytic infiltration of the tubules, interstitium, and sometimes the arterial intima.

3) Chronic rejection: It usually develops more than three months post-transplant. It can either be chronic antibody-mediated rejection or chronic T cells mediated rejection.

4) A mixture of acute rejection superimposed on chronic rejection.

The treatment plan determination uses multiple factors, including the type of rejection, the severity of the histological lesion, the chronicity score, and the recipient comorbidity.

'Kidney Transplant Rejection - Pipeline Insight, 2021' report by DelveInsight outlays comprehensive insights of present scenario and growth prospects across the indication. A detailed picture of the Kidney Transplant Rejection pipeline landscape is provided which includes the disease overview and Kidney Transplant Rejection treatment guidelines. The assessment part of the report embraces, in depth Kidney Transplant Rejection commercial assessment and clinical assessment of the pipeline products under development. In the report, detailed description of the drug is given which includes mechanism of action of the drug, clinical studies, NDA approvals (if any), and product development activities comprising the technology, Kidney Transplant Rejection collaborations, licensing, mergers and acquisition, funding, designations and other product related details.

### **Report Highlights**

The companies and academics are working to assess challenges and seek opportunities that could influence Kidney Transplant Rejection R&D. The therapies under development are focused on novel approaches to treat/improve Kidney Transplant Rejection.



Kidney Transplant Rejection Emerging Drugs Chapters

This segment of the Kidney Transplant Rejection report encloses its detailed analysis of various drugs in different stages of clinical development, including phase II, I, preclinical and Discovery. It also helps to understand clinical trial details, expressive pharmacological action, agreements and collaborations, and the latest news and press releases.

Kidney Transplant Rejection Emerging Drugs

MDR-101: Medeor Therapeutics

Medeor Therapeutics lead product candidate MDR-101 is a cellular therapy manufactured from a living kidney donor's blood and bone marrow cells. The therapy is designed to allow certain kidney transplant recipients — with a genetically matched, or HLA-matched, living kidney donor — to stop all immunosuppressive (anti-rejection) drug use, while preserving long-term transplant kidney function and survival. A Phase II trial of the Stanford predecessor product candidate demonstrated the ability to achieve persistent mixed chimerism in the majority of patients. The company is currently enrolling patients in a pivotal Phase III clinical trial.

Clazakizumab: CSL Behring

Clazakizumab (CSL300), our anti-interleukin-6 (IL6) monoclonal antibody, is currently being investigated in a Phase III clinical trial for the potential treatment of chronic active antibody-mediated rejection (AMR), the leading cause of long-term rejection in kidney transplant recipients.

Further product details are provided in the report.

Kidney Transplant Rejection: Therapeutic Assessment

This segment of the report provides insights about the different Kidney Transplant Rejection drugs segregated based on following parameters that define the scope of the report, such as:



Major Players in Kidney Transplant Rejection

There are approx. 15+ key companies which are developing the therapies for Kidney Transplant Rejection. The companies which have their Kidney Transplant Rejection drug candidates in the most advanced stage, i.e. Phase III include, Medeor Therapeutics.

Phases

DelveInsight's report covers around 15+ products under different phases of clinical development like

Late stage products (Phase III)

Mid-stage products (Phase II)

Early-stage product (Phase I) along with the details of

Pre-clinical and Discovery stage candidates

Discontinued & Inactive candidates

Route of Administration

Kidney Transplant Rejection pipeline report provides the therapeutic assessment of the pipeline drugs by the Route of Administration. Products have been categorized under various ROAs such as

Oral

Parenteral

Intravenous

Subcutaneous



Topical

Molecule Type

Products have been categorized under various Molecule types such as

Monoclonal Antibody Peptides Polymer Small molecule Gene therapy Product Type

Drugs have been categorized under various product types like Mono, Combination and Mono/Combination.

Kidney Transplant Rejection: Pipeline Development Activities

The report provides insights into different therapeutic candidates in phase II, I, preclinical and discovery stage. It also analyses Kidney Transplant Rejection therapeutic drugs key players involved in developing key drugs.

Pipeline Development Activities

The report covers the detailed information of collaborations, acquisition and merger, licensing along with a thorough therapeutic assessment of emerging Kidney Transplant Rejection drugs.

Kidney Transplant Rejection Report Insights

Kidney Transplant Rejection Pipeline Analysis



Therapeutic Assessment

**Unmet Needs** 

Impact of Drugs

#### Kidney Transplant Rejection Report Assessment

**Pipeline Product Profiles** 

Therapeutic Assessment

**Pipeline Assessment** 

Inactive drugs assessment

**Unmet Needs** 

#### **Key Questions**

Current Treatment Scenario and Emerging Therapies:

How many companies are developing Kidney Transplant Rejection drugs?

How many Kidney Transplant Rejection drugs are developed by each company?

How many emerging drugs are in mid-stage, and late-stage of development for the treatment of Kidney Transplant Rejection?

What are the key collaborations (Industry–Industry, Industry–Academia), Mergers and acquisitions, licensing activities related to the Kidney Transplant Rejection therapeutics?

What are the recent trends, drug types and novel technologies developed to overcome the limitation of existing therapies?

What are the clinical studies going on for Kidney Transplant Rejection and their



status?

What are the key designations that have been granted to the emerging drugs?



### **Contents**

Introduction
Executive Summary
Kidney Transplant Rejection: Overview
Causes
Mechanism of Action
Signs and Symptoms
Diagnosis
Disease Management
Pipeline Therapeutics
Comparative Analysis
Therapeutic Assessment
Assessment by Product Type
Assessment by Stage and Product Type
Assessment by Route of Administration
Assessment by Stage and Route of Administration
Assessment by Molecule Type
Assessment by Stage and Molecule Type
Late Stage Products (Phase III)
Comparative Analysis
MDR-101: Medeor Therapeutics
Product Description
Research and Development
Product Development Activities
Drug profiles in the detailed report.
Mid Stage Products (Phase II)
Comparative Analysis
VIB4920: Viela Bio
Product Description
Research and Development
Product Development Activities
Drug profiles in the detailed report.
Early stage products (Phase I/II)
Comparative Analysis
TX200-TR101: Sangamo therapeutics
Product Description
Research and Development
Product Development Activities



Drug profiles in the detailed report. Inactive Products Comparative Analysis Kidney Transplant Rejection Key Companies Kidney Transplant Rejection Key Products Kidney Transplant Rejection- Unmet Needs Kidney Transplant Rejection- Market Drivers and Barriers Kidney Transplant Rejection- Future Perspectives and Conclusion Kidney Transplant Rejection Analyst Views Kidney Transplant Rejection Key Companies

Appendix



## **List Of Tables**

### LIST OF TABLES

- Table 1 Total Products for Kidney Transplant Rejection
- Table 2 Late Stage Products
- Table 3 Mid Stage Products
- Table 4 Early Stage Products
- Table 5 Pre-clinical & Discovery Stage Products
- Table 6 Assessment by Product Type
- Table 7 Assessment by Stage and Product Type
- Table 8 Assessment by Route of Administration
- Table 9 Assessment by Stage and Route of Administration
- Table 10 Assessment by Molecule Type
- Table 11 Assessment by Stage and Molecule Type
- Table 12 Inactive Products



## **List Of Figures**

#### LIST OF FIGURES

Figure 1 Total Products for Kidney Transplant Rejection Figure 2 Late Stage Products Figure 3 Mid Stage Products Figure 4 Early Stage Products Figure 5 Preclinical and Discovery Stage Products Figure 6 Assessment by Product Type Figure 7 Assessment by Stage and Product Type Figure 8 Assessment by Route of Administration Figure 9 Assessment by Stage and Route of Administration Figure 10 Assessment by Molecule Type Figure 11 Assessment by Stage and Molecule Type Figure 12 Inactive Products



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