

CAR-T Therapy in Haematological Malignancy: Early Stage Outlook: KOL Insight [2018]

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Abstracts

How are CAR-T cell therapies revolutionising treatment of haematological cancer?

Last year witnessed the FDA approval of the first two anti-CD19 CAR-T cell therapies in two types of blood cancer. Find out how these novel treatments are impacting treatment choices so far and how their introduction is progressing in the US. Eight of the world's leading key opinion leaders (KOLs) from the US and Europe provide their views on the opportunities and challenges that face these exciting treatments across multiple haematological cancer settings and discuss the potential logistical, pricing, reimbursement and market access (PR&MA) hurdles, and how they can be overcome.

Learn how KOLs see the future CAR-T therapy market evolving, and how they expect developers to successfully differentiate their CAR-T therapies in KOL Insight: CAR-T Therapies in Haematological Malignancy. Experts also provide their candid views on next-generation CAR-T approaches and their potential adoption in other blood cancers.

Take a tour of the report now

The table of contents

The key business questions answered

The key KOL quotes

See the therapies covered

Find out who the 3 EU & 5 US KOLs are



Review an extract from the report - 1 drug profile

Top takeaways

Kymriah and Yescarta are now FDA-approved but how are they being prescribed in the post-approval setting? Experts reveal how the roll out of CART therapies in the US is progressing so far and what factors impact their prescribing decisions.

Which anti-CD19 CAR-T therapy is likely to emerge on top in terms of efficacy and safety? Find out how KOLs compare and contrast the six-month efficacy and safety data reported for Kymriah, Yescarta and JCAR017 in the DLBCL setting.

Will CAR-T therapies reach the European market in 2018? European KOLs weigh up the prospects of CAR-T therapy launching in Europe. What are the particular challenges facing CAR-T in the European market?

Pricing, reimbursement and market access of CAR-T cell therapy; what are KOLs' opinions? What market barriers are CAR-T therapies facing in the US and Europe and are payers prepared to fund them?

Which other disease areas hold the most promise for CAR-T therapy? What are the key opportunities for CAR-T in other disease areas (multiple myeloma, lymphoma and chronic lymphocytic leukaemia [CLL]) and which ones are KOLs most excited about?

Which next-generation CAR-T cell approaches fuel KOL excitement? Allogeneic 'off-the-shelf' approaches, dual-targeting CAR-T and combination strategies are in the early-stage pipeline. Which approach do KOLs think offers the most promise and why?

Can CAR-T cell therapies compete with gold-standard transplantation? Do experts envisage CAR-T cell therapies eventually sidelining transplantation and what do they expect from key ongoing studies such as Kite/Gilead's ZUMA-7?

What are the main clinical and commercial differentiators for CAR-T therapy



going forward? Find out if KOLs rank efficacy, safety, ease of use or cost as most important. What do CAR-T manufacturers need to do in order to compete effectively in this landscape?

How will CAR-T cell therapies impact future treatment algorithms of haematological cancers in 10 to 15 years? Can CAR-T therapies secure a niche in front-line, consolidation or first-relapse treatment settings?

Quotes

"There's absolutely no reason that CAR-T should not be at least second-line for DLBCL; patients who relapse with large cell lymphoma are incurable and this is probably the easier and safer therapy." US Key Opinion Leader

"There is no doubt about the fact that EMA will approve [CAR-T]. Judging from the data plus the experience, I think there is no doubt that both products will be approved." EU Key Opinion Leader

"[CAR-T] will be used anywhere between 10 and 30 percent of patients in general with these diseases. I would not be surprised if it's 50 percent or more." EU Key Opinion Leader

Sample of therapies covered

Marketed Therapies

Kymriah (tisagenlecleucel-T/CTL019; Novartis)

Yescarta (axicabtagene ciloleucel/KTE-019; Kite Pharma/Gilead)

Key Pipeline Therapies

JCAR017 (lisocabtagene maraleucel; Juno Therapeutics/Celgene)

JCAR014 (Juno Therapeutics/Celgene)

JCAR018 (Juno Therapeutics/Celgene)



UCARTs (Cellectis/Servier/Pfizer/Allogene)

bb2121 (bluebird bio/Celgene)

bb21217 (bluebird bio/Celgene)

CTL119 (Novartis)

AUTO2 (Autolus)

AUTO3 (Autolus)

CYAD-01 (Celyad)

Sleeping Beauty CAR-T cell programme (Ziopharm)

Plus other next-generation CAR-T therapy approaches

KOLs interviewed

KOLs from North America

Dr. Terry J. Fry MD, Director of Cancer Immunotherapy and co-Director of Human Immunology and Immunotherapy Initiative at the University of Colorado School of Medicine, Denver, Colorado, US

Dr. Partow Kebriaei MD, Professor, Department of Stem Cell Transplantation, Division of Cancer Medicine, The University of Texas MD Anderson Cancer Center, Houston, Texas

Dr. Frederick Locke MD, Medical Oncologist and Translational Researcher in the Department of Blood and Marrow Transplant and Cellular Immunotherapy at the Moffitt Cancer Center, Tampa, Florida, US

Dr. Craig S. Sauter MD, Hematologic Oncologist at the Memorial Sloan Kettering Cancer Center (MSKCC), New York, US



One Anonymous US KOL (MD, PhD) leading expert in CAR-T cell research and transplantation

KOLs from Europe

Dr. Reuben Benjamin MBBS MRCP FRCPath PhD, Consultant Haematologist and CAR-T cell specialist at King's Hospital London, London, UK

Professor Dr. Ulrich Jäger MD PhD, Professor of Hematology, Head of the Clinical Department of Hematology and Hemostasis, Medical University of Vienna. Austria

Professor Gilles Salles MD PhD, Chair of the Lymphoma Hub, Head of the Haematology Department of the Lyon Sud University, Lyon, France

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